Elective Colorectal Cancer Surgery during COVID-19 Pandemic: A Peruvian Single-Center Experience

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Introduction

The COVID-19 pandemic had a great impact in the global healthcare system. The aim of this study is to analyze our results in colorectal cancer surgery during the COVID-19 pandemic in Almenara Hospital, Lima, Peru.

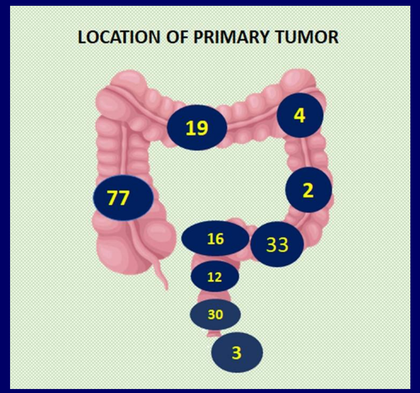
Methods

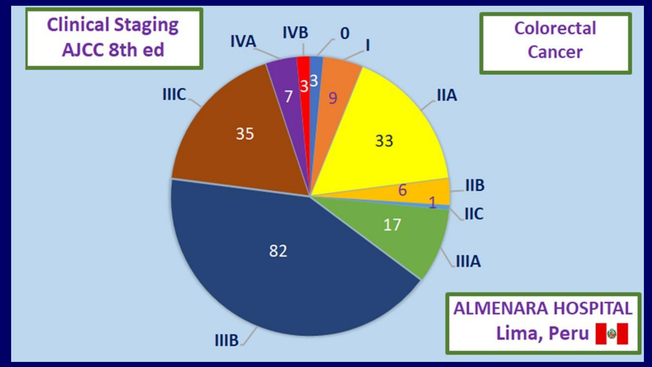
A retrospective study was conducted using the Almenara hospital database of patients with CRC who underwent elective surgery between July 1, 2020 and June 30, 2022.

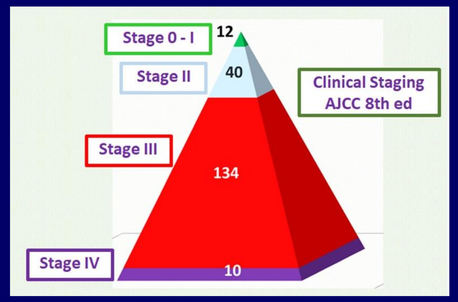
Results 1

We included 196 patients, 135 (69%) with colon and 61 (31%) with rectal cancer, 105 (53.6%) were male and the mean age was 66 years (35-91 years). The histopathological diagnosis was adenocarcinoma in 175 patients (89.2%).

Laparotomy and laparoscopic surgery were performed in 139 (71%) and 57 patients (29%), respectively. The mean (± SD) number of lymph nodes harvested in colon cancer was 26.8 ± 12.24; 28.5 % of all studied cases had lymph nodes affected; 37.2% of the studied cases had positive lymphovascular and 6.1% had perineural invasion.



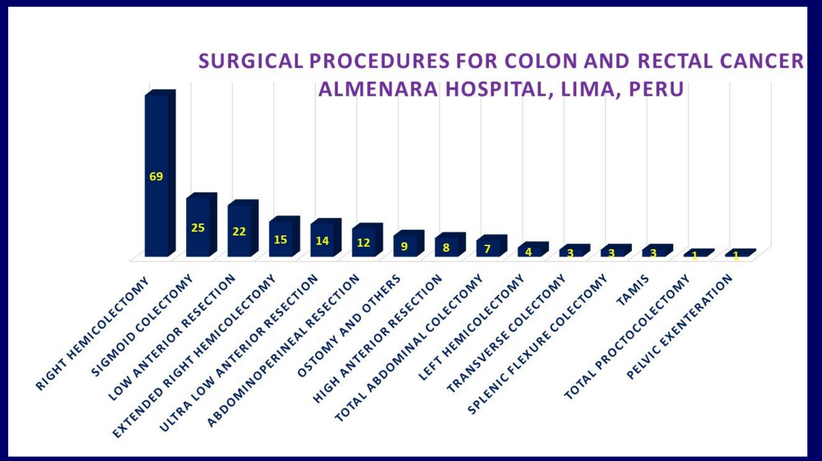






Results 2

The main complications seen were anastomotic leakage in 5.1%, wound site infection in 6.1%, and intra-abdominal abscess in 9.6%; the mortality rate was 1.5% and the rate of reoperation was 8.1%. The *median* length of *postoperative* in-*hospital stay* was 7 days (1 day: TAMIS and 88 days : pelvic exenteration)*; and 57% of colorectal cancer patients received adjuvant therapy*.



Conclusions

We follow the recommendations of SAGES to not postpone surgical treatment for colorectal cancer. During the pandemic, 29% of the colorectal cancer surgeries were performed by laparoscopy at our unit and before the pandemic this percentage was higher (57%).