Transanal Excision Surgery  
Stanford University Section Of Colon And Rectal Surgery

Whenever possible, surgeons at the Stanford Cancer Center aim to preserve sphincter function in rectal cancer patients. The sphincter is the round muscle in the anus that opens and closes to control bowel function. Our experienced colorectal cancer surgeons are trained in advanced transanal excision surgery that spares the sphincter and can greatly improve your quality of life following surgery.

How Transanal Excision Surgery Works

Traditionally rectal cancer has been treated by removing the anus and sphincter along with tumors in the rectum. Today, experienced colorectal cancer surgeons can often perform surgery through the anus and remove only the rectal tumors and small amounts of surrounding tissue while leaving the anus and sphincter intact.

This significant advance in cancer surgery typically allows patients to retain bowel function and completely eliminates the need for a permanent colostomy bag. Following surgery, it is common for patients to also receive radiation and/or chemotherapy treatment.

Patients Who Can Receive High Transanal Excision Surgery

Sphincter-sparing transanal excision surgery is an option for patients with small early stage (stage I) rectal cancer that is near the anus opening but has not spread to the anus or sphincter.

For tumors higher up in the rectum, a similar sphincter-sparing surgery called transcoccygeal surgery may be an option. In this surgery, doctors reach the tumors by going through the tailbone.

Stanford Expertise

At the Stanford Cancer Center, you can be assured that every surgical option that exists is available to you, and that your doctors will help you understand which treatments are most appropriate for your individual situation.

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