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The treatment of colorectal cancer in young patients

Regarding the article "Colon cancer presenting as an appendiceal abscess in a young patient"¹ published online in the *Canadian Journal of Surgery*, colorectal cancer in young patients is very aggressive with a poor prognosis. The second surgery in the patient should have been supported with a transoperative histopathologic study to demonstrate its benignancy. Otherwise, such malignancy is treated with a radical surgery: right hemicolectomy with or without an ileotransverse colonic anastomosis, depending on the conditions of the abdominal cavity and the experience of the surgeon. Only the benign pathology is treated with minor surgical procedures. Further, a 6-month follow-up is too short.

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(Dr. Arjona Sánchez replies)

First, I would like thank you for your interest in our case report published in the *Canadian Journal of Surgery*. I agree with your questions, but the aim of this case report was to demonstrate the rare possibility that we may find a malignant pathology in the context of a young patient with no significant medical history who presents with acute appendicitis. We did not consider a malig-

nant pathology in the urgent treatment because we had made a less aggressive intervention instead of a right hemicolectomy.

I agree that the follow-up was short, but we thought that the interesting aspect of this case was the rare disease with which this patient presented. He received adjuvant chemotherapy for 1 year and then presented with a mass in the abdominal wall. Positron emission tomography confirmed a recurring mass in the right peritoneum. The patient underwent peritonectomy followed by intraperitoneal chemotherapy with mitomicin C. His postoperative course was smooth, and he is currently being followed by our Oncology Unit.

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