World Congress on

## **Nutraceuticals and Natural Medicine**

October 22-23, 2018 | Amsterdam, Netherlands

## Differences in post-operative bowel function and ileus between right and left-sided radical colorectal resections

**Ben Liu, Thane K** and **Jones E** Glan Clwyd Hospital, UK

**Background:** Enhanced recovery after surgery (ERAS) program recommends early commencement of post-operative diet. Is this equally feasible among different types of colorectal resections? There are speculations that post-operative ileus is more common among radical right-sided colonic resections than left-sided equivalents, but minimal research has addressed this.

**Aim:** This retrospective comparative study aims to answer the question: are there differences in post-operative bowel function between right and left-sided radical colonic resections?

**Methods:** Forty radical resections cases of cancer were divided into two groups: 20 cases of right-sided colectomies (right and extended-right hemicolectomies) and 20 cases of left-sided resections (left hemicolectomies and anterior resections) from a one-year period (2016) are reviewed. Patient characteristics, operative techniques, time to passage of motions, tolerance of diet and duration of post-operative vomiting are compared.

**Results:** No differences in baseline characteristics (patient age, laparoscopic/open surgery, stoma/ anastomosis) were found. Patient undergoing right colonic resections take longer to establish bowel motion (6.15 vs. 3.45 days), tolerate diet (5.9 vs. 3.65 days) and vomit for longer (6.2 vs. 3.3 days) compared with left-sided resections. These findings are statistically significant (P=0.004, 0.034, 0.044 respectively) on two-tailed statistical analyses.

**Discussion:** The slower bowel function found in radical right-sided colonic resections may be attributed to disturbances of nervous tissues around the duodenum during right colonic mobilization. This may explain rates of post-op ileus in D3-lymphadenectomies being as high as 9%. Perhaps ERAS should be modified for right-colectomies.

**Conclusion:** This study demonstrated slower recovery of bowel function in patients undergoing radical right-sided colonic resection compared to left-sided surgery

## **Biography**

Ben Liu is currently working in Glan Clwyd Hospita	UK. His research interests are colorectal surgery,	laparoscopy and bowel function etc.

jpbenliu@yahoo.co.uk

	Δ1	tم	•	
T.	0	ιt	Э	٠