



Colon Cancer Agress Laparoscopy Surgery??????



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Introduction

Colorectal cancer represents one of the most frequent neoplasms in Western countries, in our country the incidence is between 20-34 cases per 100,000 inhabitants. In Spain, as is the case in all industrialized countries, the incidence of colorectal cancer has tended to increase in recent years. In addition, and despite the progress made in its treatment, colorectal cancer accounts for 41% of the total deaths due to digestive cancers in the world. It is the second cause of cancer in our environment, surpassed by the lung in men and women in women, with an overall mortality of 40-50%.

Result and Conclusion

Laparoscopic surgery is a "minimally invasive" surgical technique, originally used to treat gynecological problems and to remove the gallbladder [1]. In the last 10 years the use of this procedure has diversified, thus including diseases of the colon and rectum. In traditional "open" surgery, the surgeon makes a wide abdominal incision while in the laparoscopic approach small incisions of 0.5 to 1cm are used [2]. Through these, the surgeon uses a video camera that allows him to observe the abdominal cavity with a high resolution [3]. With special instruments the same operations are carried out as with traditional surgery but avoiding large wounds.

The Most Recognized Advantages of Laparoscopy

Less pain after surgery (postoperative) reduction in hospitalization time. Restart earlier to a solid diet.

Faster activity of intestinal function [4]. Soon return to normal activities of daily life (including return to work) better aesthetic results due to the absence of large scars. Most colorectal surgeries can be performed by laparoscopy; simply the surgeon must define who are the appropriate patients to be treated with this method [5].

Some of the Pathologies that can be intervened Polyps difficult to access or large.

- i. Tumors or cancer of the colon and rectum.
- ii. Resection of the colon due to diverticular disease.
- iii. Rectal prolapse.
- iv. Inflammatory diseases (Crohn's disease and ulcerative colitis)
- v. Sigmoid volvulus.
- vi. Low intestinal bleeding that requires resection.

The risks of difficulties in this type of intervention are the same as in conventional surgeries. A few years ago, the safety of laparoscopic surgery for the treatment of cancer was questioned; the results of studies conducted on patients showed that this method is safe to cure cancer patients [6]. This is not a minor issue since, in Argentina; colorectal cancer is the second cause of death, after lung cancer. The Coloproctology Section of the Service of Surgery of the German Hospital began a program of development of this method in the year 2000; this program is in charge of colorectal surgeons with training abroad [7]. The results obtained with this surgery have been very satisfactory and are comparable to those observed in the World Reference Centers [8].

Potential mechanisms for prevention of sowing in laparoscopic ports. Although there is concern about possible tumor plantings in laparoscopic port sites, it seems that these are mainly related to preventable technical factors through adequate training in laparoscopic surgery and the application of a careful surgical technique.

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