

www.airavatcancercare.com

KYC with ACC

Know Your Cancer with Airavat Cancer Care

RECTUM CANCER

The rectum is a lower portion of the colon which connects the large bowel with the anus. The primary purpose of the rectum is to store formed stools in preparation for evacuation. When cells in the rectum grow uncontrollably and mutate, they can develop rectal cancer. It can also occur when polyps on the inner surface of the rectum become cancerous.

Adenocarcinoma is the most common form of rectal cancer that arises from the mucosa. Cancer cells may also spread to lymph nodes from the rectum on their way to another part of the body. The prognosis of rectal cancer is similar to colon cancer as it depends on the extent of the cancer spread. Since, the rectum is a part of the colon located in the pelvis; it poses additional treatment challenges when compared to colon cancer.

RISK FACTOR OF RECTUM CANCER

1. Age (50+ years)

Risk increases significantly as age goes up.

2. Family History of Colorectal Cancer

Having a parent, sibling, or child with colon/rectal cancer increases risk.

3. Genetic Syndromes

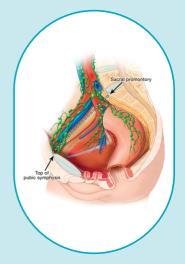
- Lynch Syndrome (HNPCC)
- Familial Adenomatous Polyposis (FAP)

4. Inflammatory Bowel Disease (IBD)

- Ulcerative colitis
- Crohn's disease

5. Unhealthy Lifestyle

- High red/processed meat diet
- Low fiber
- Smoking
- Alcohol
- Obesity and lack of physical activity





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RECTUM CANCER

SIGNS AND SYMPTOMS



Change in Bowel Habits



Feeling of incomplete evacuation



Rectal Bleeding



Tenesmus

MANAGEMENT OF DISEASE

DEPEND UPON

LOCATION OF TUMOR

Distance From Anal Verge

METASTASES

- Organ of Spread
 - No Of Mets

PRESENTING SYMPTOMS

- Obstruction Present
 - Bleeding

LOCAN STAGE

- Mesorectum Involvement
 - Nodal Spread In Iliac / Obturator / Paraaortic
 - Levator Involvement
 - Sphincter Involvement

DIAGNOSIS OF RECTUM CANCER



Clinical Examination



Cect Scan



DRE



Pet Ct Scan



Colonoscopy & Biopsy



(Blood) Tumor Marker Test — S. Cea



For Appointment **4 +91 91044 62944**

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TREATMENT OF RECTUM CANCER







Chemotherapay Immumptherapy



Radiotherapy

PROTOCOL FOR RECTUM CANCER MX

Now the Concept of Organ Preservation. Multimodality Treatment.

- 1. Total Neoadjuvant Protocol TNT Approach and Surgery
- 2. Long-Course Chemorediotherapy and Surgery.
- 3. Sphincter Preservation Surgeries New Advances in Mx.

SURGERY FOR RECTUM CANCER

Early Rectum Cancers	(A) Endoscopic Mx, (B) Trans Anal Exicision
Minimal Invasive	 (A) Laparoscopic Surgery (B) Robotic-assisted surgery LAR (Low Anterior Resection) APR (Abdominoperineal Resection) Low anterior resection
	(A) Flane (Extralevator abdominonerineal

Locally Advanced Cancer

(A) Elape (Extralevator abdominoperineal excision)

(B) Pelvic Exenteration - Anterior & Posterior Exenteration



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ABOUT US

- Highly motivated team of Cancer Specialist; aim to deliver Protocol backed, Result oriented Cancer Surgical care to our patients.
- We aim to provide advanced, ethical, quality cancer care to our patients in most affordable and empathetic way.
- Looking after premiere organizations; committed to raise the bar of our working institutes
- More than 30+ Years of cumulative experience in Onco-Surgery.

EXPERT TEAM OF CANCER SURGEONS



DAVE MS. M.Ch. (GCRI) Consultant Cancer Surgeon



DR. RONAK **VYAS** MS. M.Ch (GCRI), F.MAS Consultant Cancer Surgeon



DR. MANISH **SADHWANI** MS, M, Ch (GCRI) Consultant Cancer Surgeon



DR. SAMARTH DAVE M.Ch., Surgical Oncology **Consultant Cancer Surgeon**



DR. PRANJAL BANTHIA MS (BJMC), MCh (AllMS Delhi) Consultant Cancer Surgeon

CONTACT US

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