The COLOSARC project: Strategies for Resection and Reconstruction of the Colon and Rectum in Retroperitoneal Sarcoma Surgery

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TARPSWG

Background

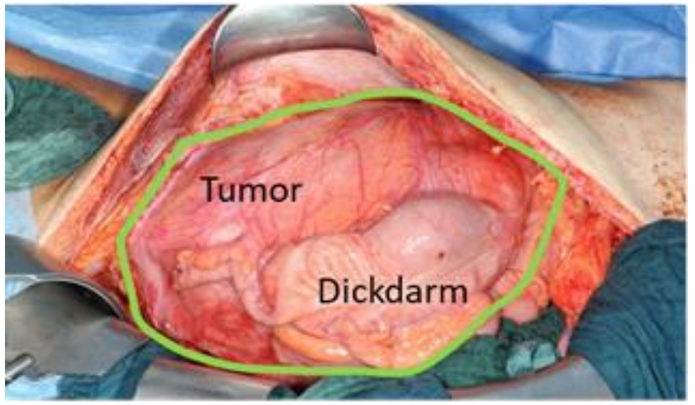
- More than 50% of all RPS cases will undergo colorectal resection
- Primary anastomosis is probably aimed for in most cases.
- Anastomotic leackage is a typical risk of colorectal resections that may lead to severe postoperative events (Clavien-Dindo ≥3 occur in up to 20% of all RPS cases).
- TARPS-WG published a 3% anastomotic leackage rate after radical resection of RPS – while the number of primary anastomoses and primary/secondary stomata was not reported.

Aims of the COLOSARC project

- Provide an up-to-date assessment of colorectal resections and reconstruction techniques in the context of multivisceral resections for RPS

- Determine the number of primary anastomoses, their leackage rates, and the fraction of patients with primary and secondary stomas.

- Facilitate decision-making for colorectal resections in the context of multivisceral resections.



Design of the COLOSARC project

Cohort: All cases with colorectal resections

Required Data from RESAR:

- Patient characteristics including preoperative medical conditions and comorbidities
- Tumor and treatment characteristics (e.g. histological subtype, size, preoperative RT)
- Data from Surgery (e.g. number of resected organs, blood loss)
- Colorectal resection and reconstruction techniques (e.g. right hemicolectomy with primary anastomosis, Hartmann´s procedure)
- Postoperative adverse events

Additional Data (optional):

- Treatment of anastomotic leakage
- Management after secondary stoma placement

THANK YOU

For Further Questions please contact

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