Recurrence colorectal cancer: clinical presentation and mode of detection

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Introduction: Active surveillance after colorectal cancer (Stage I-III) treatment with curative intent aims to detect recurrences. The objective of this study is to assess how recurrent disease presents and is diagnosed within scheduled follow-up according to the Faculty of Medicine Ramathibodi Hospital, and to determine how much different in survival benefit between symptomatic and asymptomatic patients.

Methods: In a retrospective study of consecutive patients with colorectal cancer who were treated in Faculty of Medicine Ramathibodi Hospital, we identified patients with colorectal cancer who underwent surgery with curative intent between January 2013 and December 2016. Patients who developed recurrent disease were included for further analyses.

Results: From a total of 1096 patients who were been treated for colorectal carcinoma (Stage I-III) with curative intent, 184 developed recurrent disease (16.7%). In 155 of those patients (84.2%), recurrent diseases were detected during a scheduled follow-up visit, being asymptomatic. Tumor marker testing, imaging, and colonoscopy identified all of these recurrences. In the remaining 29 patients with recurrent disease (15.7%), recurrence was found during non-scheduled interval visits; patients were symptomatic. The most prevalent symptoms were gut obstruction and abdominal mass. Patients with asymptomatic recurrences had significantly higher overall survival compared with patients with symptomatic recurrences (45.2 months vs. 28.4 months, HR 2.4 (95% CI 1.52 - 3.87) p= 0.0006). Patients with asymptomatic recurrences had a significantly longer time to treatment compared with patients with symptomatic recurrences (1.6 month vs. 0.5 month, HR 1.85 (95% CI 1.23 -2.17) , p = 0.003).

Conclusions: Active surveillance after adjuvant therapy in colorectal cancer (Stage I-III) could prolong survival of the patients with recurrent disease due to the detection of resectable metastatic disease. Early detection of recurrent disease during asymptomatic period could prolong survival than late detection when symptom occurred.