

# 7TH LUBLIN INTERNATIONAL MEDICAL CONGRESS

26th - 28th November 2020



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## METHOD OF COMPLEX VISUAL ASSESSMENT OF COLORECTAL STAPLED ANASTOMOSIS FOR ANASTOMOTIC LEAK PREVENTION

Igor Kononenko

**Scientific supervisor:** prof. A. Klymenko, D.M., PhD

Zaporizhzhia State Medical University, Department of Faculty Surgery

**Introduction:** Colorectal anastomosis is one of the most common manipulations in abdominal surgery. Colorectal anastomosis (CA) failure after rectal or sigmoid resection remains an important problem in colorectal surgery, and its frequency has remained stable in recent years (6,3% by JS Kim et al., 2009). This complication increases postoperative mortality and hospitalization. Evaluation of the quality of the performed anastomosis including stapler line consistency is one of the priority areas, because today there is no consensus on this issue.

**Methods:** We have analyzed results of surgical treatment of 34 patients who underwent laparoscopic resection of the rectum and sigmoid colon with stapled anastomosis at the level of mid and upper rectum and its visual assessment. No diverting stoma was applied. For visual assessment we developed and used a scoring system based on intracorporeal and videorectoscopic investigations. Parameters taken into account were mucosal and serosal color changes, presence of submucosal hematoma or visible staples.

**Results:** Specific anastomotic complications were diagnosed in 3 (8.8%) patients and after intracorporeal suture reinforcement no anastomotic leaks were found postoperatively.

**Conclusions:** The developed scoring system allowed to detect and eliminate suturing defects and bleedings and elect the best tactics of anastomotic leak prevention in order to avoid uncomfortable diverting ileostomy in all the patients.

**Keywords:** colorectal anastomosis, laparoscopic resection, anastomosis failure, anastomosis reinforcement, anastomosis assessment

