

## **SUBMISSION FROM BEATING BOWEL CANCER**

### **HEALTH TECHNOLOGY APPRAISAL LAPAROSCOPIC SURGERY FOR THE TREATMENT OF COLORECTAL CANCER (REVIEW OF TECHNOLOGY APPRAISAL GUIDANCE NO.17)**

Beating Bowel Cancer is a national charity working to raise awareness of symptoms, promote early diagnosis and encourage open access to treatment choice for bowel cancer patients. Further information about us is contained in the annex to this submission.

We consider that the use, where medically appropriate, of laparoscopic techniques for surgical resection of the colon has a number of advantages for patients when compared with open surgery. These include:

- (1) a shorter stay in hospital
- (2) less post operative pain and discomfort
- (3) a quicker return to normal life

We discuss these briefly in turn.

#### **(1) Duration of hospital stay**

Patients whose surgery has been performed laparoscopically are typically able to leave hospital after four or five days as opposed to the eight or ten days which is usual for those treated by open surgery. The shorter period of hospitalization frees up beds for other patients but is also beneficial to the patient concerned as it allows for the resumption of normal living routines in place of an enforced longer stay in an institutional environment.

#### **(2) Post operative pain and discomfort**

Since the incisions made in the course of laparoscopic surgery are much smaller than is the case with open surgery, the patient suffers much less pain immediately following surgery and less discomfort over the ensuing days and weeks. For example, patients treated by open surgery tend to find coughing very painful although necessary to dislodge mucus from their chests. By contrast, we believe that laparoscopic surgery engenders less mucus and patients operated on in this way may cough without any or much discomfort. Not only is the reduction in pain and discomfort an obvious benefit in itself but it also helps to make the overall experience easier for the individuals concerned to support. Patients will often have been diagnosed with bowel malignancy only a short time before surgery and will be naturally apprehensive as to the consequences for them of their disease. Anything which reduces the trauma associated with their treatment (such as avoiding the large wound resulting from the long incision in the abdominal wall required by open surgery) is likely to be beneficial for their wellbeing.

### **(3) Return to normal life**

A patient treated laparoscopically will usually be able to resume his or her normal activities within about two weeks of returning home after surgery. This contrasts with the six week period of convalescence usual for those treated with open surgery. Indeed a full recovery from open surgery may well take three months.

People who have undergone major surgery for a life threatening illness desire, more than anything else, to return to their normal life - whether it be in the workplace or resuming familiar activities in their homes and gardens and socializing with family and friends. The much abbreviated period of incapacity enabled by the use of laparoscopic surgery is an enormous help in restoring enjoyment in and quality of life to patients and contributes significantly to their recovery from the physical effects and psychological trauma caused by their illness and its treatment.

For these reasons we believe that patients will benefit greatly from the use of laparoscopic surgical techniques whenever it is possible for them to be used and we would greatly welcome a positive appraisal by NICE of this technology.

This submission has benefited from information given to us by Mr Peter Dawson, a consultant surgeon at Charing Cross Hospital who is experienced in the use of laparoscopic surgical techniques and by Ms Jeanette Morris, a bowel cancer patient, who had a total colectomy in April of this year performed by Mr Dawson.

With their agreement we would like to nominate Mr Dawson as our clinical expert and Ms Morris as our patient expert for the purposes of this appraisal.

### **ANNEX: ABOUT BEATING BOWEL CANCER**

Beating Bowel Cancer is a national charity working to raise awareness of symptoms, promote early diagnosis and encourage open access to treatment choice for those affected by bowel cancer. Through our work we aim to help save lives from this common cancer, which is the second biggest cancer killer in the UK and affects 35,600 people every year.

The charity was founded in 1999 and is based in Twickenham, Middlesex. We work hard to improve bowel cancer awareness amongst both the medical profession and the general public, providing authoritative information about the disease, its symptoms, what to do if diagnosed, and what treatment choices are available. The welfare of bowel cancer patients is at the core of all our work, and our key objectives are to improve outcomes for patients, at all stages of their disease.

We believe that surgeons and clinicians should have the freedom to offer as many clinically effective treatment options as possible, and patients should have the opportunity to make an informed choice at each stage of their treatment. Treatment options should be available to all patients in the UK, and not determined by geographic region or a patients' ability to pay.

We provide the UK's only national patient-to-patient support network, through our National Patient Voices Group – a network of bowel cancer patients who are willing to offer telephone or local support to other patients, and to share their experiences of the disease.

Beating Bowel Cancer is a registered charity number 1063614.

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