

Extralevator Abdomino-Perineal Excision (ELAPE) and Enhanced Recovery After Surgery (ERAS) Concept in Scotland and Saudi Arabia: An Overall View of the Combination Approach in Patients with Low Rectal Cancer, and a Comparison of Short Term Results Between the Two Countries

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Abstract

Extralevator abdominoperineal excision of rectum (ELAPE) [1] is the latest in a series of techniques performed for the treatment of low rectal cancer not amenable to sphincter preservation surgery.

Enhanced recovery after surgery (ERAS) [2] concept was introduced to enhance patient recovery after surgery in order to accomplish early discharge from the hospital and early return to normal activities.

There is limited data on the role of ERAS in patients undergoing ELAPE for low rectal cancer [3]. We looked at our results after the first 50 consecutive cases of ELAPE patients enrolled in an enhanced recovery program.

Since the senior author has worked in two different countries, we compared the results to assess any differences in patient and tumor variables and the short term surgical outcome between the two centers.

Aims: The aim of the present study was to improve the short term surgical results in patients with low rectal cancer. ELAPE surgery was performed to reduce the incidence of circumferential resection margin (CRM) positivity and intraoperative perforation (IOP). ERAS guidelines were practiced to enhance patient recovery after surgery and early discharge from the hospital. The overall results were studied for comparison with published data. The comparison between two centers was carried out by analyzing patient and cancers related variables in the two countries and extrapolating these findings to the surgical outcome.

Methods: All patients with low rectal cancer who were not suitable for sphincter preserving surgery underwent ELAPE, having been assessed through the Multidisciplinary team (MDT) meeting. These patients were enrolled and treated under ERAS guidelines.

We documented, ten patient related (Table 1) and nine cancer related variables (Table 2) in a prospective database.

Nine short term parameters (Table 3) were analyzed to assess the effects of the above variables.

Results: There were a total of 50 patients in the study. Twenty five patients were from Scotland and twenty five from Saudi Arabia. The significant differences in patient variables between Scotland and Saudi Arabia were age of the patients (65 years, range [26 - 78 years]: 58 years, range [33 - 74 years] respectively p value 0.021), ICU stay (p value 0.015) and laparoscopic surgery (p value, 0.004).