

MALIGNANT REVIEW

Colon Cancer

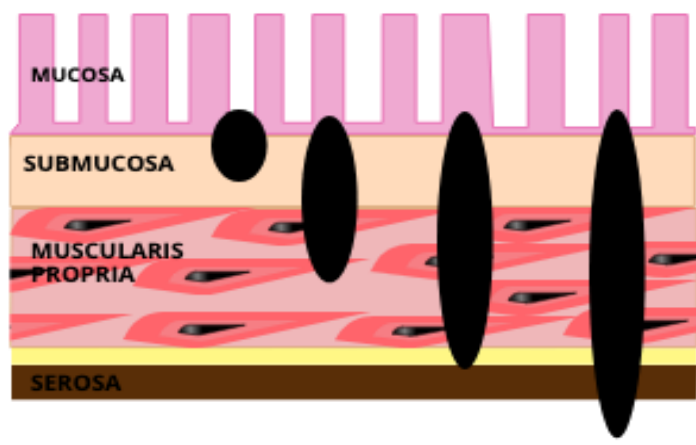
High Yield Colorectal Cancer Screening Guidelines

Risk Factors	Screening Age	Screening Modality	Testing Interval	Follow Up
Average risk	(Individualized)	Colonoscopy		*See next page*
		CT colonography		
		Flex Sig		
		FOBT or FIT		
*Elevated Risk		Colonoscopy		If negative
*High Risk		Colonoscopy		If negative
1 st degree relative <60 yo OR Two 1 st degree relatives		Colonoscopy		
1 st degree relative >60 yo OR Two 2 nd degree relatives		Colonoscopy		
IBD		Colonoscopy		
Lynch	<u>or</u> 10 years before earliest cancer	Colonoscopy		
FAP				

Continued from screening table	<u>Elevated Risk</u>	vs.	<u>High Risk</u>
Polyp #	polyps		polyps
Size			
Pathology	<ul style="list-style-type: none"> • Tubular adenoma w/ low grade dysplasia • Serrated polyp w/o dysplasia 		<ul style="list-style-type: none"> • Villous or tubovillous • High grade dysplasia • Any serrated polyp with dysplasia

Colorectal Cancer Staging

How do I figure out T stage?



What is the staging for colorectal cancer?

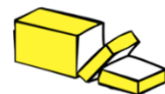
Stage	TNM	Shorthand
Stage 1	T1 N0 M0 T2 N0 M0	
Stage 2	T3 N0 M0 T4 N0 M0	
Stage 3	Any T N1 = 1-3 N2 = 4+ M0	
Stage 4	Any T Any N M1a (1 body part) or 1b (>1 body part) 1c (peritoneal)	

After a colonoscopy, a polyp comes back as a T1 adenocarcinoma, what do I do?

Check the...grade, invasion and margins ----->

- 1.
- 2.
- 3.
- 4.

If meets ALL criteria...



What is the work up for a new colon cancer?

Is there more cancer?

Tumor Markers?

1.



2.



Who gets neoadjuvant chemotherapy in colon cancer?

What is the surgery?

What are the margins?

How many lymph nodes should you get?

Who gets adjuvant chemotherapy?

What is the adjuvant therapy for colorectal cancer?

What is the colon cancer surveillance?



q3-6 months for 2 years then q6-12 mo for **5 years**



Annual for **5 years**



Post-resection=
BUT If no completion scope=

Rectal Cancer

How is the diagnostic work up for rectal cancer different from colon cancer?



What are surgical options for rectal cancer?	Local Excision	Low Anterior Resection (LAR)	Abdominoperineal Resection (APR)	Pelvic exenteration
Who qualifies?				Invades other pelvic organs and NO unresectable mets

What is the criteria for a low risk T1 rectal cancer?

“3’s”

1. Size:
2. Circumference
3. Margins:
4. Histology:

What is the most common complication from local excision?

Who gets neoadjuvant chemoradiation?

No routine chemoradiation in colon cancer

What are the outcomes of neoadjuvant chemoradiation?

Who gets adjuvant therapy?

What are the outcomes of adjuvant therapy?

Who can undergo “watch and wait”?

What is the recommended follow up for rectal cancer?

Serial CEA and DRE q3-4 months for 3 years
Colonoscopy @ 1 year then follow up in 3 years if negative
CT CAP q1 year for 3 years

Operative caveats

Does diverting loop ileostomy prevent leak?

Where do you stop dissection of proctectomy?

What is the advantage of a total mesorectal excision (TME)?

Rate of local recurrence

Do I need to delay surgery if on Bevacizumab?

What bowel prep is recommended to decrease SSIs?

Mechanical prep + Oral Antibiotics + Pre-op IV Antibiotics

What are ways to ensure proper length for left-sided anastomosis?

- 1.
- 2.
- 3.

Anal Cancer

What is the most common HPV subtype that causes anal SCC?

What are the risk factors?

STD, anal receptive sex, immunosuppression (HIV, transplant, steroids), smoking

Is LSIL premalignant?

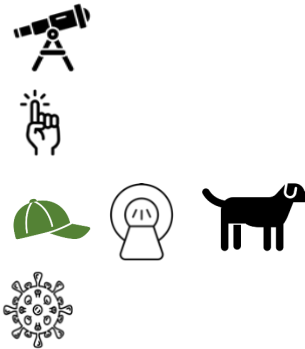
Anal lesions	Treatment
LSIL (AIN I) Low-grade Squamous Intraepithelial Lesions	
HSIL (AIN II and III) High-grade Squamous Intraepithelial Lesions	
Anal Canal SCC	
Anal Margin SCC Well-differentiated <2 cm	
Anal Margin Advanced SCC	
Melanoma	Melanoma Treatment Guidelines
Anal Adenocarcinoma	Usually neoadjuvant chemoradiation then APR

What is the Nigro protocol?

(50Gy to primary and 35-45 Gy to pelvic inguinal nodes)

What is the workup for anal SCC?

Exam: DRE, inguinal node exam +/- FNA



What is the follow up after completing the Nigro protocol?

DRE, anoscopy, inguinal node palpation every 8-12 weeks

What if there is persistent disease?

What surveillance is needed after anal SCC remission?

DRE, anoscopy, inguinal node palpation q3-6months for 5 years

CT CAP Annual for 3 years

What is this pruritic, erythematous, eczematous anal lesion?

What is this lesion associated with?

What additional work up is needed for extramammary Paget disease?

How do you treat this lesion?

Appendiceal Cancer

After an appendectomy, the pathology shows 0.8 cm carcinoid tumor with negative margins.

What do you recommend?

When do you recommend a right colectomy for appendiceal carcinoid tumor?

What if the appendix pathology comes back adenocarcinoma?

What is the best treatment for peritoneal mucinous carcinoma (PMCA)?