

A New Option in the Treatment of Complete and Acute Obstruction Due to Colorectal Cancer

Tejero et al. have described a new stenting procedure in the treatment of complete and acute neoplastic colorectal obstructions (1), with the placement of a guide wire using interventional radiology methods (2). In the three cases reported here, endoscopic methods have now also been used with this technique.

Three patients, aged 75, 62, and 64, were diagnosed with occlusion of the left colon. At endoscopy, tumors were found at 40, 28, and 16 cm, respectively. Biopsy samples were taken, and a hydrophilic guide wire was passed beyond the tumor. Under fluoroscopic control, Wallstents were introduced over the guide wire and positioned at the center of the tumor (Figures 1, 2). The technique involves three phases: first, resolution of the acute obstruction by stent placement; second, improvement in the patients' status, study of the extent of the neoplastic disease, and preparation of the intestine; and third, resection and primary anastomosis. Once the stent had been placed, the three patients experienced restitution of intestinal transit within a few hours. Six days later, it was possible to prepare the intestine with lavage, and resection and anastomosis were carried out the following day.

The use of stents in the colon is a recent development. In some cases, they have been used as a form of palliative treatment (3–5). Their use in acute and complete obstructions as a step prior to surgery was first reported by Tejero et al. (1,2). The authors have previously treated a series of 21 patients using this procedure. The procedure was completed in 12 of these patients; in nine, the stent constituted palliative treatment. In these 21 cases, radiological techniques were used. In the three cases reported here, however, it was difficult to reach the tumor due to the tortuousness of the intestine or radiological difficulties, and endoscopy was used instead, simplifying the procedure. This safe and effective procedure is capable of becoming the method of choice in the treatment of colorectal neoplastic obstructions.

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Figure 1: Radiograph of an expanded intratumoral stent resolving an obstruction.

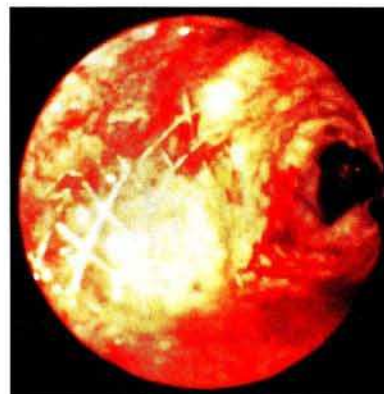


Figure 2: Endoscopic view of an expanded intratumoral stent resolving an obstruction.

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