



## Educando para a paz

Autores  Fábio Guilherme Campos, Carlos Augusto Real Martinez, Danillo Laís da Silva Mendonça, Leonardo Alfonso Bustamante Lopez  Autor (es) USF  Autores Internacionais  Programa/Curso (s) Programa de Pós-Graduação Stricto Sensu em Ciências da Saúde 10.18103/mra.v8i8.2199  Assunto (palavras chaves) Idioma Inglês  Fonte  Título do periódico: Medical Research Archives ISSN: 2375-1916 Volume/Número/Paginação/Ano: v. 8, p. 2-16, 2020  Data da publicação Aug 17, 2020  Formato da produção  In the context of minimizing local recurrence rates after surg cancer, the issue of lateral pelvic lymph node (LPLN) dissect controversial issue between West and East surgeons. The aim of to review the incidence of lateral nodes, the associated controversies regarding their management. While in Japan a prowith autonomic nerve preservation (without neoadjuvancy) is of management of extra-peritoneal advanced rectal cancers, West treated with preoperative chemoradiotherapy (CRT) followe excision. This choice is based on the effective reduction of local CRT, culminating with similar outcomes when compared with LPN side, this procedure is currently performed in Japan where LPN in regional disease, so LPLN dissection is considered essential to in exist suggestions that a selective approach to lateral nodes, the area controversies regarding their management. While in Japan a prowith autonomic nerve preservation (without neoadjuvancy) is of management of extra-peritoneal advanced rectal cancers, West treated with preoperative chemoradiotherapy (CRT) followed excision. This choice is based on the effective reduction of local cRT, culminating with similar outcomes when compared with LPN side, this procedure is currently performed in Japan where LPN in regional disease, so LPLN dissection is considered essential to in exist suggestions that a selective approach to lateral nodes, the approach to lateral nodes.	Tipo Pe	eriódico
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	car con to con with ma tre exc CR sid reg exi pa a n loc mu	the context of minimizing local recurrence rates after surgical treatment of rectal incer, the issue of lateral pelvic lymph node (LPLN) dissection has remained as a introversial issue between West and East surgeons. The aim of the present paper was review the incidence of lateral nodes, the associated risk factors and all the introversies regarding their management. While in Japan a prophylactic LPLN removal ith autonomic nerve preservation (without neoadjuvancy) is considered the standard anagement of extra-peritoneal advanced rectal cancers, Western patients are usually eated with preoperative chemoradiotherapy (CRT) followed by total mesorectal cision. This choice is based on the effective reduction of local recurrences induced by RT, culminating with similar outcomes when compared with LPN dissection. On the other de, this procedure is currently performed in Japan where LPN involvement is considered gional disease, so LPLN dissection is considered essential to improve outcomes. There hist suggestions that a selective approach to lateral nodes could be safely adopted in attents exhibiting radiological response after neoadjuvancy. However, others think that more extended procedure is necessary even after CRT. Thus, the source and the risks of cal recurrence must be individually assessed, and further high quality investigations ust be developed to evaluate the efficacy of LPLN dissection with or without CRT.

