

Abstract

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Comparative analysis of post-operative outcomes between left and right sided colectomies

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Objectives:

Studies have shown improved outcomes in patients with colectomies managed with enhanced recovery pathways (ERP). However, few studies have differentiated outcomes between the type of resections and surgical approach. We aim to compare the postoperative outcomes of right and left sided colonic resections in laparoscopic vs open surgery.

Methods:

A retrospective review of consecutive patients who underwent elective right and left colectomies between the period of January 2014 to December 2017, was conducted in a tertiary hospital in Singapore. The patients were managed according to standardized ERP. Outcome measures were time to escalation to diet, time to first flatus and length of hospital stay.

Results:

Out of 193 eligible patients, 72(37.3%) underwent right colectomy (RC) while 171(62.7%) underwent left colectomy (LC). Laparoscopic approach was utilized in (41/72)56.9% of the RC group and (90/121)74.4% in the LC group. Time to escalation to diet was 4.29(4.29+/-3.3) days in the RC vs 2.89(2.89+/-2.35) days in the LC group, p=0.001. Time to flatus was 3.07(3.07+/-2.9) days in the RC group and 2.44(2.44+/-2.1) days in the LC group, p=0.008. Twenty-one (29.2%) patients in the RC and 16(13.2%) in the LC groups had postoperative ileus, p=0.007. Anastomotic leak rates were 4.2% in RC and 5.8% in LC groups, p=0.624. Length of stay in RC group was 7.5(7.5+/-7.8) days and 5.22(5.22+/-3.9) days in the LC group (p=0.002). 30-day readmission rates were 6.94% in the RC vs 3.3% in the LC group, p= 0.246. The favorable outcomes in the LC over the RC group remained significant in the laparoscopic but not in the open approach.

Conclusions:

Laparoscopic left sided colectomies were associated with faster recovery of bowel function and shorter length of stay as compared to right sided colectomies.

References: