



GAVIN CONFERENCES

International Conference on Surgery and Medicine

July 16-17, 2018 Bangkok, Thailand

Saving the transverse colon: New surgical procedure in case of extensive left colon surgery

Marica Grasso

University of Salerno, Italy

Introduction: After extensive surgery of the left colon for cancer, chronic inflammatory bowel disease or abdominal trauma, since it is not always possible to create a well-vascularized and tension free anastomosis between the transverse colon and the rectum, it is necessary to choose among three surgical procedures: a definitive transverse colostomy, in order to save large intestinal functions; an ileo-rectal anastomosis, when it is preferred to preserve continence; the Deloyers procedure which involves the removal of the transverse colon and the transposition of the right colon into the pelvis to create an anastomosis with the rectum.

Materials and Methods: A 63 years-old male patient, underwent videolaparoscopic surgery for an adenocarcinoma of the rectum. Due to the occurrence of ischemia in the splenic flexure, we decided to perform an extended left proctocolectomy with a transverse colostomy. One year later, the patient undergo to recanalization surgery. The new procedure consisted in restoring the intestinal continuity between the transverse colon and the rectal stump by transposition of the right colon and creation of three anastomosis. The first was a stapled side-to-side ileo-transverse anastomosis, the second was a dual-layer hand-sewn end-to-end transverse-cecum anastomosis and last one was a single-layer hand-sewn end-to-end right colo-rectal anastomosis. Finally, a temporary ileostomy was performed. After 6 months the patient obtained a definitive recanalization.

Results: After recanalization, the patient showed normal bowel movements (2-3 per day) and soiling. During two weeks after hospital discharge, he progressively restored continence. The patient reported a satisfactory improvement of quality of life.

Conclusion: Saving the transverse colon and the right colon means achieving not only continence but also a better degree of reabsorption of liquids and vitamin K and group B production in order to keep intestinal functions as similar as possible to the normal physiology, the disadvantage, represented by the need to create three anastomosis, is offset however by the benefits in terms of improving the quality of life: avoiding diarrhea, incontinence and post-operative urgency.

Biography

Marica Grasso is a PhD student at the University of Salerno, Italy. She completed her medical studies and specialization in General Surgery at the University of Naples "Federico II" and perfected her career as a Surgeon at the Tertiary Care Hospital "A. Cardarelli" in Naples. She works as a Professor for the National Reference Schools of the Italian Society of Surgery in Endocrine Surgery, Advanced Laparoscopic Surgery and Technological Innovation applied to Surgery. She has published in the fields of abdominal surgery and endocrine surgery in reputed International Journals and has attended as a discussant at numerous International Conferences.

maricagrasso@hotmail.it