

Laparoscopic Colectomy for Curable Cancer

**Position Statement of the American Society of Colon and Rectal Surgeons
(ASCRS)**

**Endorsed by the Society of American Gastrointestinal Endoscopic Surgeons
(SAGES)**

Laparoscopic colectomy for curable cancer results in equivalent cancer related survival to open colectomy when performed by experienced surgeons. Adherence to standard cancer resection techniques including but not limited to complete exploration of the abdomen, adequate proximal and distal margins, ligation of the major vessels at their respective origins, containment and careful tissue handling, and en bloc resection with negative tumor margins using the laparoscopic approach will result in acceptable outcomes. Based upon the COST* trial, pre-requisite experience should include at least 20 laparoscopic colorectal resections with anastomosis for benign disease or metastatic colon cancer before using the technique to treat curable cancer. Hospitals may base credentialing for laparoscopic colectomy for cancer on experience gained by formal graduate medical educational training or advanced laparoscopic experience, participation in hands on training courses and outcomes.

* The Clinical Outcomes of Surgical Therapy Study Group. A comparison of laparoscopically assisted and open colectomy for colon cancer. N Engl J Med 2004;350:2050-2059.