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Risk factor for complications after diverting ileostomy closure in patients who have undergone rectal cancer surgery

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Abstrak

PURPOSE: To clarify the risk factors for complications after diverting ileostomy closure in patients who have undergone rectal cancer surgery.

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METHODS: The study group comprised 240 patients who underwent a diverting ileostomy at the time of lower anterior resection or internal anal sphincter resection, in our department, between 2004 and 2015. Univariate and multivariate analyses of 18 variables were performed to establish which of these are risk factors for postoperative complications.

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RESULTS: The most common complications were intestinal obstruction and wound infection. Univariate analysis showed that an age of 72 years or older (p=0.0028), an interval between surgery and closure of 6 months or longer (p=0.0049), and an operation time of 145 min or longer (p=0.0293) were significant risk factors for postoperative complications. Multivariate analysis showed that age (odds ratio, 3.4236; p=0.0025), the interval between surgery and closure (odds ratio, 3.4780; p=0.0039), and operation time (odds 2.5179; p=0.0260) were independent risk factors.

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CONCLUSIONS: Age, interval between surgery and closure, and operation time were independent risk factors for postoperative complications after diverting ileostomy closure. Thus, temporary ileostomy closure should be performed within 6 months after surgery for rectal cancer.