

## **Doctors at Fortis Hospital, Kalyan perform Minimally Invasive surgery to correct rectal cancer of a 90 year old**

*~ Less than 1% population undergoes the corrective surgery at the age of 90 years ~*

**Kalyan, Mumbai, September 6, 2016:** The Oncology team at Fortis Hospital, Kalyan, successfully conducted minimally invasive surgery on a 90 year old male suffering from rectal cancer. The surgery becomes one of the very few – less than 1% population of the total – to undergo a corrective surgery at the age of 90 years. The patient complained blood in the stool initially and prolonged bleeding later. He also complained that his bowel movement was not complete. The early diagnosis at Fortis Hospital, Kalyan, established that this was a case of Rectal Cancer. The family of the patient was explained the case and was given the option of surgery.

**Dr Anil Heroor, Consultant Oncology Surgeon at Fortis Hospital, Kalyan** led the oncology team that conducted the surgery. The risks involved in any surgery increases with the patient's age. The difficulty in the post-surgery recovery process, higher risk of complications (morbidity), and of death (mortality) makes a surgery a tough ask for any doctor to perform on an elderly patient. It is a clinical feat to perform a minimally invasive surgery to correct rectal cancer on a patient who is above 90 years of age.

**Dr Anil Heroor**, who led the team in performing this surgery, said, *"It's not very often that we come across very elderly patients requiring complex surgeries, so this case was somewhat unusual for us, too. Even after being counseled about the possible outcomes, the patient himself and the family were very clear about opting for the surgery."*

Given that less than 1% population undergoes this corrective surgery at this age, **Dr Anil Heroor** also added: *"Surgery is usually the preferred treatment for rectal cancer. Rectal cancer surgeries are challenging even for relatively younger patients as it is a highly complex procedure. The complexities are magnified for elderly patients as their tissues are already weak. Given the risks involved in conventional surgeries, we considered what is known as **Minimally Invasive Surgery** for this patient."*

Minimally Invasive Surgery (MIS) differs from traditional open surgery in which it requires only a few tiny incisions instead of larger ones. This surgery on 90 year old was conducted laparoscopically with a small incision made to remove the tumor. The MIS technique allows surgeons to remove tumors using a camera and surgical instruments inserted into the keyhole-size incisions.

Talking about the MIS approach, **Dr Anil Heroor** said, *"In the MIS approach, the incision is very small; hence, the recovery is much faster compared to the conventional surgeries. Less blood loss, less post-*

## **Press Release**

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*operative pain, shorter hospital stay and lower infection rates makes this approach suitable for the elderly patients.” The patient has responded well to the surgery and has been uneventfully discharged from the hospital.*

The Colorectal cancer has become a tough health issue as it is the third most common cancer in men; i.e. 10% of all cancers, and second most common cancer among women; i.e. 9.4% of all cancer.<sup>i</sup> In India, the annual incidence rates (AARs) for colon and rectal cancer in men are 4.4 and 4.1 per lakh respectively. The AAR for colon cancer in women is 3.9 per lakh. In its 2013 report, **Mumbai had an AAR in men at 3.7 per lakh**, one of the top three cities at such high rates after Thiruvananthapuram and Bangalore<sup>ii</sup>. The digestive system takes in nutrients from foods and helps pass waste material out of the body. The digestive system is made up of the Esophagus, stomach and the small & large intestines. Together, the rectum and anal canal make up the last part of the large intestine and are 6-8 inches long. The anal canal ends at the anus (the opening of the large intestine to the outside of the body).

### **About Fortis Healthcare Limited:**

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<sup>i</sup> ICMR Sub Committee on Colorectal Cancer, 2014: Consensus Document for Management of Colorectal Cancer

<sup>ii</sup> ICMR Sub Committee on Colorectal Cancer, 2014: Consensus Document for Management of Colorectal Cancer