

MEETING ABSTRACT

Open Access

Our experience in surgery for colorectal cancer in elderly patients

F Mosca*, M A Trovato, E Minona, C Il Grande, T R Portale, S Puleo

From de Senectute: Age and Health Forum
Catanzaro, Italy. 5-7 December 2009

Background

The effectiveness of surgery for colorectal cancer depends on it being carried out safely, which allows most patients to return to productive lives. Since colorectal cancer is a major cause of morbidity and mortality in elderly people [1], this study was designed to evaluate the outcomes of surgery in elderly patients.

Materials and methods

In the period 1973-2003, in our institution, we surgically managed 931 patients for colorectal cancer; 48 patients, 28 males and 20 females, aged 80 years and over (mean age 83.7 years). The tumor was located in the left colon in 20 cases (41.6%), in the rectum in 11 (22.9%) and in the right colon in 17 patients (35.4%). 33 patients (68.7%) were treated with colonic resection and primary anastomosis, 8 (16.6%) with Hartmann resection, 5 (10.4%) with colostomy, 1 (2%) with abdominal perineal resection and 1 (2%) with anastomosis between ileum and transverse colon without resection. The stage was A in 7 patients, B in 22, C in 12 and D in 7.

Results

The operative mortality rate was 0. The infection of the surgical wound occurred in 10 patients, whereas 4 cases of bronchopneumonia took place (8.3%). We had also registered 1 anastomotic leak in a male patient with left colon cancer (2.08%). The median hospital stay was 13.1 days (range 9-22 days) and the 5 year survival was 56.2% (27/48). No patients had adjuvant therapy

Conclusions

This study demonstrates that surgery should not be denied to elderly patients with colorectal cancer; age is not a limitation for surgery, tumour stage and co-

morbidity define the surgical treatment [2]. The morbidity and mortality figures for elective procedures are not different from the younger age population and favourable long-term outcome can be achieved by resectional surgery [3]. Diagnostic methods, rate of curative operations performed, staging, morbidity rate and 5-year survival rate are similar to younger patients. Finally the behaviour of colorectal carcinoma does not change with age and the age has no effect on the long-term survival of elderly patients.

Published: 19 May 2010

References

1. Smith JJ, Lee J, Burke C, Contractor KB, Dawson PM: Major colorectal cancer resection should not be denied to the elderly. *Eur J Surg Oncol* 2002, **28**:661-666.
2. Colorectal Cancer Collaborative Group: Surgery for colorectal cancer in elderly patients. A systematic review. *Lancet* 2000, **356**:968-974.
3. Devon KM, Vergara-Fernandez O, Victor JC, McLeod RS: Colorectal cancer surgery in elderly patients. Presentation, Treatment, and Outcomes. *Dis Colon Rectum* 2009, **52**:1272-1277.

doi:10.1186/1471-2318-10-S1-A17

Cite this article as: Mosca et al.: Our experience in surgery for colorectal cancer in elderly patients. *BMC Geriatrics* 2010 **10**(Suppl 1):A17.

Submit your next manuscript to BioMed Central and take full advantage of:

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at
www.biomedcentral.com/submit



Department of Surgical Sciences, Organ Transplantation and Advanced Technologies, University of Catania, Catania, Italy, 95100, Italy