

Current Common Dilemmas in Colorectal Surgery

Christopher M. Schlachta
Patricia Sylla
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*For Paul, Jonah, Ariel, Mark, William, and
Mary Lynn.*

Preface

In April 2015, the Society of American Gastrointestinal and Endoscopic Surgeons (SAGES) sponsored a symposium at the annual meeting, held in Nashville, Tennessee, entitled “Current Common Dilemmas in Colorectal Surgery.” The symposium was divided into three sessions that tackled common controversies related to selecting the most appropriate surgical treatment for various colorectal pathologies, the role of novel technologies and techniques to assist in their surgical management, and intraoperative strategies to overcome complications during routine and complex colorectal surgery. The success of the symposium inspired this textbook, which has the objective of providing a comprehensive and up-to-date overview by experts of current recommendations and strategies in the management of common colorectal pathologies.

Following the introduction of laparoscopic colon surgery, it has often been heard that the surgical community is waiting for the “next big thing.” The reality is that, like all scientific advancements, major change occurs through a series of small steps. The evolution of care for patients with colorectal disease continues to evolve dramatically on several fronts prompting us to deliver this text in nine sections.

From optimizing preoperative bowel preparation to adoption of enhanced recovery pathways, the various strategies to minimize the perioperative morbidity of colorectal surgical procedures are extensively reviewed, with emphasis on the current standards and controversies in the endoscopic management of colorectal neoplasia. With respect to colorectal emergencies such as perforated diverticulitis and *Clostridium difficile* colitis, the role of minimally invasive and organ-preserving strategies is reviewed including various intraoperative strategies to optimize outcomes.

With respect to common pelvic floor disorders encountered in colorectal practice such as obstructed defecation, rectal prolapse, and fecal incontinence, the diagnostic workup and therapeutic options are reviewed, as are dilemmas regarding the role of surgery and optimal surgical approach when appropriate. With respect to other common colorectal pathologies such as symptomatic parastomal hernia, the role of hernia prevention and optimal strategies for repair is covered, as are recent trends in minimally invasive techniques applied to colorectal surgery, including the techniques and impact of intracorporeal anastomosis and natural orifice specimen extraction.

Finally, current controversies regarding the management of rectal cancer, including dilemmas related to selection and impact of neoadjuvant therapies, are extensively

reviewed. The various strategies for sphincter preservation and abdominoperineal resection (APR), as well as various techniques to perform total mesorectal excision (TME), are reviewed at length, including the evolving role of transanal TME (taTME).

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