

Rectal MRI: Adoption of Guidelines & Standards

Rectal cancer is frequent and poses specific challenges compared to other colic cancer. The complex anatomy of the pelvis and the close relationships of the rectum with its surroundings in part explain a higher risk of local recurrence.

The introduction of the Total Mesorectal Excision (TME) as main surgical techniques for rectal cancer has significantly decreased the risk of local recurrence.

Large meta-analyses have also shown the benefits of neo-adjuvant therapy to further decrease the risk of recurrence 1-4.

However, these treatments are not without complications and each cancer is unique.

The need for accurate pre-operative staging, prior to both making the treatment decision and to anticipate the surgical challenges explain why imaging is playing a central role in the management of rectal cancer.

MRI is the modality of choice in the staging of rectal cancer as it allows a precise evaluation of the primary lesion and its surroundings with exquisite details 5-7.

However, reporting MRI of the rectum is challenging as many information needs to be present 8-11.

The present talk will focus on the development of tools allowing for a complete assessment of the key items necessary when assessing a rectal cancer.

In Ontario, we developed a synoptic report and its accompanying user's guide with a goal of increasing the completeness in reporting and optimizing the communication between the radiologist and rest of the multi-disciplinary team.

The presentation will detailed these tools and illustrates their usage.

After this presentation, the attendee:

- Will be familiar with the background of rectal cancer and the therapeutic options available
- Will be familiar with a simple but complete MRI protocol allowing optimal imaging of rectal cancer
- Will have knowledge of the KEY aspects of the MRI reporting of rectal cancer and their systematization through synoptic/template reports.

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