1.	Record Nr.	UNINA9910463222303321
	Titolo	Manual of total mesorectal excision / / edited by Brendan Moran, Richard John Heald
	Pubbl/distr/stampa	Boca Raton, Fla. : , : CRC Press, , 2013
	ISBN	0-429-10241-0 1-4441-4947-4
	Descrizione fisica	1 online resource (259 p.)
	Altri autori (Persone)	MoranBrendan HealdRichard J
	Disciplina	616.99435059
	Soggetti	Colon (Anatomy) - Surgery Rectum - Surgery Excision (Surgery) Electronic books.
	Lingua di pubblicazione	Inglese
	Formato	Materiale a stampa
	Livello bibliografico	Monografia
	Note generali	Description based upon print version of record.
	Nota di bibliografia	Includes bibliographical references.
	Nota di contenuto	Chapter 1: The Evolution of a Concept: The Total Mesorectal Excision Story (for Surgeon or Patient alike); Chapter 2: Anatomy of the Rectum, Anal Canal and Pelvic Floor; Chapter 3: Clinical Ultrasound; Chapter 4: Magnetic Resonance Imaging Staging of Rectal Cancer; Chapter 5: Radiological Staging for Systemic Disease; Chapter 6: Preoperative Radiotherapy and Chemoradiotherapy for Rectal Cancer; Chapter 7: Total Mesorectal Excision for Rectal Cancer; Chapter 8: Abdominoperineal Excision of the Rectum; Chapter 9: Laparoscopic Surgery Chapter 10: Robotic Total Mesorectal Excision Chapter 11: Local Excision and Transanal Endoscopic Microsurgery; Chapter 12: Pathology Assessment; Chapter 13: Assessment and Management of Recurrence; Chapter 14: Lateral Pelvic Side-Wall Nodal Involvement in Rectal Cancer; Chapter 15: Intestinal Stoma and the Role of Defunctioning a Low Anastomosis after Anterior Resection; Chapter 16: Quality of Life in Patients Undergoing Abdominoperineal Excision and Anterior Resection for Rectal Cancer.
	Sommario/riassunto	Manual of Total Mesorectal Excision is the authoritative manual for the

trainee and qualified surgeon, covering every aspect of total mesorectal excision for rectal cancer. Written by the surgeons who pioneered and popularized TME, the book includes high-quality colour illustrations to detail the multidisciplinary management of rectal cancer. It incorporates state-of-the-art pre-operative staging, optimal surgical excision by TME surgery and quality control and audit of outcomes by detailed pathological assessment of the resected specimen.