

34th Euro-Global Summit on **Cancer Therapy & Radiation Oncology**
 &
 6th International Conference on **Big Data Analysis and Data Mining**
 &
 13th International Conference on **Orthopedics, Arthroplasty and Rheumatology**
 July 25-27, 2019 London, UK

CT colonography as diagnostic complement in the diagnosis of colorectal lesions: Video colonoscopy correlation

Araceli Cue* and Abel Morales

Hospital General Dr. Enrique Cabrera, Mexico

Colon cancer is an important cause of death among the general population, although it is highly preventable and treatable when early detection occurs. The main problem is the lack of patient adherence to screening methods and some limitations in its performance due to particular patients' features (video colonoscopy). Computed Tomography Colonography (CTC) has shown high sensitivity, low cost, less exploration time and is less invasive to the patient. In Mexico the colorectal cancer has the 1st place in incidence among digestive tube cancer. Video colonoscopy is the most sensitive and specific method for the detection of polyps and colorectal cancers. Many international organizations including the World Health Organization (WHO), the United States Agency for Health Care Policy and Research (USAHCPR), and the United States Preventive Service Task Force (USMSTF), have developed guides for colorectal cancer screening which includes CTC. The CTC allows the exploration of intra and extra colonic findings, though the gathering of more information is possible. In this study all the patients having video colonoscopy had CTC in a one year period. 95% of the studied cases had positive intra and extra colorectal findings that included polyps, malignant tumor, peri colonic/perirectal fat stranding, metastatic lymph nodes and extra colorectal metastasis. Some of the malignant lesions were deeper and larger than prior stated in the video colonoscopy. The CTC can be used as a screening method in general population not willing to have a video colonoscopy and should be used as an obligatory complement for those patients with video colonoscopy positive findings instead of just an Abdominal CT for staging. The information obtained from CTC helps the clinician to plan a better treatment and have a better panorama for each case.

Recent Publications

1. Levin B, Lieberman DA, McFarland B, et al. (2008) Screening and surveillance for the early detection of colorectal cancer and adenomatous polyps 2008; A joint guideline from the American Cancer society, the US multiSociety Task Force of colorectal cancer and the American College of radiology. *CA Cancer J Clin.* 58(3):130-60.
2. Barish M A, Soto J A and Ferrucci J T (2005) Consensus on current clinical practice of virtual colonoscopy. *Am Journal of Radiology.* 184(3):786-92.
3. Hellström M, Svensson M H and Lasso A (2004) Extracolonic and incidental findings on CT Colonography (Virtual Colonoscopy). *Am Journal radiol.* 182(3):631-8.
4. Brink J A and Amis S E. Image Wisely: A campaign to increase awareness about adult radiation protection. *Radiology.* 257(3):601-2.

Biography

Araceli Cue has her expertise in Whole Body Computed Tomography and has worked in this specific field for the past nine years, implementing new protocols and scanning methods to improve the diagnosis and wellbeing of her patients. She has experience as General Radiologist as well, with good experience in Fluoroscopic studies, urology diagnostic radiology and gynecologic-obstetric ultrasound. In her hospital setting, teaching and administration are a daily basis activity. She is actively involved in the Mexican Board of Radiology, currently working with the Evaluation committee. Her background includes Radiology Specialty and Whole Body Computed Tomography subspecialty, Radiation Protection Diploma, Health administration diploma.

arabicho@hotmail.com