Multicentre cohort study of short course preoperative radiotherapy (SCPRT) and delayed Transanal Endoscopic Microsurgery (TEMS) in frail patients with early stage rectal cancer

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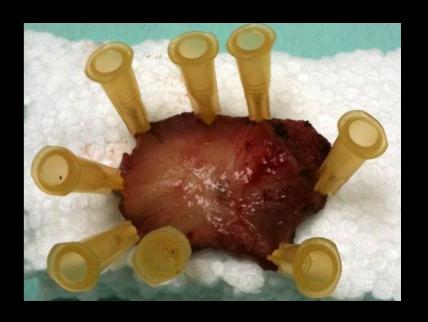


No conflicts of interest

What is the benchmark for T1 and T2?







Standard surgery +/- radiotherapy

TEM

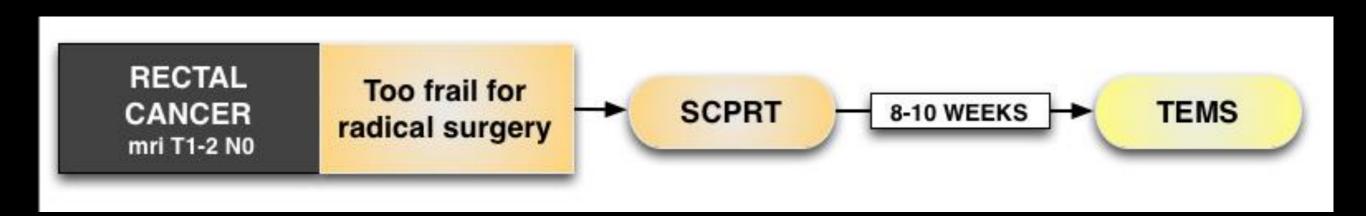


Radiotherapy +/- TEM

SCPRT and TEMS cohort study

Manchester, Chichester, Bradford and Birmingham

- □ 5 centres
- □ 63 patients (2007- 2012)
- □ median age 75 (range 51-94)
- ☐ Staged > T3 (MRI and ERUS)



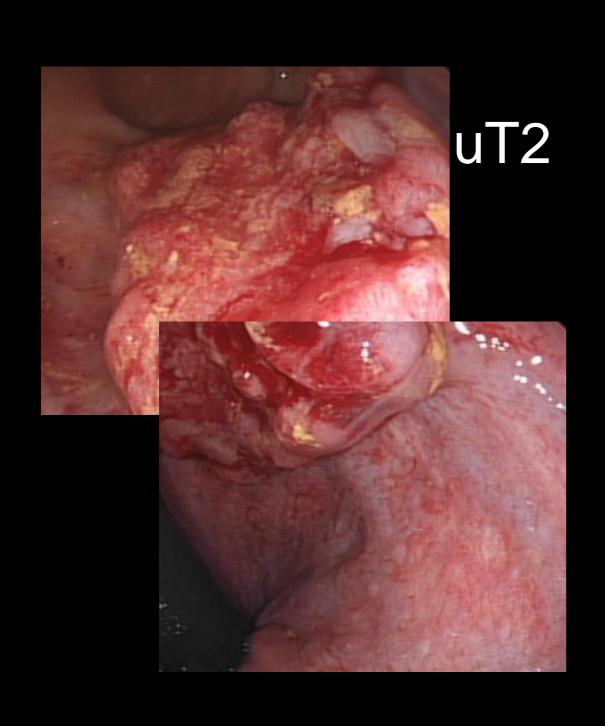
Typical pathology

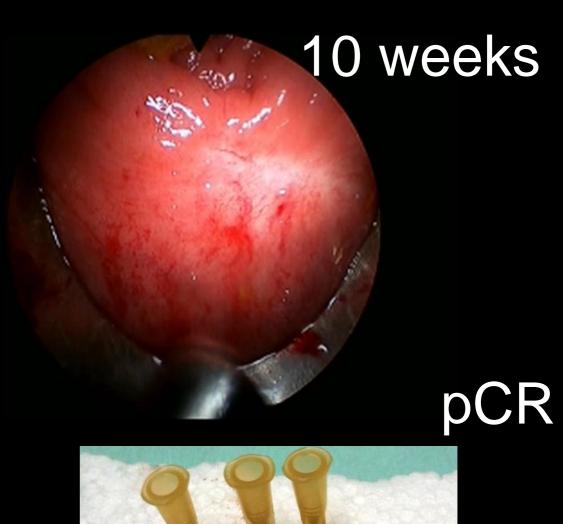






Complete clinical/ pathological response







SCPRT and TEMS results

	pCR	ypT1	урТ2	урТ3	
n	20	23	19	1	63
%	32%	36%	30%	2%	
R1	0	0	2	1	3
Local recurrence	0	0	4	0	4
Distant recurrence	1	1	1	0	3
Mean follow up m (range)	24 (2-48)	12 (5-30)	15 (1-48)	12	13

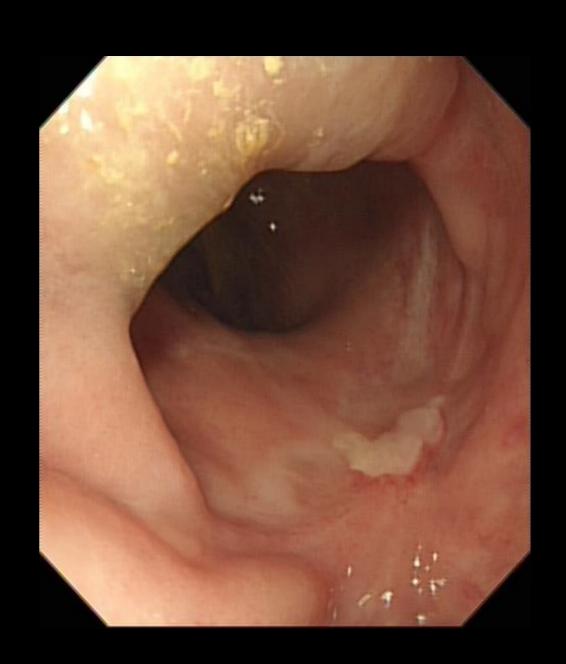
COMPLICATIONS

	Acute (%)	Chronic (%)
Radiotherapy proctitis	4.8	1.6
SURGICAL		
Suture line dehiscence	12.7	
Soiling, urgency, diarrhoea	19.0	4.8
Rectal Pain	4.8	1.6
MEDICAL		
MI	1.6	
Confusion	1.6	1.6
Total (% of patients)	33.3	7.9

COMPLICATIONS



SUTURE LINE DEHISCENCE 12.7%



AT 1 YEAR

LOCAL Recurrence

- □ Site
 - □ Lymph nodes 1/4 N+
 - □ Lumen 4/4 luminal recurrence

- □ Risk factors
 - □ 4/4 T2 i.e. no radiotherapy response
 - 2/4 also poorly differentiated

SURVIVAL

- □ 52 (82.5%) patients alive.
- □ 48 (76.2%) alive + disease free
- □ 11 deaths
 - □ 7 not disease related
 - □ 4 disease related
 - 1 TEM mortality (ASA 4)
 - 1 cardiac event after successful salvage surgery

Conclusions

- □ Safe in frail, elderly population
- □ 1/3 pCR + 1/3 ypT1 = satisfactory response
- □ 1/3 no response
- □ Local recurrence predictable
 - □ lack of response
 - presence of an additional adverse feature