

Abstract

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Laparoscopic surgery as an adjunct for ERAS in colorectal surgery: A comparison study between Laparoscopic and Open Anterior Resections for colorectal cancer.

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Objectives:

The objective of this study was to compare the benefits of laparoscopic surgery in colorectal resections which may be used as an adjunct for ERAS. Outcome comparison were between laparoscopic assisted anterior resections (LAAR) and Open approach anterior resections (OAR).

Methods:

This is a retrospective cross sectional study of all colorectal cancer patients operated over duration of 1 year from 2017 to 2018. Parameters included were demography, type and surgery, length of stay (LOS), involvement of proximal and distal doughnut and post-operative complications were analysed univariate and multivariate analysis.

Results:

A total of 23 patients with a mean age of 62.5 ± 12.2 years were included. There were 12 patients in LAAR group and 11 patients in the OAR group. The mean time from diagnosis to surgery was 97.1 ± 154.84 days. Duration of surgery was shorter in OAR (129.5 ± 54.4) minutes in comparison to LAAR (147.9 ± 39.4) minutes. Mean LOS was shorter in the LAAR group with 5 ± 1.5 days compared to the OAR group of 7.4 ± 1.5 days. However, there were no significant p-value for both duration of surgery ($p=0.322$) and LOS ($p=0.87$) from univariate analysis. A total of three complications from the OAR group and two from the LAAR group were recorded.

Conclusions:

In conclusion, length of stay was shorter for laparoscopic assisted anterior resections. The possible reasons of no significant results on univariate analysis could be due to small sample size. However, this had led to change the practice to offer more laparoscopic surgeries as an adjunct to ERAS in colorectal surgery.

References: