

14th International Conference on

Surgical Pathology & Cancer Diagnosis

May 17-18, 2018 | Rome, Italy

Audit of pT1 colorectal carcinoma detected in bowel cancer screening patients (BCSP) and non-screening symptomatic patients

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Introduction: Early pT1 colorectal carcinoma is defined by invasion of tumor into the submucosa and not beyond. Depth of invasion, histological grade, presence of lymphovascular invasion, budding, poorly differentiated clusters and resection margins are important predictors of lymph node metastasis and tumor behavior.

Materials & Methods: This is a retrospective analysis of pT1 colorectal cancers diagnosed in the histopathology department over a period of seven years (2010-2016). The available clinical records and histopathology slides were reviewed for various parameters.

Results: The study included 28 BCSP cases and 51 non-screening cases that had either polypectomies or colorectal resections. Male predominance with an age range of 55-74 yrs was noted in BCSP cases; however, in non-screening patients the age range was 49-91 years. In BCSP cases all polyp cancers were on left side with sigmoid colon (18/28) being the commonest site. In non-screening cases, cancers were noted in both right and left sides of colon with rectum being the commonest site (22/51). The cancers were smaller in BCSP cases (width <5 mm in 25/28) whereas a proportion were larger (width >5 mm in 22/51) in non-screening cases. Poorly differentiated clusters were more commonly seen in non-screening cases (13/51) as compared to BCSP cases (1/28). In patients who underwent major resections, lymph node metastasis was seen in five non-screening cases and only one BCSP case.

Conclusion: BCSP cases tend to have smaller polyp cancers, all on the left side and with very low incidence of lymph node metastasis as compared to non-screening pT1 cancers.

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