

1. Record Nr.	UNINA9910818627903321
Titolo	Colorectal surgery : clinical care and management // edited by Bruce George [and three others]
Pubbl/distr/stampa	Chichester, West Sussex, UK ; ; Hoboken, NJ : , : Wiley Blackwell, , 2016
ISBN	1-118-67477-4
Descrizione fisica	1 online resource (407 p.)
Disciplina	617.5/547
Soggetti	Colon (Anatomy) - Surgery Rectum - Surgery
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 and index.
Nota di contenuto	Title Page; Copyright; Table of Contents; List of contributors; Foreword; Section A: Colorectal cancer; Incidence; Pathogenesis; Risk factors for colorectal cancer; Pathology; Clinical presentation; Investigation of colorectal cancer; Decision making: the multidisciplinary team (MDT); Surgical treatment; Postoperative management; Other tumors; References; Case 1: A screen-detected colonic conundrum; Could we have done better?; Case 2: Serrated Pathways; Could we have done better?; Reference; Case 3: Large tubulovillous adenoma of the rectum treated by TEM; Could we have done better? ReferenceCase 4: To stent or not to stent?; Could we have done better?; Case 5: Advanced rectal cancer: Brazil or Japan?; Case 6: Marginal decisions; Could we have done better?; Case 7: Locally advanced rectal cancer invading prostate; Could we have done better?; Reference; Case 8: Low rectal cancer and synchronous polyps; Could we have done better?; Case 9: Liver or rectum first?; Could we have done better?; Case 10: Beware bad livers!; Could we have done better?; Reference; Case 11: Anastomotic recurrence?; Could we have done better?; Case 12: Challenging warts; Could we have done better? Case 13: An unusual right iliac fossa massCould we have done better?; Section B: Inflammatory bowel disease; Introduction; Crohn's disease; Ulcerative colitis; References; Case 14: A problem teenager; Case 15: Recurrent Crohn's disease with intraabdominal abscess: when to operate?; Case 16: Very extensive small bowel stricturing disease;

Reference; Case 17: Long-standing Crohn's colitis and enterocutaneous fistula; Could we have done better?; Case 18: Crohn's colitis; Case 19: Fistulating anal Crohn's disease: conservative management; Case 20: Tail end carnage; Could we have done better?  
Case 21: Acute severe colitis; Could we have done better?; Case 22: Snare or pouch? The problem of dysplasia in ulcerative colitis; Could we have done better?; References; Case 23: Anal fistula and ulcerative colitis; Could we have done better?; Case 24: Poor pouch function; Case 25: Low rectal cancer in a patient with ulcerative colitis: late reconstruction with continent Kock ileostomy; References; Section C: Pelvic floor disorders; Introduction; External rectal prolapse; Fecal incontinence; Obstructed defecation; Slow transit constipation; Anismus; Chronic anorectal pain (see Case 32)  
References; Case 26: Constrictions of prolapse surgery; Could we have done better?; Case 27: Elderly prolapse dilemma; Could we have done better?; Case 28: Chasing incontinence; Could we have done better?; Case 29: Sphincter disruption; Could we have done better?; Case 30: Stimulating complications; Could we have done better?; Case 31: Crohn's evacuation trouble; Case 32: Disabling anal pain; Could we have done better?; Section D: Proctology; Hemorrhoids; Anal fistula; Anal fissure; Pilonidal sinus; Pruritus ani; References; Case 33: Hemorrhoids and HIV; Could we have done better?  
Case 34: Refractory fissure

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