| Table 1 | | |
|---------|-------|-----|
| | >= 80 | <80 |
| 1 yr | 73% | 83% |
| 2 yr | 58% | 79% |

colorectal surgery in extreme elderly patients (over 80 years) at a district general hospital.

Method A total of 577 patients underwent colorectal surgery for colonic or rectal cancer at Southern Health and Social Care Trust between 01/04/2007 and 31/08/2011. Of these, 96 patients were aged equal to or over 80 years (Group I). From the remaining 483 patients (<80 yrs), 100 patients were randomly chosen using the Random function on microsoft excel (Group II). We were able to retrieve 60 and 54 charts from Groups I and II respectively that were included in data analysis. The charts were retrospectively reviewed for analysis of postoperative mortality, morbidity and 2 year survival rates. Comparative analysis between the groups was performed using SPSS.

Results Both patient groups were well matched with respect to sex, co morbidities, the type of surgery. The median age was 83.5 (range, 80–96) years in Gr I and was 69 (range, 45–79) years in Gr II. While the patients in ASA grade 1 were significantly more in Gr II (p=0.002), patients in ASA grade 4 were significantly more in Gr I (p=0.001). The overall postoperative morbidity and mortality rates were similar. Median duration of hospital stay was 14 days in Gr I and 9 days in Gr II. Colorectal cancer patients aged under 80 years at the time of surgery had statistically significantly higher observed survival than those aged 80 years or more (P<0.05).

Conclusion In this retrospective review, there was no significant difference in the immediate postoperative mortality and morbidity between the <80 years group and >/=80 years group following colorectal cancer resectional surgery. However, the survival rates at 2 years follow up were much better in those under 80 years group.

IMMEDIATE AND LATE OUTCOMES AFTER COLORECTAL CANCER SURGERY IN EXTREME ELDERLY PATIENTS

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Introduction A retrospective study was performed to evaulate the immediate and late results of colorectal surgery in extreme elderly patients.

Aims/Background The aim of this retrospective study was to evaluate the results of immediate and late (2 years) outcomes of