

Preface to the current strategies in colon cancer management

Colorectal cancer is the second most common cancer in females and the third most common in males worldwide (1). In this issue of *Journal of Gastrointestinal Oncology*, we will focus on the surgical management of colon cancer and give an update on its latest developments.

With the adoption of screening programs in many countries, there is an increased detection of premalignant and malignant colonic polyps. We first review the current evidence and strategies in the management of malignant colonic polyps. Subsequently, Dr. Joe Fan discusses the use of combined endoscopic and laparoscopic techniques to achieve complete resection of "difficult colonic polyps".

Even with the adoption of colorectal cancer screening programs, patients still present with malignant colonic obstruction. Colonic stenting has emerged as an attractive temporizing measure aimed at reducing stoma rates and increasing the rates of minimally invasive surgery. There are however oncological concerns with this approach. Dr. Tan Ker-Kan evaluates the shortand long-term outcomes of stenting for obstructed malignant colorectal cancer.

The quality of colectomy has generated interest of late with numerous publications on complete mesocolic excision and central vascular ligation. Dr. William Chen discusses the utility of complete mesocolic excision and central vascular ligation in minimally invasive surgery. Dr. Robert Cleary next evaluates the pros and cons of adopting an intra-corporeal anastomosis technique for left and right hemicolectomies.

Locally advanced colon cancers are often associated with local recurrence and peritoneal metastases. Dr. Grace Tan discusses the role of surgery and hyperthermic intraperitoneal chemotherapy in this setting. Dr. Cherry Koh next reviews the role of surgery for recurrent colon cancer and Dr. Brian Goh gives us an update of laparoscopic liver resection for the management of colorectal liver metastases.

Lastly, we review the role of minimally invasive surgery in the geriatric patient with colon cancer which has become increasingly common as our population ages.

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