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“Do we have to do it?” Role of early colonoscopy after appendicectomy in the elderly: A singlecentre experience

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Purpose: Appendicitis is the most commonly presumed diagnosis for the right sided abdominal pain. It can be the first sign of colorectal cancer (CRC) in the patients over the age of 50 years. Vice-versa, appendectomy has been reported as a precursor of colorectal cancer owing to its immune function. Value of colonoscopy, in terms of detection rate and time association, in those patients has not been investigated extensively. The purpose of this study was to determine its role and optimal timing in early detection of colorectal cancer.

Methodology: Total 318 patients over the age of 50 years who had appendectomy from 2002 to 2014 were included in our study. Detailed data was collected for those patients who were further followed up with colonoscopy. Retrospective analysis of the rate of CRC detection, timing of colonoscopy and histopathology of the tumors was done.

Results: Total 63 out of 318 patients underwent colonoscopy after appendectomy. Out of 63 eight patients (12.7%) had CRC on colonoscopy. Male to female ratio was 7:1. Timing of colonoscopy ranged from one month to 24 months with median of 17 months. 62% of CRC was right sided. Majority (87.5%) of diagnosed CRC were advanced malignancies.

Conclusion: Colonoscopy is a useful tool for early detection of CRC after appendectomy in the patients over the age of 50 years. Appendectomy, in this cohort of patients, can be a potential predictor for CRC. Therefore colonoscopy is recommended to be performed routinely after appendectomy within 12 months.

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