Chirurgia (Bucur). 2018;113(2):210-217
http://dx.doi.org/10.21614/chirurgia.113.2.210

The Outcome of Colorectal Surgery in Cirrhotic Patients: A Case Match Report

Monica Lacatus[1,2], Laura Costin[1], Virgil Bodean[1], Mircea Manuc[2,3], Cătălin Vasilescu[1,2]
[1]Department of General Surgery and Liver Transplatation, Fundeni Clinical Institute, Bucharest, Romania
[2]"Carol Davila" University of Medicine and Pharmacy, Bucharest, Romania
[3]Department of Gastroenterology and Hepatology, Fundeni Clinical Institute, Bucharest, Romania

Abstract
Background: Colorectal surgery in cirrhotic patients has had limited indications, but as the study aims to show, careful evaluation of risk factors can extend boundaries.
Methods: From January 2011 to January 2016, using a case match cohort, 68 patients with colorectal malignancy and cirrhosis were compared against 136 persons with no liver disease. Significant risk criteria, morbidity and mortality were evaluated.
Results: When analyzing specific risk factors – age, etiology and severity of liver disease (MELD, Child-Pugh score, ascites and hypoalbuminemia) were found to be significant to surgical outcome. Approach and type of intervention as well as emergency status reflected upon reintervention rates with 10.2% in the cirrhotic population vs 5.1% in the non-cirrhotic one (p=0.3). Postoperative morbidity was higher in the chronic liver disease patients - 47.1% vs 27.9% in the case-match group (p=0.035). Mortality rate in the cirrhotic population was 5.9% while in the non-cirrhotic one was 2.2% (p=0.2). Child C patients had a morbidity and a mortality rate of 75% and 50% respectively.
Conclusion: Child A patients can be treated no different than the general population; Child B group needs proper assessment and care while in Child C population surgery should at all costs be avoided.
Key words: liver cirrhosis, colorectal surgery, morbidity, mortality