

COLORECTAL POLYPOIDAL FORMATIONS: PREVALENCE AND THERAPEUTIC APPROACH

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Aim of study. Data provided by GLOBOCAN 2021 show a significant increase in the morbidity rate, with colorectal cancer (CRC) taking second place in terms of mortality. Detailed knowledge of premalignant lesions, as their removal leads to decrease in the risk of developing CRC. The aim is to analyze the number and type of protrusive formations discovered globally, at the level of a sample population.

Materials and methods. Prospective study on 85 patients with malignant precursor lesions (polyps), detected after diagnostic colonoscopies, performed at Emergency Hospital (Chișinău), during 2018-2022. Regardless of gender or age, the patients included in the study required colonoscopy for diagnosis, without having previously been colonoscopically examined. The variables were analyzed: demographic data, location and morphology of formations, as well as therapeutic attitude.

Results. The size of the polyps varied between 2 and 40 mm, without statistically variations between sexes ($p>0.05$). Location: left colon – 66(76.6%), right – 12(14.1%), transverse colon – 7(8.3%). Histologically, 95% of polyps – neoplastic type, predominating tubulo-adenomatous – 37(43.5%), tubulovillous – 29(34.1%). Anatomical-pathological examination: low dysplasia – 68(80%), moderate dysplasia – 14(16.5%), severe dysplasia – 3(3.5%). In cases with low/moderate dysplasia – polypectomy: sufficient as a therapeutic act. In cases with high dysplasia – oncological approach: in 1 case – rectosigmoidian resection with ileostomy and in 2 cases colonic resection with primary anastomosis. After polypectomy, patients have been followed every 6 months – without recurrency.

Conclusions. Because a large number of cancers arise from malignancy adenomatous polyps, their diagnosis in the premalignant phase followed by polypectomy considerably decrease the chance of the occurrence of colorectal neoplasia in the future.

Keywords. Colonic polyps, diagnosis, morphology, therapeutic approach

EVALUAREA EFICACITĂȚII AL ADEZIVULUI TISULAR LATEX ȘI A PLASMEI CU CONCENTRAȚIA SPORITĂ DE TROMBOCITE ÎN PROTEJAREA ANASTOMOZEI PE COLON – STUDIU CLINIC 

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Scopul lucrării. Dehiscentța anastomozei pe colon reprezintă o problemă importantă pentru sănătatea publică cu impact medico-social și economic major, care se asociază cu morbiditatea sporită și mortalitatea semnificativă. Actualmente se efectuează numeroase studii bazate pe elaborarea metodelor pentru protejarea locală a anastomozei colonice și aprecierea eficacității lor. Scopul studiului este evaluarea clinică a eficacității utilizării adezivului tisular latex și a plasmei cu concentrația sporită de trombocite pentru protejarea anastomozei colonice.

Materiale și metode. În studiu au fost incluși 237 pacienți internați în IMSP IMU cu patologia chirurgicală a colonului. Pacienții au fost repartizați în 2 loturi: lotul I – a fost aplicată anastomoză pe colon neprotejată ($n=129$); lotul II a fost divizat în două subloturi I - anastomoză protejată prin aplicarea locală al adezivului tisular latex ($n=63$), II - anastomoză protejată prin aplicarea locală a plasmei cu concentrație sporită de trombocite.

Rezultate. În lotul I au fost diagnosticați 25 cazuri de dehiscentța anastomozei pe colon vs lotul II, unde a fost diagnosticat un singur caz de gradul B conform Grupului Internațional de Studiu a Cancerului Intestinului Rect.

Concluzii. Astfel, a fost demonstrată eficacitatea adezivului tisular latex pentru protejarea anastomozei pe colon, care s-a manifestat prin scăderea statistic semnificativă a incidenței dehiscentței anastomozei colonice ($p<0.001$).

Cuvinte cheie. Dehiscentța anastomozei, adezivul tisular latex, plasmă cu concentrație sporită de trombocite

EVALUATION OF THE EFFECTIVENESS OF LATEX TISSUE ADHESIVE AND PLATELET-RICH PLASMA FOR PROTECTION OF THE COLONIC ANASTOMOSIS- CLINICAL STUDY

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Aim of study. Anastomotic leakage represents a public health problem with major medico-social and economic impact, which is associated with increased morbidity and significant mortality. Nowadays, numerous studies have been made for elaboration methods for local protection of colonic anastomosis and appreciation of its efficacy. The aim of study was evaluation of effectiveness of latex tissue adhesive and platelet-rich plasma for protection of colonic anastomosis.

Materials and methods. The study included 237 patients hospitalized in IMSP IMU with surgical pathology of the colon. The patients were divided into 2 groups: group I – unprotected colon anastomosis was applied ($n=129$); group II was divided in two subgroups I- was applied protected anastomosis by local application of latex tissue adhesive ($n=63$) and II – anastomosis protected by local application of platelet-rich plasma (45).

Results. In group I - 25 cases of colonic anastomotic leakage were diagnosed vs group II, where only one case of grade B was diagnosed (International Study Group of Rectal Cancer).

Conclusions. Thus, the effectiveness of the latex tissue adhesive for protecting colonic anastomosis was demonstrated by the statistically significant decrease in the incidence of colonic anastomotic leakage ($p<0.001$).

Keywords. Anastomotic leakage, latex tissue adhesive, platelet-rich plasma