

K4.1. Short-term results following first 38 cases performed by TaTME (Transanal Mesorectal Excision) for low rectal cancer

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Background:

Surgical treatment of low-rectal cancer may involve many technical difficulties. This applies in particular to men, obese patients and those with a narrow pelvis. Presented in 2010 by Lacy et al. TaTME technique significantly improved the insight into the surgical field and facilitated the operation of low-located tumors.

Material and methods:

The aim of the study was to evaluate the short-term results following the TaTME procedure performed at the Lower Silesian Comprehensive Cancer Center in Wrocław. Additionally, the qualities of obtained postoperative specimens were analyzed based on histopathological results. Patients aged from 31 to 86 years who were diagnosed with low rectal cancer were qualified for surgery using the TaTME method. Local spread ranged from cT1N0 to cT4N2. From May 2016 to May 2018, a total of 38 operations were carried out at our center. A hybrid technique (transanal videoscscopy approach with a laparotomy), as well as presented by Lacy Cecil approach, with two laparoscopic teams, were performed. 28 patients received neoadjuvant treatment: short radiotherapy 5x5 Gy (17 patients), radio-chemotherapy (7 patients) and chemotherapy alone (1 patient).

Results:

Among the operated patients, in the follow-up, no features of local recurrence or neoplastic dissemination have been found. In the histopathological analysis of the postoperative specimens, all 38 patients had a clear proximal and distal resection margins. In the evaluation of circumferential resection margin (CRM), only one patient had a positive CRM. In the remaining patients, the CRM's were clear. Postoperative staging described by TNM classification ranged from pT1N0 to ypT3N2. In five of the operated patients, the histopathological report showed a higher staging compared to the preoperative workup, eighteen had lower advancement and in twelve it matched the preoperative clinical staging. All patients operated in our center using the TaTME technique had a protective defunctioning ileostomy. Of the patients who underwent reversal of ileostomy within 3 to 12 months following the primary operation, we observed one case of the low anterior resection syndrome.

Conclusions:

The TaTME method, although it is a difficult and very demanding technique, seems to be promising in terms of oncological outcomes and remaining functionality of anal sphincters as well as good quality of life. Nevertheless, it requires further researches and improvement of the competence of the surgical team.

Category: K4. Chirurgia kolorektalna – nowe metody i techniki operacyjne / Chirurgia minimalnie inwazyjna w nowotworach narządowych / Powikłania w chirurgii minimalnie inwazyjnej / Colorectal surgery – new methods and surgical techniques / Minimally invasive surgery in organ tumors / Complications in minimally invasive surgery