

Colon Surgery **Risks and Benefits**

It is necessary for you to understand the benefits and risks of the surgical procedure that you are considering.

Colon surgery (colectomy) is usually performed to remove tumors or infected or inflamed areas of the colon. Surgery can be curative for malignant tumors and prevent the development of cancer if the tumor is premalignant. When performed for infection or inflammation (diverticulitis, ulcerative colitis or Crohn's disease most commonly), it is intended to relieve the symptoms caused by the disease and prevent future complications that might require a colostomy. Unfortunately, cancers are not always cured, but if caught early the cure rate is very high. Infection and inflammation can also recur, but the risk is low. The timing of your operation is determined by the nature of your underlying colon disease.

Most people worry more about the risk of anesthesia than the procedure itself. General anesthesia is extremely safe nowadays. The risk of death from general anesthesia is less than one in several hundred thousand for a healthy patient. Our anesthesiologists are very skilled and equipped with the most up-to-date monitoring devices. Your general medical condition will have the most significant impact on your risk for anesthesia and surgery. Smoking, obesity, heart disease, and diabetes are some of the most common risk enhancers. I will address these concerns with you. If you have specific questions or concerns, please ask. You will and also have the opportunity to speak with your anesthesiologist prior to your surgery while you are in the staging area. There will be a separate anesthesia consent form for you to sign. If you have a special request or desire specific anesthesiologist to perform your anesthesia, please let us know a week or more advance.

Any operation can have complications. Fortunately they are not common and usually do not affect the long-term result. The risk of infection following colon surgery is usually about 5 percent as long as the colon is not acutely infected. Infection is usually superficial and most often occurs at the incision where it is not a major problem. It can, however, result in a hernia. The risk of needing a blood transfusion is low. We usually do not make blood available unless you have a medical condition that might increase your risk of bleeding. However, in some cases which we may ask you to give your own blood (autologous transfusion) to make it available for surgery if we have several weeks and you're not anemic. The most serious complication following bowel surgery is failure of the intestine to heal where it is sewn together (anastomosis). This can result in a life-threatening infection that may require a colostomy. Fortunately this complication is uncommon and colostomy, if necessary, is usually temporary. Most internal infections, should one occur, it can usually be drained without a surgical procedure. Also, after any type of the bowel surgery, the intestine can become kinked or blocked (like kinking a hose) as the healing process occurs. This type of bowel obstruction I usually resolves on its own, but the wait can be very frustrating and require prolonged insertion of a nasogastric tube (stomach tube through the nose). If the blockage does not resolve in several weeks, a second operation may be necessary.

These risks are not meant to be all-inclusive but cover the majority of problems that occur after colon surgery. You will be asked to sign a consent specifying that I have covered these risks and you agree to the planned surgical procedure. If you have a questions, write them down and please remember to ask before your surgery it is a privilege to be your surgeon and I will do my very best to assure a rapid recovery and an excellent result.

Dr. Mac

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