

2ND WORLD CONGRESS ON GASTROENTEROLOGY & HEPATOLOGY

Sep 09 - 10, 2019, Crowne Plaza London, UK

ANORECTAL MELANOMA

Rosario Fornaro, Carlo Alberto Ammirati, Marta Iakubovska, Raffaele De Rosa, Matteo Mascherini, Marco Frascio.

Department of Surgery – University of Genoa – Italy

Anorectal melanoma is a disease that causes particular diagnostic problems. Surgery is the best treatment because of its low response to radio- and chemotherapy. The techniques used vary from a very extensive and radical surgery to a much more conservative intervention. Our case showed some difficulties as regards both diagnostic and therapeutic aspects. The diagnosis of anorectal melanoma was based on histological examination. Although several authors consider that WLE is the most appropriate surgical technique, we performed an APR, considering that the tumor had already infiltrated the submucosa, despite the negativity for locoregional extension. The patient was subjected to a close follow-up and he is still free of disease after 76 months. Patients undergoing APR have no significant survival difference compared to those undergoing WLE. The APR should be reserved for selected patients for whom LE is not technically possible or cannot ensure clear margins. Only a careful clinical and radiological investigation (including transrectal US, MRI, PET/CT) may help to define the appropriate surgical approach. Because of the fact that the outcome for patients is determined by distant disease recurrence, further progress will come from improved systemic therapies. A care program, prospective registry and centralization of surgery to fewer units would enhance data collection for future studies. Finally, it is essential to point out that all the patients with proctorragey have to be always carefully investigated.