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Image of the month

Parasacral total resection of a retrorectal tumor with fistualization to the coccyx☆

Resección en bloque vía parasacra de tumor retrorrectal con fistulización a coxis

Margalida Campaner Payeras,[a] *Álvaro García-Granero García-Fuster,*[b,*] *Myriam Fernández Isart,*[b] *Francisco Javier González Argente*[a]

[a] *Servicio de Cirugía General y del Aparato Digestivo, Hospital Universitario Son Espases, Palma de Mallorca, Spain*

[b] *Unidad de Cirugía Colorrectal, Servicio de Cirugía General y del Aparato Digestivo, Hospital Universitario Son Espases, Palma de Mallorca, Spain*

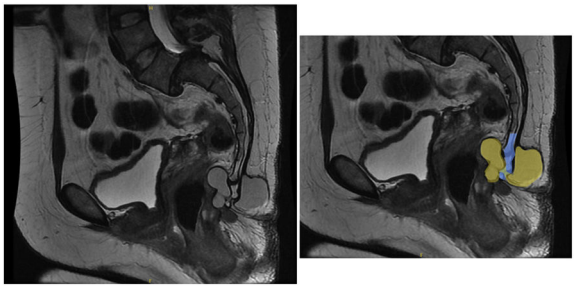

Fig. 1

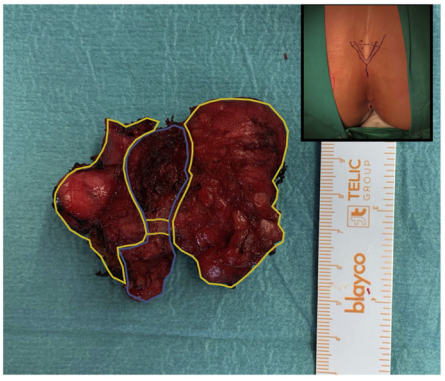

Fig. 2

The patient is a 37-year-old female who, after complementary testing, was diagnosed with an asymptomatic retrorectal tumor that fistulized to the coccyx and extended to the postsacral area.

En bloc resection including the coccyx was performed using a bilateral parasacral approach, with no intraoperative perforation. The pathology study identified the specimen as a cystic hamartoma. After one year of follow-up, the patient is asymptomatic (Figs. 1 and 2).

The management of retrorectal tumors is usually surgical in order to make a definitive diagnosis and prevent malignization. The approach is perineal, intraperitoneal or mixed. In tumors distal to S3, the choice is usually perineal. Tumor perforation should be avoided to reduce the risk of recurrence.

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* *Corresponding author.*

E-mail address: alvarogggf@hotmail.com (Á. García-Granero García-Fuster).

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