

## **Retrospective Review of Recurrent Rectal Adenocarcinoma: a Provincial Audit**

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### *Oral Presentation Abstract:*

**Background:** recurrent rectal cancer following curative surgical resection presents a significant challenge to both patients and healthcare teams; curative options are limited and mortality can be quite high. Although patients receive good care overall in Alberta, there are gaps in care that contribute to known recurrence rates (i.e. 7.4% in Edmonton). In order to effectively improve Albertan practice patterns, this study aimed to provide provincial disease-free/overall survival (DFS/OS) and local/distal recurrence rates (LR/DR).

**Methods:** patients diagnosed with Stage I-IV rectal cancer from January 1<sup>st</sup> to December 31<sup>st</sup>, 2011 were identified from the Alberta Cancer Registry (ACR). A retrospective chart review identified if resections were performed, as well as resection dates. Consultation and progress notes, diagnostic imaging reports, operative reports, and pathology reports were mined for explicit mention of local or distal recurrences. Vital status (alive or dead) was obtained from the ACR on December 20<sup>th</sup>, 2015.

**Results:** 370 cases were included in the study (those who received curative resections for rectal cancer). 4-year LR (7.03%, 26/370) and 4-year DR (23.8%, 88/370) were calculated. 4-year OS was determined for all cases (75.7%, 280/370) and those with local recurrences (57.7%, 15/26). Total 4-year DFS was noted as 66.0% (244/370).

**Conclusions:** the current audit will help to inform clinical care pathway initiatives (chiefly the Alberta Rectal Cancer Clinical Pathway), as well as operational practices within Alberta Health Services of current practice patterns when addressing gaps in care that are preventing a provincial LR rate of 4%.

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