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ANASTOMOSIS AND POSTOPERATIVE RECURRENCE IN CROHN'S DISEASE

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Background: The observation that in more than 90% of Crohn's disease patients the postoperative recurrences are located in the pre-anastomotic tract leads us to suppose that the anastomosis would play a role in the appearance of recurrences. Aim And Methods: To focus the role of different anastomotic configurations in the incidence of recurrences, the Authors have conducted a review of the literature of the last two decades and have revised critically their experience. Results: The rate of recurrences seem to be lower in patients in whom the anastomotic configuration is such as to present a wide lumen; it seems that they are lower after stapled side-to-side anastomosis. The Kono-S anastomosis, recently introduced technique, seems to offer better results. Conclusions: The role of the various types of anastomosis remains uncertain. Further large-scale controlled trials with long term follow-up are needed.