

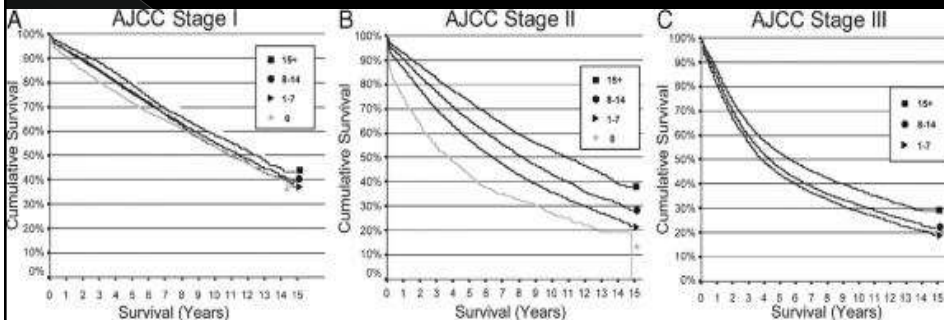
Laparoscopic versus open colorectal resection regarding the lymph node retrieval

Hany M. S. Mikhail
MD, FEBS, FRCS, FACS
Lecturer of Surgery, Cairo University

Background

What's the importance of this subject ?

Number Of Lymph nodes and survival in all stage



82,896 patients

P>0.05

Ann Surg. 2009 Oct; 244(4): 402-416
doi: 10.1097/D1.0b013e3181717180

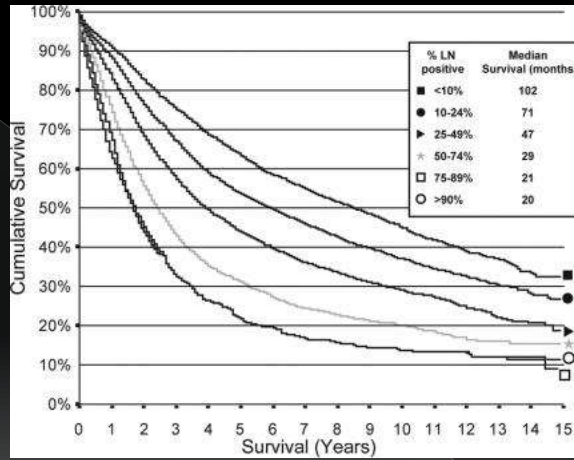
PMCID: PMC1355991

More Extensive Nodal Dissection Improves Survival for Stages I to III of Colon Cancer

Number Of positive Lymph nodes and survival in stage III

82,896 patients

$P > 0.05$



Ann Surg. 2004 Oct; 244(4): 602-416
doi: 10.1097/01.sla.0000237866.11717.80

PMCID: PMC1844888

More Extensive Nodal Dissection Improves Survival for Stages I to III of Colon Cancer

Is there any difference in LN number retrieved between open and laparoscopic surgery

Dis Colon Rectum. 2013 Jun;56(6):679-88. doi: 10.1097/DCR.0b013e318267c584.

Laparoscopic resection of rectal cancer results in higher lymph node yield and better short-term outcomes than open surgery: a large single-center comparative study.

234 patients underwent resections for primary rectal cancer

118 laparoscopic and 116 open resections.

The laparoscopic group had significantly more lymph nodes than the open group

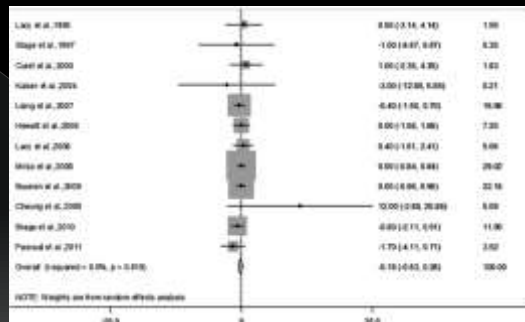
P<0.05

Lymph Node Harvested in Laparoscopic Versus Open Colorectal Cancer Approaches: A Meta-analysis

Zhenjie Wu, MD,* Sen Zhang, MD,* Lynn Htet Htet Aung, MD,† Jun Ouyang, MD,* and Lu Wei, MD‡

- 24 randomized controlled trials,
- 6264 participants,

P>0.05



No statistical difference in LN between both groups

J Clin Oncol. 2007 Jul 20;25(21):3061-8.
Randomized trial of laparoscopic-assisted resection of colorectal carcinoma: 3-year results of the UK MRC CLASICC Trial Group.
Jayne DG¹, Guillou EA, Thorpe H, Quirke P, Copeland J, Smith AM, Heath RM, Brown JM; UK MRC CLASICC Trial Group

Lancet Oncol. 2014 Jun;15(7):757-74. doi: 10.1016/S1470-2045(14)00002-9. Epub 2014 May 29.
Open versus laparoscopic surgery for rectal or locoregional cancer after neoadjuvant chemoradiotherapy (COREAN trial): survival outcomes from an open-label, non-inferiority, randomised controlled trial.

Lancet Oncol. 2013 Mar;14(3):210-8. doi: 10.1016/S1470-2045(13)70018-0. Epub 2013 Feb 6.
Laparoscopic versus open surgery for rectal cancer (COLOR II): short-term outcomes of a randomised, phase 3 trial.

Aim of the Study

Aim of the Study

-
- ❖ To compare between open and laparoscopic technique in lymph nodes retrieval

PATIENTS AND METHODS

PATIENTS AND METHODS

Retrograde cohort study

155 cases of colorectal cancer in the period between 9/2014 to 3/2016

Exclusion Criteria:

- Tumors other than adenocarcinoma.
- Incorrect specimen reporting
- Lost pathology

PATIENTS AND METHODS

Total number :
155

Laparoscopic
Cases
65

Open cases
90

Laparoscopic approach

Standard medial to lateral approach

Open approach

80% were lateral to medial approach

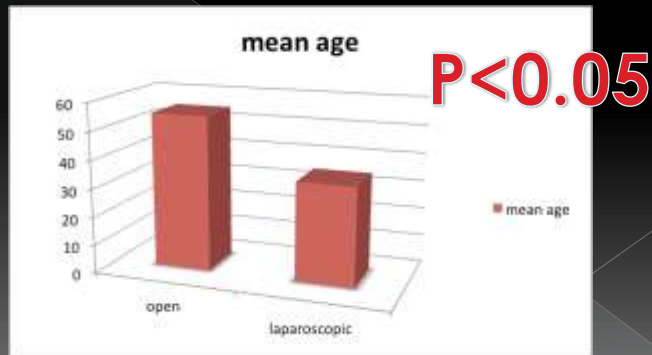
Results

Results :

❖ Patient age:

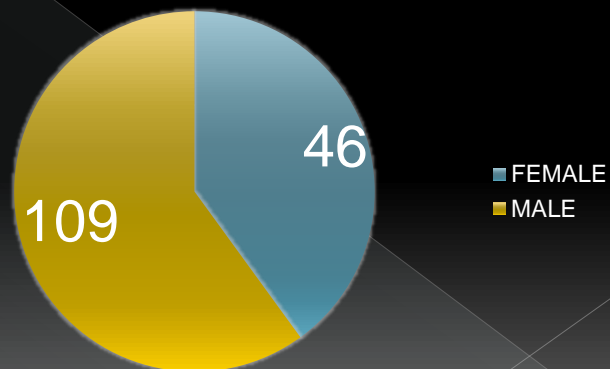
Mean age was 57 years \pm 16.84
(range: 27 to 80 years)

There was significant age difference between both groups

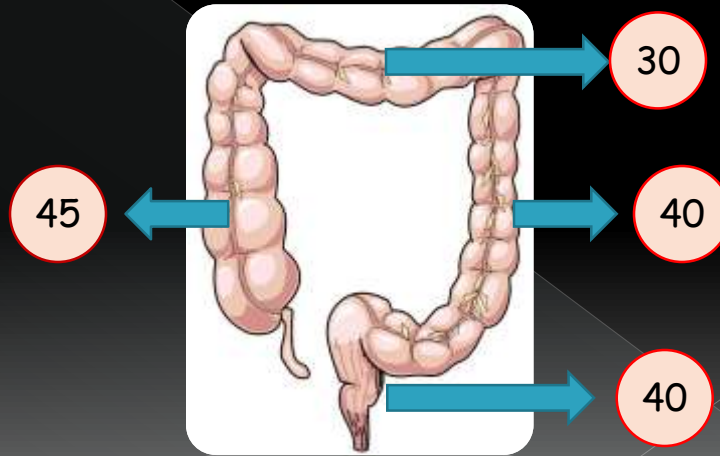


Results :

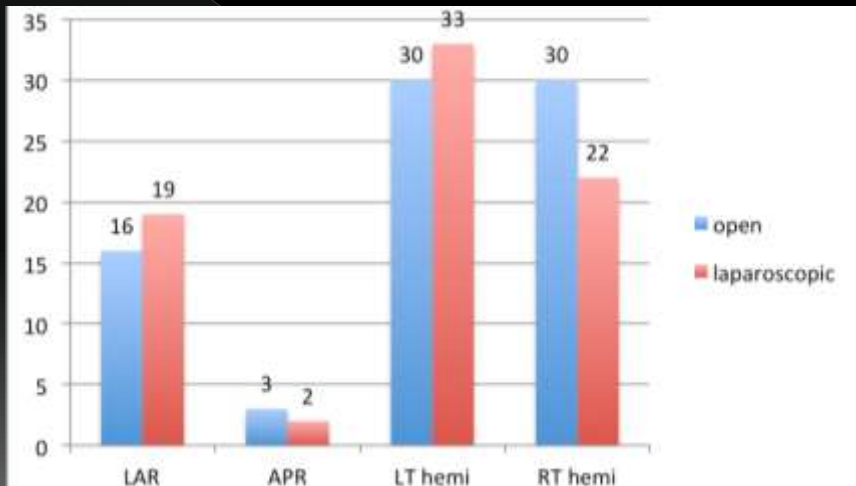
❖ Patient Gender :

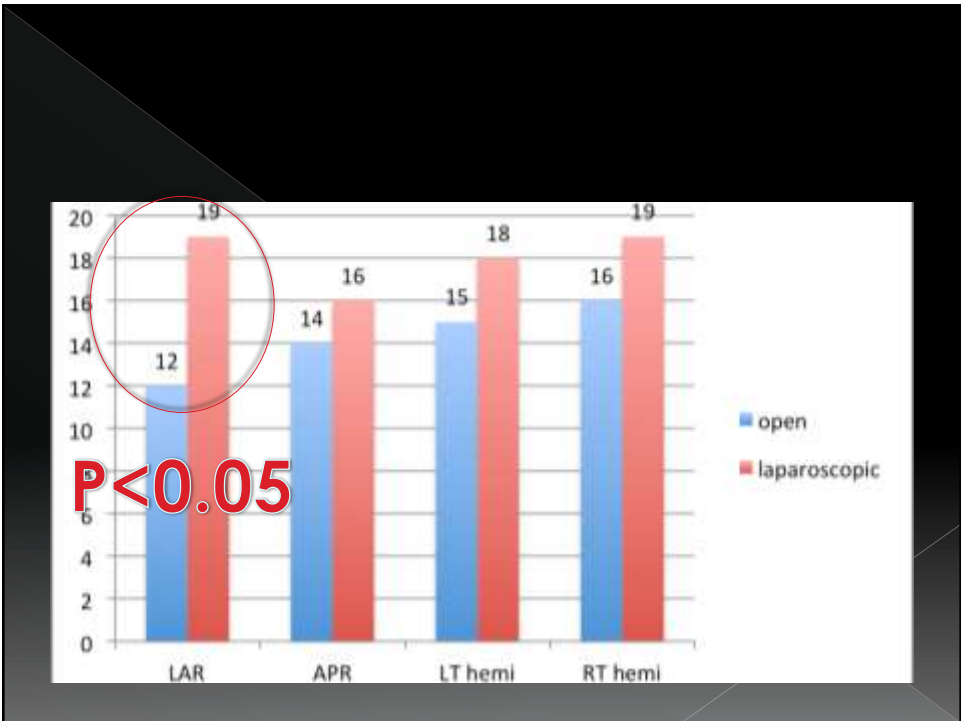
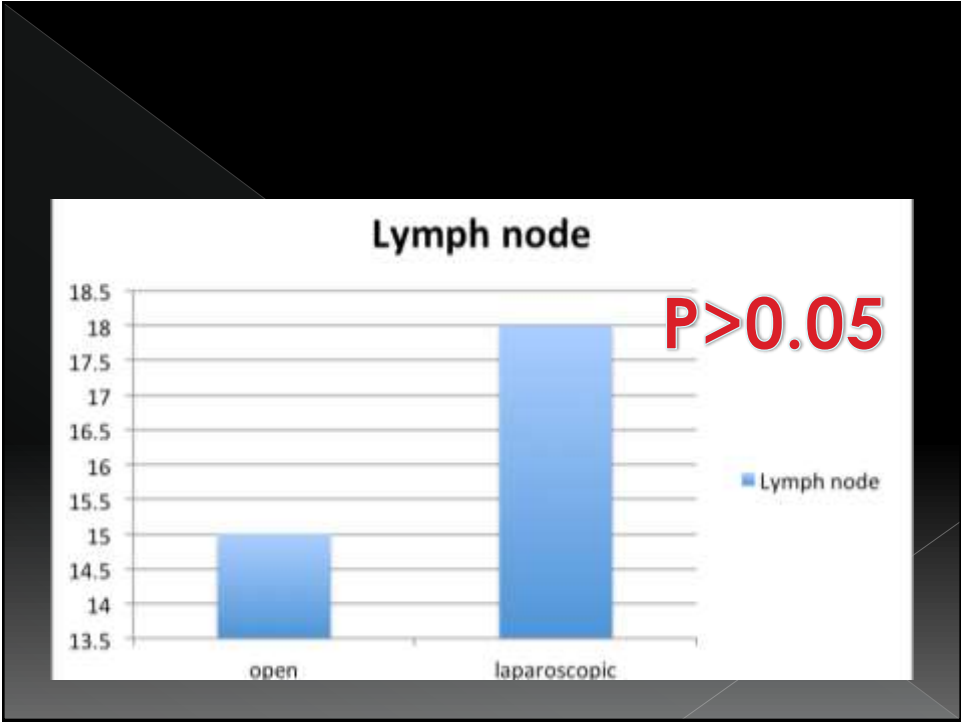


Results :
Site of the tumor:



Results :
Surgical procedure performed







Discussion & conclusions

Discussion & conclusions

- ❖ Although, the number of Lymph nodes retrieved in laparoscopic group was higher in all operations, it did not reach a statistically significant level, Except in the LAR group

Discussion & conclusions

- Both Technique reach the optimum number of LN recommended

Discussion & conclusions

- ❖ LAR group:
The explanation in the difference between both groups can be explained by the ability of laparoscope for a better dissection in the narrow pelvis

Discussion & conclusions

- Recent advances like TME will improve pelvic dissection and will improve the survival
- Laparoscopic colectomy should be encouraged

