
The role of computed tomography in staging of rectal carcinoma

Saied Ibrahim Adam

For evaluating primary rectal malignancies CT & other radiological modalities are complementary methods which are useful in assessing patients suspected of having extensive disease and in deciding whether a patient will benefit from preoperative radiation. CT is useful not only in staging of rectal carcinoma but also in designing radiation practice and in detecting complications related to neoplasm such as perforation with abscess formation. However CT lacks the ability to assess depth of neoplastic involvement within bowel wall. This limitation is the major factor which, combined with inability to diagnose metastatic tumour foci in normal sized nodes and microinvasion of perirectal fat, prevents optimal tumour staging. Because of low accuracy for staging early cancer staging. CT in combination with other radiological modalities is recommended for routine use in preoperative staging. CT is useful in identifying extracolonic component of neoplasm and their spread to adjacent organs. CT is superior in detection of pelvic and distant lymphadenopathy, guided percutaneous needle biopsies and being a non-invasive method of investigation. Lastly CT is complementary to various other radiological modalities to reach proper diagnosis & staging of rectal adenocarcinoma.