WEBVTT

NOTE duration:"01:29:49" NOTE recognizability:0.752

NOTE language:en-us

NOTE Confidence: 0.7206238525

 $00:00:00.000 \longrightarrow 00:00:02.130$ I'm doctor Trikini, one of the

NOTE Confidence: 0.7206238525

 $00{:}00{:}02.130 \dashrightarrow 00{:}00{:}04.040$ medical oncologists at Yale and Co.

NOTE Confidence: 0.7206238525

 $00:00:04.040 \longrightarrow 00:00:06.278$ Director of the electoral cancer program.

NOTE Confidence: 0.7206238525

 $00:00:06.280 \longrightarrow 00:00:08.247$ Here I'm going to be talking about

NOTE Confidence: 0.7206238525

 $00:00:08.247 \longrightarrow 00:00:10.007$ some of the medical oncology

NOTE Confidence: 0.7206238525

 $00:00:10.007 \longrightarrow 00:00:11.715$ aspects of rectal cancer.

NOTE Confidence: 0.7206238525

00:00:11.720 --> 00:00:14.360 This is a CME developed dedicated

NOTE Confidence: 0.7206238525

 $00:00:14.360 \longrightarrow 00:00:16.210$ to coal colorectal cancer.

NOTE Confidence: 0.7206238525

 $00:00:16.210 \longrightarrow 00:00:19.030$ But given our time that we've

NOTE Confidence: 0.7206238525

 $00:00:19.030 \longrightarrow 00:00:21.119$ allowed it for this session,

NOTE Confidence: 0.7206238525

 $00:00:21.120 \longrightarrow 00:00:22.800$ we've decided to focus on rectal

NOTE Confidence: 0.7206238525

 $00:00:22.800 \longrightarrow 00:00:24.819$ cancer so that we can be focused.

NOTE Confidence: 0.7206238525

 $00:00:24.820 \longrightarrow 00:00:26.300$ So I'll be speaking.

 $00:00:26.300 \longrightarrow 00:00:28.150$ We have doctor Kimberly Jihong

NOTE Confidence: 0.7206238525

 $00:00:28.150 \longrightarrow 00:00:30.377$ from radiation oncology and and.

NOTE Confidence: 0.7206238525

 $00:00:30.380 \longrightarrow 00:00:32.768$ After becoming ready from colorectal surgery

NOTE Confidence: 0.7206238525

00:00:32.768 --> 00:00:36.248 and as we go through each presentation,

NOTE Confidence: 0.7206238525

 $00:00:36.250 \longrightarrow 00:00:38.470$ so introduce themselves as well.

NOTE Confidence: 0.7206238525

 $00{:}00{:}38.470 \dashrightarrow 00{:}00{:}40.325$ So I'm going to start out again

NOTE Confidence: 0.7206238525

 $00:00:40.325 \longrightarrow 00:00:41.851$ talking about the medical oncology

NOTE Confidence: 0.7206238525

 $00{:}00{:}41.851 \dashrightarrow 00{:}00{:}45.490$ aspects of of rectal cancer.

NOTE Confidence: 0.7206238525

 $00:00:45.490 \longrightarrow 00:00:48.796$ And we'll we'll a lot about

NOTE Confidence: 0.7206238525

00:00:48.796 --> 00:00:51.326 30 patients and 30 patients,

NOTE Confidence: 0.7206238525

00:00:51.330 --> 00:00:54.090 30 minutes per per topic.

NOTE Confidence: 0.7206238525

00:00:54.090 --> 00:00:55.896 Again, medical oncology,

NOTE Confidence: 0.7206238525

 $00:00:55.896 \longrightarrow 00:00:57.702$ radiation oncology and

NOTE Confidence: 0.7206238525

 $00:00:57.702 \longrightarrow 00:00:59.508$ and colorectal surgery,

NOTE Confidence: 0.7206238525

 $00:00:59.510 \longrightarrow 00:01:02.296$ and they'll be time for questions that

NOTE Confidence: 0.7206238525

 $00:01:02.296 \dashrightarrow 00:01:05.390$ can be answered into the chat or could

 $00{:}01{:}05.390 \dashrightarrow 00{:}01{:}09.230$ certainly be addressed directly to us.

NOTE Confidence: 0.7206238525

 $00:01:09.230 \longrightarrow 00:01:12.120$ So first I'm going to talk about the role of

NOTE Confidence: 0.7206238525

 $00:01:12.193 \longrightarrow 00:01:15.085$ total neoadjuvant therapy for rectal cancer.

NOTE Confidence: 0.7206238525

00:01:15.090 --> 00:01:17.500 How does totally odgen therapy,

NOTE Confidence: 0.7206238525

00:01:17.500 --> 00:01:19.812 sometimes abbreviated as TNT,

NOTE Confidence: 0.7206238525

 $00:01:19.812 \longrightarrow 00:01:21.546$ compared to standard

NOTE Confidence: 0.7206238525

00:01:21.546 --> 00:01:22.702 preoperative chemoradiotherapy,

NOTE Confidence: 0.7206238525

 $00:01:22.710 \longrightarrow 00:01:26.890$ which has been done since 2004?

NOTE Confidence: 0.7206238525

00:01:26.890 --> 00:01:29.248 And which chemotherapy regimen to choose?

NOTE Confidence: 0.7206238525

00:01:29.250 --> 00:01:29.554 Potentially,

NOTE Confidence: 0.7206238525

 $00:01:29.554 \longrightarrow 00:01:31.682$ if we're going to use a total

NOTE Confidence: 0.7206238525

00:01:31.682 --> 00:01:32.790 neoadjuvant therapy approach,

NOTE Confidence: 0.7206238525

 $00:01:32.790 \longrightarrow 00:01:33.232$ and also,

NOTE Confidence: 0.7206238525

 $00{:}01{:}33.232 \dashrightarrow 00{:}01{:}35.000$ we'll then spend a little bit of time

NOTE Confidence: 0.7206238525

 $00:01:35.049 \longrightarrow 00:01:37.275$ talking about the role of immunotherapy

00:01:37.275 --> 00:01:38.388 for microsatellite instability,

NOTE Confidence: 0.7206238525

 $00{:}01{:}38.390 --> 00{:}01{:}39.380 \ \mathrm{high\ rectal\ cancer},$

NOTE Confidence: 0.7206238525

 $00:01:39.380 \longrightarrow 00:01:42.776$ a small subset of patients, but that may.

NOTE Confidence: 0.7206238525

00:01:42.776 --> 00:01:45.104 This may have important

NOTE Confidence: 0.7206238525

 $00:01:45.110 \longrightarrow 00:01:48.410$ implications for for outcomes.

NOTE Confidence: 0.720623852500:01:48.410 --> 00:01:50.640 So. NOTE Confidence: 0.7206238525

00:01:50.640 --> 00:01:53.650 Rectal cancer has been treated

NOTE Confidence: 0.7206238525

 $00:01:53.650 \longrightarrow 00:01:55.456$ traditionally with chemoradiotherapy,

NOTE Confidence: 0.7206238525

 $00:01:55.460 \longrightarrow 00:01:57.080$ followed by surgery,

NOTE Confidence: 0.7206238525

 $00:01:57.080 \longrightarrow 00:02:00.053$ followed by adjuvant chemotherapy in the

NOTE Confidence: 0.7206238525

 $00{:}02{:}00.053 \dashrightarrow 00{:}02{:}03.210$ United States from from the early 2000s.

NOTE Confidence: 0.7206238525

 $00:02:03.210 \longrightarrow 00:02:06.374$ This is based on the sour trial

NOTE Confidence: 0.7206238525

00:02:06.374 --> 00:02:08.800 which firmly placed neoadjuvant

NOTE Confidence: 0.7206238525

 $00:02:08.800 \longrightarrow 00:02:11.176$ chemoradiotherapy as a standard of care,

NOTE Confidence: 0.7206238525

 $00:02:11.180 \longrightarrow 00:02:13.126$ and again we typically used in the

NOTE Confidence: 0.7206238525

 $00:02:13.126 \longrightarrow 00:02:14.616$ United States at least chemotherapy

 $00:02:14.616 \longrightarrow 00:02:16.416$ as an adjuvant in the setting

NOTE Confidence: 0.7206238525

00:02:16.416 --> 00:02:18.379 and in certain parts of Europe.

NOTE Confidence: 0.7206238525

 $00:02:18.380 \longrightarrow 00:02:18.968$ Of course,

NOTE Confidence: 0.7206238525

00:02:18.968 --> 00:02:20.438 adjuvant therapy is more controversial,

NOTE Confidence: 0.7206238525

 $00:02:20.440 \longrightarrow 00:02:21.410$ but in the United States.

NOTE Confidence: 0.7206238525

 $00{:}02{:}21.410 \dashrightarrow 00{:}02{:}23.815$ Currently considered standard of care

NOTE Confidence: 0.7206238525

00:02:23.815 --> 00:02:27.668 for any clinical T3 or N1 rectal cancer,

NOTE Confidence: 0.7206238525

 $00:02:27.670 \longrightarrow 00:02:29.890$ but over the last several

NOTE Confidence: 0.7206238525

 $00:02:29.890 \longrightarrow 00:02:31.666$ years for various reasons,

NOTE Confidence: 0.7206238525

 $00:02:31.670 \longrightarrow 00:02:34.661$ which will which will cover total

NOTE Confidence: 0.7206238525

00:02:34.661 --> 00:02:38.316 new advance therapy has become.

NOTE Confidence: 0.7206238525

 $00:02:38.320 \longrightarrow 00:02:40.176$ A new approach, perhaps?

NOTE Confidence: 0.7206238525

 $00{:}02{:}40.176 \dashrightarrow 00{:}02{:}42.496$ And there's four contemporary studies,

NOTE Confidence: 0.7206238525

 $00:02:42.500 \longrightarrow 00:02:45.158$ 5 perhaps before they've been published.

NOTE Confidence: 0.7206238525

00:02:45.160 --> 00:02:47.320 Those four studies that have been

 $00:02:47.320 \longrightarrow 00:02:50.059$ in dark color here versus the Oprah

NOTE Confidence: 0.7206238525

 $00:02:50.059 \longrightarrow 00:02:52.094$ study that offers study rather

NOTE Confidence: 0.7206238525

 $00:02:52.100 \longrightarrow 00:02:54.886$ that is not yet published but has

NOTE Confidence: 0.7206238525

 $00:02:54.886 \longrightarrow 00:02:57.380$ had some prelim data presented.

NOTE Confidence: 0.7206238525

 $00:02:57.380 \longrightarrow 00:02:58.780$ I'm not going to focus on that study.

NOTE Confidence: 0.7206238525

 $00:02:58.780 \longrightarrow 00:03:02.280$ That's a study focused on the

NOTE Confidence: 0.7206238525

 $00:03:02.280 \longrightarrow 00:03:04.480$ potential organ.

NOTE Confidence: 0.7206238525

 $00:03:04.480 \longrightarrow 00:03:06.640$ Well, the.

NOTE Confidence: 0.7206238525

 $00{:}03{:}06.640 \dashrightarrow 00{:}03{:}07.984$ Analyzing organ preservation,

NOTE Confidence: 0.7206238525

00:03:07.984 --> 00:03:11.120 so analyzing a watchful way to approach.

NOTE Confidence: 0.7206238525

 $00{:}03{:}11.120 \dashrightarrow 00{:}03{:}13.059$ But so we have the protest 23

NOTE Confidence: 0.7206238525

 $00:03:13.059 \longrightarrow 00:03:15.009$ study the RAPIDO study the seller

NOTE Confidence: 0.7206238525

00:03:15.009 --> 00:03:16.774 studying the Polish two study.

NOTE Confidence: 0.7206238525

 $00:03:16.780 \longrightarrow 00:03:18.558$ I'll focus on the first three and

NOTE Confidence: 0.7206238525

 $00{:}03{:}18.558 \dashrightarrow 00{:}03{:}20.174$ and Doctor Johann will talk about

NOTE Confidence: 0.7206238525

 $00:03:20.174 \longrightarrow 00:03:21.514$ some of the radiation aspects

 $00:03:21.514 \longrightarrow 00:03:23.324$ of these studies and as well as

NOTE Confidence: 0.7206238525

 $00:03:23.324 \longrightarrow 00:03:24.296$ the Polish two study.

NOTE Confidence: 0.7206238525

 $00{:}03{:}24.300 \dashrightarrow 00{:}03{:}26.967$ I don't have any slides about that.

NOTE Confidence: 0.7206238525

 $00:03:26.970 \longrightarrow 00:03:30.757$ So the rapid study made a splash

NOTE Confidence: 0.7206238525

 $00:03:30.757 \longrightarrow 00:03:32.380$ at ASCO last.

NOTE Confidence: 0.698702397272727

 $00:03:32.380 \longrightarrow 00:03:35.292$ We'll ask the 2020 so a couple of

NOTE Confidence: 0.698702397272727

 $00:03:35.292 \longrightarrow 00:03:38.270$ years ago now and this is a study

NOTE Confidence: 0.698702397272727

 $00:03:38.270 \longrightarrow 00:03:42.400$ that tried to tried to look at.

NOTE Confidence: 0.698702397272727

 $00:03:42.400 \longrightarrow 00:03:44.736$ The the benefit of totally adds in the rapy.

NOTE Confidence: 0.698702397272727

 $00{:}03{:}44.740 \dashrightarrow 00{:}03{:}47.436$ But it also tried to look at how short

NOTE Confidence: 0.698702397272727

00:03:47.436 --> 00:03:49.580 course ready up there he might play a

NOTE Confidence: 0.698702397272727

 $00:03:49.646 \longrightarrow 00:03:51.816$ role in the total nail agent approach.

NOTE Confidence: 0.698702397272727

 $00{:}03{:}51.820 \longrightarrow 00{:}03{:}54.280$ So it was a study that was sort of trying

NOTE Confidence: 0.698702397272727

 $00:03:54.345 \longrightarrow 00:03:56.689$ to answer 2 questions at the same time,

NOTE Confidence: 0.698702397272727

00:03:56.690 --> 00:03:59.558 which always makes it difficult to

 $00:03:59.558 \longrightarrow 00:04:02.200$ really interpret the the results.

NOTE Confidence: 0.698702397272727

 $00:04:02.200 \longrightarrow 00:04:03.750$ So patients were randomized to

NOTE Confidence: 0.698702397272727

 $00:04:03.750 \longrightarrow 00:04:05.840$ either the standard of care approach,

NOTE Confidence: 0.698702397272727

 $00:04:05.840 \longrightarrow 00:04:09.044$ so this would be long course close to six

NOTE Confidence: 0.698702397272727

 $00:04:09.044 \longrightarrow 00:04:12.138$ weeks of Chemoradiotherapy followed by a.

NOTE Confidence: 0.698702397272727

00:04:12.140 --> 00:04:14.065 One month period of recovery

NOTE Confidence: 0.698702397272727

00:04:14.065 --> 00:04:15.990 and and surgical planning,

NOTE Confidence: 0.698702397272727

00:04:15.990 --> 00:04:18.838 surgery, and adjuvant chemotherapy.

NOTE Confidence: 0.698702397272727

 $00{:}04{:}18.838 \dashrightarrow 00{:}04{:}22.861$ But important to note that the

NOTE Confidence: 0.698702397272727

00:04:22.861 --> 00:04:26.088 chemotherapy optional so this is a study,

NOTE Confidence: 0.698702397272727

 $00{:}04{:}26.090 \dashrightarrow 00{:}04{:}28.386$ a Dutch study and again in Europe.

NOTE Confidence: 0.698702397272727

 $00:04:28.390 \longrightarrow 00:04:29.750$ Chemotherapy is not always done

NOTE Confidence: 0.698702397272727

 $00:04:29.750 \longrightarrow 00:04:30.838$ in the admin setting,

NOTE Confidence: 0.698702397272727

 $00{:}04{:}30.840 \dashrightarrow 00{:}04{:}32.530$ so optional chemotherapy is optional,

NOTE Confidence: 0.698702397272727

 $00:04:32.530 \longrightarrow 00:04:34.399$ so we can also see another departure

NOTE Confidence: 0.698702397272727

 $00:04:34.399 \longrightarrow 00:04:36.256$ there from what we would do in

 $00:04:36.256 \longrightarrow 00:04:37.762$ the United States for the systemic

NOTE Confidence: 0.698702397272727

 $00:04:37.820 \longrightarrow 00:04:39.164$ therapy experimental arm.

NOTE Confidence: 0.698702397272727

 $00:04:39.164 \longrightarrow 00:04:40.998$ Short course radiotherapy, Dr.

NOTE Confidence: 0.698702397272727

 $00:04:40.998 \longrightarrow 00:04:42.430$ Johann will speak about.

NOTE Confidence: 0.698702397272727

 $00:04:42.430 \longrightarrow 00:04:44.425$ You know the the the reasons

NOTE Confidence: 0.698702397272727

 $00:04:44.425 \longrightarrow 00:04:46.274$ for short parts versus long course

NOTE Confidence: 0.698702397272727

00:04:46.274 --> 00:04:48.134 and how to think about that,

NOTE Confidence: 0.698702397272727

 $00{:}04{:}48.140 \dashrightarrow 00{:}04{:}50.162$ but short portrait there we followed

NOTE Confidence: 0.698702397272727

 $00:04:50.162 \longrightarrow 00:04:51.911$ by new adjuvants are totally

NOTE Confidence: 0.698702397272727

 $00{:}04{:}51.911 \dashrightarrow 00{:}04{:}53.939$ adjuvant capox here or full Fox.

NOTE Confidence: 0.698702397272727

 $00:04:53.940 \longrightarrow 00:04:55.944$ The totally by the few platinum

NOTE Confidence: 0.698702397272727

00:04:55.944 --> 00:04:57.280 doublet followed by surgery.

NOTE Confidence: 0.698702397272727 00:04:57.280 --> 00:05:00.430 So we have.

NOTE Confidence: 0.698702397272727

 $00{:}05{:}00.430 \dashrightarrow 00{:}05{:}01.876$ Several things that are going on

NOTE Confidence: 0.698702397272727

 $00:05:01.876 \longrightarrow 00:05:03.639$ different than maybe what we would do

 $00:05:03.639 \longrightarrow 00:05:04.889$ here and under normal circumstances.

NOTE Confidence: 0.698702397272727

 $00:05:04.890 \longrightarrow 00:05:06.410$ We have short course radiotherapy.

NOTE Confidence: 0.698702397272727

 $00:05:06.410 \longrightarrow 00:05:08.282$ We have total new adjuvant and then we

NOTE Confidence: 0.698702397272727

 $00:05:08.282 \longrightarrow 00:05:09.837$ have patients in the the control arm,

NOTE Confidence: 0.698702397272727

 $00:05:09.840 \longrightarrow 00:05:11.345$ not necessarily getting what we

NOTE Confidence: 0.698702397272727

00:05:11.345 --> 00:05:13.163 would normally give because some of

NOTE Confidence: 0.698702397272727

 $00:05:13.163 \longrightarrow 00:05:14.478$ them agreement optional therapy so

NOTE Confidence: 0.698702397272727

 $00:05:14.478 \longrightarrow 00:05:16.289$ that they ended up being about 40%

NOTE Confidence: 0.698702397272727

 $00{:}05{:}16.290 \dashrightarrow 00{:}05{:}18.246$ of patients in the control group

NOTE Confidence: 0.698702397272727

 $00:05:18.246 \longrightarrow 00:05:20.760$ that did not get adjuvant therapy.

NOTE Confidence: 0.698702397272727

 $00{:}05{:}20.760 \longrightarrow 00{:}05{:}22.657$ So you know some people would argue.

NOTE Confidence: 0.698702397272727

 $00:05:22.660 \longrightarrow 00:05:24.406$ Maybe this isn't really a fair

NOTE Confidence: 0.698702397272727

 $00:05:24.406 \longrightarrow 00:05:26.212$ comparison group as a standard of

NOTE Confidence: 0.698702397272727

00:05:26.212 --> 00:05:28.256 care group for for our US patients.

NOTE Confidence: 0.698702397272727

 $00:05:28.260 \longrightarrow 00:05:30.042$ Maybe a more accurate control comparative

NOTE Confidence: 0.698702397272727

 $00{:}05{:}30.042 \dashrightarrow 00{:}05{:}32.005$ group would be to restrict the

 $00{:}05{:}32.005 \dashrightarrow 00{:}05{:}33.795$ comparison to patients that receive

NOTE Confidence: 0.698702397272727

 $00:05:33.795 \longrightarrow 00:05:35.580$ just received adjuvant chemotherapy,

NOTE Confidence: 0.698702397272727

 $00:05:35.580 \longrightarrow 00:05:37.785$ which perhaps will will be

NOTE Confidence: 0.698702397272727

 $00:05:37.785 \longrightarrow 00:05:39.549$ done in the future.

NOTE Confidence: 0.698702397272727

 $00:05:39.550 \longrightarrow 00:05:42.076$ Teacher really data for this study.

NOTE Confidence: 0.698702397272727

 $00{:}05{:}42.080 \dashrightarrow 00{:}05{:}44.512$ So the initial that this has been presented

NOTE Confidence: 0.698702397272727

00:05:44.512 --> 00:05:46.828 and then now published in The Lancet.

NOTE Confidence: 0.698702397272727

 $00:05:46.830 \longrightarrow 00:05:49.040$ So what did what did we see from the outcomes

NOTE Confidence: 0.698702397272727

 $00:05:49.090 \longrightarrow 00:05:51.295$ for patients with total new adjuvant therapy?

NOTE Confidence: 0.698702397272727

 $00:05:51.300 \longrightarrow 00:05:53.340$ So in the blue line here we have the total

NOTE Confidence: 0.698702397272727

 $00:05:53.396 \longrightarrow 00:05:55.540$ new adjuvant therapy group and the red line.

NOTE Confidence: 0.698702397272727

 $00{:}05{:}55.540 \dashrightarrow 00{:}05{:}56.824$ We have the standard of care

NOTE Confidence: 0.698702397272727

 $00:05:56.824 \longrightarrow 00:05:58.289$ group and what do we see here?

NOTE Confidence: 0.698702397272727

 $00:05:58.290 \longrightarrow 00:06:00.120$ And we saw that disease

NOTE Confidence: 0.698702397272727

 $00:06:00.120 \longrightarrow 00:06:01.218$ related treatment failure.

 $00:06:01.220 \longrightarrow 00:06:03.170$ So essentially an end point

NOTE Confidence: 0.698702397272727

 $00{:}06{:}03.170 \dashrightarrow 00{:}06{:}04.730$ very similar to progression.

NOTE Confidence: 0.698702397272727

 $00:06:04.730 \longrightarrow 00:06:06.490$ Free survival is better,

NOTE Confidence: 0.698702397272727

 $00:06:06.490 \longrightarrow 00:06:10.010$ so less likely to relapse with total new.

NOTE Confidence: 0.698702397272727 00:06:10.010 --> 00:06:11.690 Therapy. NOTE Confidence: 0.698702397272727

00:06:11.690 --> 00:06:14.707 Hazen ratio of about .75 that's significant.

NOTE Confidence: 0.698702397272727

 $00:06:14.710 \longrightarrow 00:06:17.074$ Also distant metastasis reduced

NOTE Confidence: 0.698702397272727

 $00:06:17.074 \longrightarrow 00:06:20.029$ with with totally original therapy.

NOTE Confidence: 0.698702397272727

 $00:06:20.030 \longrightarrow 00:06:21.955$ Again, it has a ratio of .69.

NOTE Confidence: 0.698702397272727

 $00:06:21.960 \longrightarrow 00:06:23.043$ This is significant,

NOTE Confidence: 0.698702397272727

 $00{:}06{:}23.043 \dashrightarrow 00{:}06{:}24.848$ so we're seeing overall essentially

NOTE Confidence: 0.698702397272727

 $00:06:24.848 \longrightarrow 00:06:26.868$ PFS and and just a metaphysis.

NOTE Confidence: 0.874603993333333

 $00:06:26.870 \longrightarrow 00:06:28.606$ But then when we look at local regional

NOTE Confidence: 0.874603993333333

00:06:28.606 --> 00:06:31.430 results, so regional failure no really,

NOTE Confidence: 0.87460399333333

00:06:31.430 --> 00:06:33.326 no real difference here with doing

NOTE Confidence: 0.874603993333333

 $00{:}06{:}33.326 \dashrightarrow 00{:}06{:}34.590$ this totally legitimate approach.

 $00:06:34.590 \longrightarrow 00:06:36.662$ So that tells us that the PFS

NOTE Confidence: 0.874603993333333

 $00:06:36.662 \longrightarrow 00:06:38.298$ benefit essentially starting with F

NOTE Confidence: 0.874603993333333

00:06:38.298 --> 00:06:40.033 benefits primarily being driven by

NOTE Confidence: 0.874603993333333

 $00:06:40.033 \longrightarrow 00:06:41.690$ affective systemic therapy doing what?

NOTE Confidence: 0.874603993333333

00:06:41.690 --> 00:06:44.780 Expanding it always does eliminating

NOTE Confidence: 0.874603993333333

00:06:44.780 --> 00:06:46.016 micrometastatic disease,

NOTE Confidence: 0.874603993333333

 $00:06:46.020 \longrightarrow 00:06:48.696$ but what does to really become

NOTE Confidence: 0.874603993333333

 $00:06:48.696 \longrightarrow 00:06:50.480$ the standard of care?

NOTE Confidence: 0.874603993333333

 $00:06:50.480 \longrightarrow 00:06:51.635$ We need to see something

NOTE Confidence: 0.87460399333333

 $00:06:51.635 \longrightarrow 00:06:52.559$ like a survival benefit.

NOTE Confidence: 0.874603993333333

 $00:06:52.560 \longrightarrow 00:06:54.037$ So did we see anything like that?

NOTE Confidence: 0.874603993333333

 $00:06:54.040 \longrightarrow 00:06:56.400$ No, we absolutely did not in the study,

NOTE Confidence: 0.874603993333333

 $00{:}06{:}56.400 \dashrightarrow 00{:}06{:}58.767$ so this is overall survival and you can see

NOTE Confidence: 0.874603993333333

 $00:06:58.767 \longrightarrow 00:07:00.857$ these curves are very clearly negative.

NOTE Confidence: 0.87460399333333

 $00:07:00.860 \longrightarrow 00:07:02.561$ I think if there was maybe some

 $00:07:02.561 \longrightarrow 00:07:03.980$ more separation of these curves,

NOTE Confidence: 0.874603993333333

 $00:07:03.980 \longrightarrow 00:07:05.336$ one could argue with more follow

NOTE Confidence: 0.874603993333333

 $00:07:05.336 \longrightarrow 00:07:06.240$ up from the study.

NOTE Confidence: 0.874603993333333

 $00:07:06.240 \longrightarrow 00:07:07.820$ We see a PFS benefit.

NOTE Confidence: 0.874603993333333

 $00:07:07.820 \longrightarrow 00:07:09.996$ This is a disease that has can stay

NOTE Confidence: 0.874603993333333

 $00:07:09.996 \longrightarrow 00:07:11.796$ controlled for a long time when it's.

NOTE Confidence: 0.874603993333333 00:07:11.800 --> 00:07:12.074 Pathetic, NOTE Confidence: 0.874603993333333

 $00:07:12.074 \longrightarrow 00:07:13.444$ maybe with more follow up

NOTE Confidence: 0.874603993333333

 $00:07:13.444 \longrightarrow 00:07:15.010$ we see a survival benefit,

NOTE Confidence: 0.874603993333333

 $00:07:15.010 \longrightarrow 00:07:16.610$ but in this case I think it's going

NOTE Confidence: 0.874603993333333

 $00{:}07{:}16.610 \dashrightarrow 00{:}07{:}18.764$ to be pretty hard to show that even

NOTE Confidence: 0.874603993333333

 $00:07:18.764 \longrightarrow 00:07:20.150$ how overlapping these curves are.

NOTE Confidence: 0.874603993333333

 $00{:}07{:}20.150 \dashrightarrow 00{:}07{:}23.510$ See this system has a ratio of .92

NOTE Confidence: 0.874603993333333

 $00:07:23.510 \longrightarrow 00:07:27.800$ with POS 0.59, so no survival benefit.

NOTE Confidence: 0.874603993333333

 $00:07:27.800 \longrightarrow 00:07:29.676$ What about the past year rate and

NOTE Confidence: 0.874603993333333

00:07:29.676 --> 00:07:31.707 I've just made a big splash as well.

00:07:31.710 --> 00:07:33.929 I think people get excited about the

NOTE Confidence: 0.874603993333333

 $00:07:33.929 \longrightarrow 00:07:36.756$ past CR rate and I don't think this

NOTE Confidence: 0.874603993333333

 $00:07:36.756 \longrightarrow 00:07:39.180$ is actually a truly an appropriate

NOTE Confidence: 0.874603993333333

 $00:07:39.259 \longrightarrow 00:07:41.650$ endpoint to really be be engaging.

NOTE Confidence: 0.874603993333333

00:07:41.650 --> 00:07:43.890 Too much of our.

NOTE Confidence: 0.874603993333333

 $00:07:43.890 \longrightarrow 00:07:46.170$ Decision making on for the majority

NOTE Confidence: 0.874603993333333

 $00:07:46.170 \longrightarrow 00:07:47.690$ of patients at least.

NOTE Confidence: 0.874603993333333 00:07:47.690 --> 00:07:48.262 You know,

NOTE Confidence: 0.874603993333333

 $00{:}07{:}48.262 \dashrightarrow 00{:}07{:}48.834 \text{ for example,} \\$

NOTE Confidence: 0.87460399333333

 $00:07:48.834 \longrightarrow 00:07:51.210$ if we were to delay delay treatment,

NOTE Confidence: 0.874603993333333

 $00:07:51.210 \longrightarrow 00:07:53.286$ surgical treatment even more after radiation,

NOTE Confidence: 0.874603993333333

00:07:53.290 --> 00:07:54.760 I'm sure we would see even more

NOTE Confidence: 0.874603993333333

00:07:54.760 --> 00:07:55.390 past CR rates,

NOTE Confidence: 0.874603993333333

00:07:55.390 --> 00:07:57.088 but if it's not improving overall

NOTE Confidence: 0.874603993333333

 $00:07:57.088 \longrightarrow 00:07:58.430$ survival and it's not an,

00:07:58.430 --> 00:07:59.954 it's not changing the type of

NOTE Confidence: 0.874603993333333

 $00:07:59.954 \longrightarrow 00:08:01.694$ surgery we do and any statistically

NOTE Confidence: 0.874603993333333

00:08:01.694 --> 00:08:03.704 significant chash and past the our

NOTE Confidence: 0.874603993333333

 $00:08:03.704 \longrightarrow 00:08:05.442$ rates are not really super important.

NOTE Confidence: 0.874603993333333

 $00:08:05.442 \longrightarrow 00:08:06.858$ At the end of the day,

NOTE Confidence: 0.874603993333333

 $00:08:06.860 \longrightarrow 00:08:08.582$ in my opinion and where we

NOTE Confidence: 0.874603993333333

 $00:08:08.582 \longrightarrow 00:08:10.437$ haven't seen that with most of

NOTE Confidence: 0.874603993333333

 $00:08:10.437 \longrightarrow 00:08:12.369$ the attribute studies the the

NOTE Confidence: 0.874603993333333

 $00{:}08{:}12.369 \dashrightarrow 00{:}08{:}13.899$ the different surgeries are.

NOTE Confidence: 0.874603993333333

 $00:08:13.900 \longrightarrow 00:08:16.096$ Same so for the most part,

NOTE Confidence: 0.874603993333333

 $00:08:16.100 \longrightarrow 00:08:18.500$ so that was the RAPIDO study.

NOTE Confidence: 0.874603993333333

 $00:08:18.500 \longrightarrow 00:08:20.240$ What about another short course study?

NOTE Confidence: 0.874603993333333

 $00:08:20.240 \longrightarrow 00:08:21.824$ So this was another study that

NOTE Confidence: 0.874603993333333

 $00:08:21.824 \longrightarrow 00:08:22.616$ was very similar.

NOTE Confidence: 0.874603993333333

 $00:08:22.620 \longrightarrow 00:08:26.673$ So and it's designed so I think helps

NOTE Confidence: 0.874603993333333

 $00{:}08{:}26.673 \dashrightarrow 00{:}08{:}28.850$ make the case for or against you.

 $00:08:28.850 \longrightarrow 00:08:29.572$ Argument therapy.

NOTE Confidence: 0.874603993333333

 $00:08:29.572 \longrightarrow 00:08:31.686$ Having two studies that that are

NOTE Confidence: 0.874603993333333

 $00:08:31.686 \longrightarrow 00:08:33.216$ very similar in their design.

NOTE Confidence: 0.874603993333333

 $00:08:33.220 \longrightarrow 00:08:35.590$ So this is an experimental design

NOTE Confidence: 0.874603993333333

00:08:35.590 --> 00:08:37.675 with the short course radiotherapy

NOTE Confidence: 0.874603993333333

 $00:08:37.675 \longrightarrow 00:08:39.399$ on the left here.

NOTE Confidence: 0.874603993333333

00:08:39.400 --> 00:08:41.635 Neoadjuvant Kpop for four cycles

NOTE Confidence: 0.874603993333333

 $00:08:41.635 \longrightarrow 00:08:44.848$ surgery and then adjuvant K pops or two.

NOTE Confidence: 0.874603993333333

00:08:44.850 --> 00:08:47.170 So instead of total neoadjuvant,

NOTE Confidence: 0.87460399333333

 $00:08:47.170 \longrightarrow 00:08:49.210$ it's mostly newagen,

NOTE Confidence: 0.874603993333333

00:08:49.210 --> 00:08:51.883 mostly total neoadjuvant versus

NOTE Confidence: 0.874603993333333

 $00:08:51.883 \longrightarrow 00:08:55.048$ the standard of care again.

NOTE Confidence: 0.874603993333333

 $00{:}08{:}55.050 \dashrightarrow 00{:}08{:}56.364$ Chemoradio therapy surgery and

NOTE Confidence: 0.874603993333333

 $00:08:56.364 \longrightarrow 00:08:58.554$ then cabox for six cycles.

NOTE Confidence: 0.712381153857143

 $00:09:00.610 \longrightarrow 00:09:04.498$ And this is actually a noninferiority

 $00:09:04.498 \longrightarrow 00:09:07.050$ study and like the other,

NOTE Confidence: 0.712381153857143

 $00:09:07.050 \longrightarrow 00:09:10.997$ the study that I just showed not all

NOTE Confidence: 0.712381153857143

 $00:09:10.997 \longrightarrow 00:09:13.238$ patients got adjuvant chemotherapy.

NOTE Confidence: 0.712381153857143

00:09:13.238 --> 00:09:16.638 So actually 25% of both arms didn't

NOTE Confidence: 0.712381153857143

00:09:16.638 --> 00:09:18.930 get adjuvant chemotherapy and in the

NOTE Confidence: 0.712381153857143

 $00:09:19.002 \longrightarrow 00:09:21.860$ study but but all the patients in the

NOTE Confidence: 0.712381153857143

 $00:09:21.860 \longrightarrow 00:09:24.091$ experimental arm that the new therapies

NOTE Confidence: 0.712381153857143

 $00{:}09{:}24.091 \dashrightarrow 00{:}09{:}25.918$ so that that tells you already as

NOTE Confidence: 0.712381153857143

 $00{:}09{:}25.918 \dashrightarrow 00{:}09{:}27.913$ far as systemic therapy goes, the

NOTE Confidence: 0.712381153857143

 $00:09:27.913 \longrightarrow 00:09:29.754$ experimental group is receiving more of it.

NOTE Confidence: 0.712381153857143

 $00{:}09{:}29.760 \dashrightarrow 00{:}09{:}32.082$ Because because both groups are not

NOTE Confidence: 0.712381153857143

00:09:32.082 --> 00:09:33.630 all receiving adjuvant chemotherapy.

NOTE Confidence: 0.712381153857143

00:09:33.630 --> 00:09:35.758 This study was done in China and

NOTE Confidence: 0.712381153857143

 $00{:}09{:}35.758 \dashrightarrow 00{:}09{:}38.160$ it was not considered optional.

NOTE Confidence: 0.712381153857143

 $00:09:38.160 \longrightarrow 00:09:39.714$ We don't know all the reasons why

NOTE Confidence: 0.712381153857143

00:09:39.714 --> 00:09:41.069 patients in the control group,

00:09:41.070 --> 00:09:43.750 for example, didn't get.

NOTE Confidence: 0.712381153857143

00:09:43.750 --> 00:09:44.432 Adjuvant chemotherapy,

NOTE Confidence: 0.712381153857143

 $00:09:44.432 \longrightarrow 00:09:47.160$ So what are some of the survival outcomes?

NOTE Confidence: 0.712381153857143

 $00:09:47.160 \longrightarrow 00:09:50.553$ We see the disease free survival again.

NOTE Confidence: 0.712381153857143

 $00:09:50.553 \longrightarrow 00:09:52.918$ Essentially a progression pre survival

NOTE Confidence: 0.712381153857143

 $00:09:52.918 \longrightarrow 00:09:55.707$ end points for patients that are

NOTE Confidence: 0.712381153857143

 $00:09:55.707 \longrightarrow 00:09:58.448$ nonstatic and so we see a statistically

NOTE Confidence: 0.712381153857143

 $00{:}09{:}58.448 \dashrightarrow 00{:}10{:}00.000$ significant technically hazard ratio,

NOTE Confidence: 0.712381153857143

 $00:10:00.000 \longrightarrow 00:10:02.493$ though only .88.

NOTE Confidence: 0.712381153857143

 $00:10:02.493 \longrightarrow 00:10:06.204$ Favoring total neoadjuvant for for

NOTE Confidence: 0.712381153857143

00:10:06.204 --> 00:10:07.740 this total neoadjuvant approach.

NOTE Confidence: 0.712381153857143

 $00:10:07.740 \longrightarrow 00:10:11.466$ So that's the same as the prior study,

NOTE Confidence: 0.712381153857143 00:10:11.470 --> 00:10:11.881 right? NOTE Confidence: 0.712381153857143

 $00:10:11.881 \longrightarrow 00:10:13.936$ Essentially, we're seeing less relapsed.

NOTE Confidence: 0.712381153857143

 $00:10:13.940 \longrightarrow 00:10:14.858$ I suddenly imagine,

 $00:10:14.858 \longrightarrow 00:10:16.694$ but in this we are seeing.

NOTE Confidence: 0.712381153857143

 $00{:}10{:}16.700 --> 00{:}10{:}17.284 \ \mathrm{In \ contrast},$

NOTE Confidence: 0.712381153857143

00:10:17.284 --> 00:10:19.036 we are seeing an overall survival

NOTE Confidence: 0.712381153857143

 $00:10:19.036 \longrightarrow 00:10:19.620$ benefit here,

NOTE Confidence: 0.712381153857143

 $00:10:19.620 \longrightarrow 00:10:21.996$ so we're seeing a has a ratio of

NOTE Confidence: 0.712381153857143

 $00:10:22.000 \longrightarrow 00:10:25.220$.67 P value of .033.

NOTE Confidence: 0.712381153857143

 $00:10:25.220 \longrightarrow 00:10:27.680$ So unlike the rabbit study,

NOTE Confidence: 0.712381153857143

 $00{:}10{:}27.680 \dashrightarrow 00{:}10{:}29.774$ we are seeing a survival benefit

NOTE Confidence: 0.712381153857143

 $00{:}10{:}29.774 \dashrightarrow 00{:}10{:}32.048$ with total neoadjuvant for mostly new

NOTE Confidence: 0.712381153857143

 $00:10:32.048 \longrightarrow 00:10:34.088$ adjuvant klopps short course radiotherapy

NOTE Confidence: 0.712381153857143

 $00{:}10{:}34.088 \dashrightarrow 00{:}10{:}36.560$ compared to long course radiotherapy,

NOTE Confidence: 0.712381153857143

 $00:10:36.560 \longrightarrow 00:10:38.380$ surgery and adjuvant K Pops.

NOTE Confidence: 0.712381153857143

 $00:10:38.380 \longrightarrow 00:10:40.930$ With that big caveat that.

NOTE Confidence: 0.712381153857143

 $00:10:40.930 \longrightarrow 00:10:42.714$ Where comparing patients that

NOTE Confidence: 0.712381153857143

 $00:10:42.714 \longrightarrow 00:10:45.390$ essentially only 3/4 of the patients

NOTE Confidence: 0.712381153857143

 $00{:}10{:}45.458 \operatorname{--}{>} 00{:}10{:}46.901$ received effective systemic

 $00:10:46.901 \longrightarrow 00:10:49.306$ therapy in the control group,

NOTE Confidence: 0.712381153857143

00:10:49.310 --> 00:10:51.776 whereas the majority receive it in

NOTE Confidence: 0.712381153857143

 $00:10:51.776 \longrightarrow 00:10:54.117$ the experimental group and you know

NOTE Confidence: 0.712381153857143

00:10:54.117 --> 00:10:56.151 you can argue, well, it doesn't.

NOTE Confidence: 0.712381153857143

00:10:56.151 --> 00:10:57.986 You know it doesn't matter.

NOTE Confidence: 0.712381153857143

 $00:10:57.990 \longrightarrow 00:10:59.742$ Patients are are able to get it if

NOTE Confidence: 0.712381153857143

00:10:59.742 --> 00:11:01.389 you do the totally edging approach

NOTE Confidence: 0.712381153857143

 $00:11:01.389 \longrightarrow 00:11:03.358$ and only a portion of them are

NOTE Confidence: 0.712381153857143

 $00:11:03.358 \longrightarrow 00:11:05.986$ able to do it if if if you do

NOTE Confidence: 0.712381153857143

 $00:11:05.986 \longrightarrow 00:11:08.004$ the standard of care approach I,

NOTE Confidence: 0.712381153857143

 $00:11:08.004 \longrightarrow 00:11:09.670$ I think we need a little bit

NOTE Confidence: 0.712381153857143

 $00:11:09.729 \longrightarrow 00:11:11.141$ more information about who's

NOTE Confidence: 0.712381153857143

 $00{:}11{:}11.141 \dashrightarrow 00{:}11{:}12.906$ not getting touch with the rapy.

NOTE Confidence: 0.712381153857143

00:11:12.910 --> 00:11:15.016 Because we don't find that three

NOTE Confidence: 0.712381153857143

00:11:15.016 --> 00:11:17.578 out of four kind of trial eligible

 $00:11:17.578 \longrightarrow 00:11:19.732$ kind of patients are not able

NOTE Confidence: 0.712381153857143

 $00{:}11{:}19.732 \dashrightarrow 00{:}11{:}22.029$ to tolerate adjuvant the rapy.

NOTE Confidence: 0.712381153857143

 $00:11:22.030 \longrightarrow 00:11:24.094$ So a little bit more information

NOTE Confidence: 0.712381153857143

 $00:11:24.094 \longrightarrow 00:11:26.426$ I'd like from the the reasoning

NOTE Confidence: 0.712381153857143

 $00:11:26.426 \longrightarrow 00:11:28.636$ for lack of engagement therapy.

NOTE Confidence: 0.712381153857143

 $00:11:28.640 \longrightarrow 00:11:32.296$ But the other big study in this also.

NOTE Confidence: 0.712381153857143

00:11:32.300 --> 00:11:34.988 Was presented initially the

NOTE Confidence: 0.712381153857143

 $00:11:34.988 \longrightarrow 00:11:37.048$ same ASCO as RAPIDO study.

NOTE Confidence: 0.712381153857143

 $00:11:37.048 \longrightarrow 00:11:40.119$ Asked the 2020 yeah so the other big

NOTE Confidence: 0.712381153857143

00:11:40.119 --> 00:11:42.855 studies produced 23 which was looking

NOTE Confidence: 0.712381153857143

 $00{:}11{:}42.855 \to 00{:}11{:}44.564$ at intensifying the chemotherapy

NOTE Confidence: 0.712381153857143

 $00:11:44.564 \longrightarrow 00:11:47.460$ to full Fox theory and as a rule,

NOTE Confidence: 0.712381153857143

00:11:47.460 --> 00:11:49.836 a toxic or expensive or given

NOTE Confidence: 0.712381153857143

 $00:11:49.836 \longrightarrow 00:11:51.420$ even convenient treatment might

NOTE Confidence: 0.712381153857143

 $00:11:51.488 \longrightarrow 00:11:53.533$ be justified if there's been

NOTE Confidence: 0.712381153857143

 $00{:}11{:}53.533 \dashrightarrow 00{:}11{:}55.578$ improvement in overall so revival.

00:11:55.580 --> 00:11:56.604 On quality of life,

NOTE Confidence: 0.712381153857143

00:11:56.604 --> 00:11:58.470 but does these pre survival benefit alone?

NOTE Confidence: 0.712381153857143

 $00:11:58.470 \longrightarrow 00:11:59.800$ It's tough not considered sufficient.

NOTE Confidence: 0.712381153857143

00:11:59.800 --> 00:12:02.296 We're actually going to intensify therapy.

NOTE Confidence: 0.712381153857143

 $00:12:02.300 \longrightarrow 00:12:04.262$ So compared to the prior presentations

NOTE Confidence: 0.712381153857143

 $00:12:04.262 \longrightarrow 00:12:06.251$ where we're really kind of just

NOTE Confidence: 0.712381153857143

00:12:06.251 --> 00:12:07.806 talking about reordering the therapy

NOTE Confidence: 0.712381153857143

 $00{:}12{:}07.806 \dashrightarrow 00{:}12{:}09.688$ and this we're talking about

NOTE Confidence: 0.712381153857143

 $00:12:09.688 \longrightarrow 00:12:11.272$ reordering and intensifying, right?

NOTE Confidence: 0.712381153857143

 $00:12:11.272 \longrightarrow 00:12:13.036$ So we better we better be able

NOTE Confidence: 0.712381153857143

 $00{:}12{:}13.036 \dashrightarrow 00{:}12{:}15.062$ to show a survival benefit for us

NOTE Confidence: 0.712381153857143

 $00:12:15.062 \longrightarrow 00:12:16.522$ to to comfortably say that

NOTE Confidence: 0.78675948

 $00{:}12{:}16.578 \dashrightarrow 00{:}12{:}17.722$ full Fox theory can

NOTE Confidence: 0.78675948

 $00:12:17.722 \longrightarrow 00:12:19.152$ become a standard of care.

NOTE Confidence: 0.78675948

00:12:19.160 --> 00:12:20.920 So what did they do in this study?

00:12:20.920 --> 00:12:23.810 They took patients that were

NOTE Confidence: 0.78675948

 $00:12:23.810 \longrightarrow 00:12:26.122$ randomized to the typical.

NOTE Confidence: 0.78675948

00:12:26.130 --> 00:12:28.569 Chemoradiotherapy followed by

NOTE Confidence: 0.78675948

00:12:28.569 --> 00:12:31.624 surgery followed by chemotherapy.

NOTE Confidence: 0.78675948

00:12:31.624 --> 00:12:32.238 Interestingly,

NOTE Confidence: 0.78675948

00:12:32.238 --> 00:12:35.607 six months of chemotherapy here, right?

NOTE Confidence: 0.78675948

00:12:35.607 --> 00:12:37.389 We would normally be four months

NOTE Confidence: 0.78675948

 $00:12:37.389 \longrightarrow 00:12:39.534$ in the United States and then in

NOTE Confidence: 0.78675948

 $00{:}12{:}39.534 \dashrightarrow 00{:}12{:}41.029$ the the the experimental arm.

NOTE Confidence: 0.78675948

 $00:12:41.030 \longrightarrow 00:12:43.676$ Both fear and off for three months.

NOTE Confidence: 0.78675948

00:12:43.680 --> 00:12:45.052 Maria therapy long course.

NOTE Confidence: 0.78675948

 $00:12:45.052 \longrightarrow 00:12:48.264$ This time in that short course or and

NOTE Confidence: 0.78675948

 $00:12:48.264 \longrightarrow 00:12:51.149$ then followed by adjuvant chemotherapy.

NOTE Confidence: 0.78675948

 $00{:}12{:}51.150 \dashrightarrow 00{:}12{:}54.741$ So again, that truly shows new adjuvant

NOTE Confidence: 0.78675948

 $00:12:54.741 \longrightarrow 00:12:58.110$ but mostly neoadjuvant or half new adjuvant.

NOTE Confidence: 0.78675948

 $00:12:58.110 \longrightarrow 00:12:59.510$ In this study, again,

00:12:59.510 --> 00:13:01.610 how many questions does this study?

NOTE Confidence: 0.78675948

 $00{:}13{:}01.610 \dashrightarrow 00{:}13{:}02.610$ Kind of trying to answer.

NOTE Confidence: 0.78675948

 $00:13:02.610 \longrightarrow 00:13:04.290$ It's trying to answer.

NOTE Confidence: 0.78675948

 $00:13:04.290 \longrightarrow 00:13:05.130$ It's not.

NOTE Confidence: 0.78675948

 $00:13:05.130 \longrightarrow 00:13:06.990$ It's not asking a question of

NOTE Confidence: 0.78675948

 $00:13:06.990 \longrightarrow 00:13:08.230$ different types of radiation,

NOTE Confidence: 0.78675948

 $00:13:08.230 \longrightarrow 00:13:09.500$ so that that simplifies

NOTE Confidence: 0.78675948

 $00:13:09.500 \longrightarrow 00:13:10.770$ the design a little bit,

NOTE Confidence: 0.78675948

 $00:13:10.770 \longrightarrow 00:13:11.640$ but it is.

NOTE Confidence: 0.78675948

 $00:13:11.640 \longrightarrow 00:13:13.090$ It is looking at slightly

NOTE Confidence: 0.78675948

00:13:13.090 --> 00:13:14.170 different chemotherapy schedule,

NOTE Confidence: 0.78675948

 $00:13:14.170 \longrightarrow 00:13:16.270$ even in the control group that would

NOTE Confidence: 0.78675948

 $00:13:16.270 \longrightarrow 00:13:18.189$ normally do more systemic therapy,

NOTE Confidence: 0.78675948

 $00:13:18.190 \longrightarrow 00:13:19.590$ but I think that's OK.

NOTE Confidence: 0.78675948

 $00:13:19.590 \longrightarrow 00:13:21.006$ So what do we see in the produce?

00:13:21.010 --> 00:13:23.550 23 study we saw a past CR rate just to

NOTE Confidence: 0.78675948

 $00{:}13{:}23.622 \dashrightarrow 00{:}13{:}26.296$ I think every body focuses on the number,

NOTE Confidence: 0.78675948

 $00{:}13{:}26.300 \dashrightarrow 00{:}13{:}27.876$ so I want to highlight them as well.

NOTE Confidence: 0.78675948

 $00:13:27.880 \longrightarrow 00:13:29.776$ Pathologic complete response rate

NOTE Confidence: 0.78675948

 $00:13:29.776 \longrightarrow 00:13:31.342$ 28% with triplet chemotherapy.

NOTE Confidence: 0.78675948

 $00:13:31.342 \longrightarrow 00:13:33.890$ Full Fox series and I have full

NOTE Confidence: 0.78675948

 $00:13:33.955 \longrightarrow 00:13:34.960$ Fox series here.

NOTE Confidence: 0.78675948

00:13:34.960 --> 00:13:36.300 That's what we call it a lot in the United

NOTE Confidence: 0.78675948

 $00:13:36.336 \longrightarrow 00:13:37.680$ States is technically a different regimen.

NOTE Confidence: 0.78675948

 $00:13:37.680 \longrightarrow 00:13:38.960$ This was actually a full fear or not,

NOTE Confidence: 0.7867594800:13:38.960 --> 00:13:39.330 but.

NOTE Confidence: 0.575433818

00:13:41.420 --> 00:13:43.200 Very obviously the same drugs,

NOTE Confidence: 0.575433818

00:13:43.200 --> 00:13:47.118 just very similar, slightly modified dosing,

NOTE Confidence: 0.575433818

 $00{:}13{:}47.120 \dashrightarrow 00{:}13{:}49.024$ so the pathologic complete

NOTE Confidence: 0.575433818

 $00:13:49.024 \longrightarrow 00:13:51.216$ response was 28% versus 12%,

NOTE Confidence: 0.575433818

 $00:13:51.216 \longrightarrow 00:13:53.688$ so full Fox full Fox theory

 $00:13:53.688 \longrightarrow 00:13:55.468$ short course, long course.

NOTE Confidence: 0.575433818

 $00{:}13{:}55.468 \dashrightarrow 00{:}13{:}57.995$ It seems like with the total the edge

NOTE Confidence: 0.575433818

 $00:13:57.995 \longrightarrow 00:13:59.952$ and approaches are are complete response

NOTE Confidence: 0.575433818

 $00:13:59.952 \longrightarrow 00:14:01.942$ that Pathologic complete response rates

NOTE Confidence: 0.575433818

00:14:01.942 --> 00:14:04.382 are pretty consistent at the 20 to 25,

NOTE Confidence: 0.575433818

 $00:14:04.382 \longrightarrow 00:14:05.851$ maybe to to 30% range.

NOTE Confidence: 0.575433818

 $00:14:05.851 \longrightarrow 00:14:07.678$ So what do we see in survival

NOTE Confidence: 0.575433818

 $00{:}14{:}07.678 \dashrightarrow 00{:}14{:}09.059$ outcomes for these patients?

NOTE Confidence: 0.575433818

 $00:14:09.060 \longrightarrow 00:14:11.788$ So if we look at disease free survival?

NOTE Confidence: 0.575433818

 $00{:}14{:}11.790 \dashrightarrow 00{:}14{:}14.022$ Three year disease free survival benefit

NOTE Confidence: 0.575433818

 $00:14:14.022 \longrightarrow 00:14:16.159$ that favors will total new agent.

NOTE Confidence: 0.575433818

00:14:16.160 --> 00:14:20.710 The Fox theory 59% of 76 versus 69%

NOTE Confidence: 0.575433818

 $00{:}14{:}20.710 \dashrightarrow 00{:}14{:}22.036$ when we look at overall survival.

NOTE Confidence: 0.575433818

 $00:14:22.040 \longrightarrow 00:14:23.792$ This says that this is not

NOTE Confidence: 0.575433818

 $00:14:23.792 \longrightarrow 00:14:24.376$ statistically significant,

 $00:14:24.380 \longrightarrow 00:14:26.724$ but you can see the cursor separated there.

NOTE Confidence: 0.575433818

00:14:26.730 --> 00:14:28.878 That may change over time for

NOTE Confidence: 0.575433818

 $00{:}14{:}28.878 \dashrightarrow 00{:}14{:}30.809$ seeing the disease free survival

NOTE Confidence: 0.575433818

 $00:14:30.809 \longrightarrow 00:14:32.949$ benefit as more time elapses,

NOTE Confidence: 0.575433818

 $00:14:32.950 \longrightarrow 00:14:35.326$ we may see a survival benefit,

NOTE Confidence: 0.575433818

 $00:14:35.330 \longrightarrow 00:14:38.158$ but at this time there's clearly not

NOTE Confidence: 0.575433818

 $00:14:38.158 \longrightarrow 00:14:39.890$ statistically significant survival benefit.

NOTE Confidence: 0.575433818

 $00:14:39.890 \longrightarrow 00:14:42.539$ But what about?

NOTE Confidence: 0.575433818

 $00:14:42.540 \longrightarrow 00:14:44.580$ The metastasis free survival,

NOTE Confidence: 0.575433818

 $00:14:44.580 \longrightarrow 00:14:46.395$ so again 79% versus 72%,

NOTE Confidence: 0.575433818

00:14:46.395 --> 00:14:48.250 so we are doing a better job

NOTE Confidence: 0.575433818

 $00{:}14{:}48.312 \dashrightarrow 00{:}14{:}50.058$ controlling systemic disease,

NOTE Confidence: 0.575433818

 $00:14:50.060 \longrightarrow 00:14:52.360$ just like we saw in the rapid of the trial.

NOTE Confidence: 0.575433818

 $00:14:52.360 \longrightarrow 00:14:54.754$ With this this early use and increased

NOTE Confidence: 0.575433818

 $00:14:54.754 \longrightarrow 00:14:56.952$ intensity full Fox area and I think

NOTE Confidence: 0.575433818

 $00:14:56.952 \longrightarrow 00:14:59.655$ that's where the the hope of using a

00:14:59.655 --> 00:15:01.617 more intensive treatment like this is,

NOTE Confidence: 0.575433818

 $00{:}15{:}01.620 --> 00{:}15{:}04.340$ is is the hopefully increase

NOTE Confidence: 0.575433818

 $00:15:04.340 \longrightarrow 00:15:05.356$ control of micrometastatic disease

NOTE Confidence: 0.575433818

 $00:15:05.356 \longrightarrow 00:15:06.880$ and care more of those patients.

NOTE Confidence: 0.575433818

 $00:15:06.880 \longrightarrow 00:15:08.500$ But we did not see that yet in this study.

NOTE Confidence: 0.575433818 00:15:08.500 --> 00:15:11.560 So so.

NOTE Confidence: 0.575433818

 $00:15:11.560 \longrightarrow 00:15:13.180$ When we talk about intensifying therapy,

NOTE Confidence: 0.575433818

 $00:15:13.180 \longrightarrow 00:15:17.428$ we want to be really sure that we are.

NOTE Confidence: 0.575433818

 $00:15:17.430 \longrightarrow 00:15:20.226$ We are being safe about it,

NOTE Confidence: 0.575433818

 $00:15:20.230 \longrightarrow 00:15:20.590$ right?

NOTE Confidence: 0.575433818

 $00:15:20.590 \longrightarrow 00:15:23.110$ So how tolerable as whole thought series?

NOTE Confidence: 0.575433818

00:15:23.110 --> 00:15:24.496 So I think about this and kind

NOTE Confidence: 0.575433818

 $00:15:24.496 \longrightarrow 00:15:25.827$ of four periods of its use here.

NOTE Confidence: 0.575433818

00:15:25.830 --> 00:15:28.438 The neoadjuvant period chemoradiotherapy

NOTE Confidence: 0.575433818

 $00:15:28.438 \longrightarrow 00:15:29.090$ period,

 $00:15:29.090 \longrightarrow 00:15:30.975$ the perioperative period and the

NOTE Confidence: 0.575433818

 $00{:}15{:}30.975 \dashrightarrow 00{:}15{:}32.106$ adjuvant chemotherapy period.

NOTE Confidence: 0.575433818

 $00:15:32.110 \longrightarrow 00:15:34.126$ So we look at the neoadjuvant period.

NOTE Confidence: 0.575433818

00:15:34.130 --> 00:15:36.746 Most people got through the six cycles of

NOTE Confidence: 0.575433818

 $00:15:36.746 \longrightarrow 00:15:39.726$ folks aren't the full without an issue,

NOTE Confidence: 0.575433818

 $00:15:39.726 \longrightarrow 00:15:42.094$ no new safety signals.

NOTE Confidence: 0.575433818

00:15:42.100 --> 00:15:43.790 Emma radiotherapy period 95% of

NOTE Confidence: 0.575433818

00:15:43.790 --> 00:15:46.069 patients with teams made it through

NOTE Confidence: 0.575433818

 $00{:}15{:}46.069 {\:{\mbox{--}}}{\:{\mbox{-}}} 00{:}15{:}47.659$ the chemoradiotherapy period.

NOTE Confidence: 0.575433818

 $00:15:47.660 \longrightarrow 00:15:49.823$ First is 99% of the standard of

NOTE Confidence: 0.575433818

 $00{:}15{:}49.823 \dashrightarrow 00{:}15{:}51.849$ care who went straight to it.

NOTE Confidence: 0.575433818

 $00:15:51.850 \longrightarrow 00:15:53.130$ 80s through period were similar

NOTE Confidence: 0.575433818

 $00:15:53.130 \longrightarrow 00:15:53.898$ in both groups,

NOTE Confidence: 0.575433818

 $00:15:53.900 \longrightarrow 00:15:55.826$ so I think they checked those

NOTE Confidence: 0.575433818

 $00:15:55.826 \longrightarrow 00:15:57.570$ boxes in the perioperative period,

NOTE Confidence: 0.575433818

 $00:15:57.570 \longrightarrow 00:15:59.558$ so 92% of the patients that received

 $00:15:59.558 \longrightarrow 00:16:01.197$ full box period induction Underwood

NOTE Confidence: 0.575433818

 $00{:}16{:}01.197 \dashrightarrow 00{:}16{:}03.745$ surgery versus 95 with standard of care.

NOTE Confidence: 0.575433818

 $00:16:03.750 \longrightarrow 00:16:05.550$ So there is small difference.

NOTE Confidence: 0.575433818

 $00:16:05.550 \longrightarrow 00:16:06.591$ Postoperative morbidity was

NOTE Confidence: 0.575433818

 $00{:}16{:}06.591 \dashrightarrow 00{:}16{:}07.979$ similar between the groups,

NOTE Confidence: 0.575433818

 $00:16:07.980 \longrightarrow 00:16:09.545$ so we're not seeing an

NOTE Confidence: 0.575433818

 $00:16:09.545 \longrightarrow 00:16:10.484$ increase in complications.

NOTE Confidence: 0.575433818

 $00{:}16{:}10.490 \dashrightarrow 00{:}16{:}12.608$ We're also not seeing a difference,

NOTE Confidence: 0.575433818

 $00:16:12.610 \longrightarrow 00:16:13.540$ by the way,

NOTE Confidence: 0.575433818

 $00:16:13.540 \longrightarrow 00:16:15.710$ in the type of surgery people needed.

NOTE Confidence: 0.575433818

00:16:15.710 --> 00:16:18.294 So if we had hoped that this surgery

NOTE Confidence: 0.575433818

 $00:16:18.294 \longrightarrow 00:16:20.849$ was going to reduce the rate of APR,

NOTE Confidence: 0.575433818

 $00{:}16{:}20.850 \dashrightarrow 00{:}16{:}22.368$ etcetera, we were a little bit.

NOTE Confidence: 0.575433818

 $00:16:22.370 \longrightarrow 00:16:22.944$ Let down,

NOTE Confidence: 0.575433818

 $00:16:22.944 \longrightarrow 00:16:24.953$ so I think that is important to

 $00:16:24.953 \longrightarrow 00:16:26.952$ notice to note even that higher

NOTE Confidence: 0.575433818

 $00{:}16{:}26.952 \dashrightarrow 00{:}16{:}29.123$ path the rate didn't translate into

NOTE Confidence: 0.575433818

 $00:16:29.123 \longrightarrow 00:16:30.500$ necessary significant reductions

NOTE Confidence: 0.575433818

00:16:30.500 --> 00:16:32.795 in morbidity from from surgery,

NOTE Confidence: 0.575433818

 $00:16:32.800 \longrightarrow 00:16:35.376$ at least in the entire study population.

NOTE Confidence: 0.575433818

 $00:16:35.380 \longrightarrow 00:16:36.820$ What about adding chemotherapy?

NOTE Confidence: 0.575433818

 $00:16:36.820 \longrightarrow 00:16:38.620$ If you get totally adjuvant,

NOTE Confidence: 0.575433818

 $00:16:38.620 \longrightarrow 00:16:41.116$ are you less likely to tolerate

NOTE Confidence: 0.575433818

00:16:41.116 --> 00:16:42.780 adjuvant chemotherapy at least

NOTE Confidence: 0.715230942

 $00:16:42.780 \longrightarrow 00:16:44.140$ to start the adjuvant?

NOTE Confidence: 0.715230942

 $00{:}16{:}44.140 \dashrightarrow 00{:}16{:}45.768$ Chemotherapy? The answer was no.

NOTE Confidence: 0.715230942

00:16:45.768 --> 00:16:47.822 You know 77 versus 79% of patients

NOTE Confidence: 0.715230942

 $00:16:47.822 \longrightarrow 00:16:49.600$ were able to start the editing therapy,

NOTE Confidence: 0.715230942

 $00{:}16{:}49.600 \dashrightarrow 00{:}16{:}51.510$ but TNT patients ended up

NOTE Confidence: 0.715230942

00:16:51.510 --> 00:16:52.656 receiving fewer adjuvants.

NOTE Confidence: 0.715230942

 $00:16:52.660 \longrightarrow 00:16:55.294$ Cycles, but overall we have cumulative

00:16:55.294 --> 00:16:57.050 amounts of chemotherapy patients

NOTE Confidence: 0.715230942

 $00:16:57.115 \longrightarrow 00:16:59.786$ received to the total neovagina

NOTE Confidence: 0.715230942

 $00:16:59.786 \longrightarrow 00:17:04.084$ from ARM still still received more

NOTE Confidence: 0.715230942

 $00:17:04.084 \longrightarrow 00:17:06.748$ chemotherapy cumulatively again.

NOTE Confidence: 0.715230942

 $00:17:06.750 \longrightarrow 00:17:08.095$ About 21% here are patients

NOTE Confidence: 0.715230942

 $00:17:08.095 \longrightarrow 00:17:09.869$ in the standard of care group

NOTE Confidence: 0.715230942

00:17:09.869 --> 00:17:11.349 did not receive chemotherapy,

NOTE Confidence: 0.715230942

 $00:17:11.350 \longrightarrow 00:17:13.860$ so you are comparing a group 100% of

NOTE Confidence: 0.715230942

 $00{:}17{:}13.860 \dashrightarrow 00{:}17{:}15.855$ the whom at least got some systemic

NOTE Confidence: 0.715230942

 $00:17:15.855 \longrightarrow 00:17:17.538$ therapy and and a control group.

NOTE Confidence: 0.715230942

 $00:17:17.540 \longrightarrow 00:17:21.206$ Only 79% got effective systemic any

NOTE Confidence: 0.715230942

 $00:17:21.206 \longrightarrow 00:17:24.530$ level of affective systemic therapy.

NOTE Confidence: 0.715230942

 $00:17:24.530 \longrightarrow 00:17:27.114$ So if we kind of summarize what the

NOTE Confidence: 0.715230942

00:17:27.114 --> 00:17:29.150 difference is between these three,

NOTE Confidence: 0.715230942

 $00:17:29.150 \longrightarrow 00:17:31.490$ these three or four trials,

 $00:17:31.490 \longrightarrow 00:17:33.700$ so they all had slightly

NOTE Confidence: 0.715230942

00:17:33.700 --> 00:17:34.584 different eligibility.

NOTE Confidence: 0.715230942

00:17:34.590 --> 00:17:37.350 Rapido trial actually had the most

NOTE Confidence: 0.715230942

 $00:17:37.350 \longrightarrow 00:17:39.060$ advanced tumors and only allowing

NOTE Confidence: 0.715230942

 $00{:}17{:}39.060 \dashrightarrow 00{:}17{:}41.300$ clinical test for and two disease.

NOTE Confidence: 0.715230942

 $00:17:41.300 \longrightarrow 00:17:43.946$ But they all have very consistent.

NOTE Confidence: 0.715230942

00:17:43.950 --> 00:17:44.594 Results,

NOTE Confidence: 0.715230942

00:17:44.594 --> 00:17:48.254 are fairly consistent results they used

NOTE Confidence: 0.715230942

 $00{:}17{:}48.254 \dashrightarrow 00{:}17{:}51.456$ in addition to having different stages,

NOTE Confidence: 0.715230942

 $00:17:51.456 \longrightarrow 00:17:52.914$ essentially of eligibility.

NOTE Confidence: 0.715230942

 $00:17:52.914 \longrightarrow 00:17:54.858$ They all use different.

NOTE Confidence: 0.715230942

 $00:17:54.860 \longrightarrow 00:17:55.943$ Types of chemotherapy.

NOTE Confidence: 0.715230942

00:17:55.943 --> 00:17:57.387 Different durations of chemotherapy,

NOTE Confidence: 0.715230942

 $00:17:57.390 \longrightarrow 00:17:59.455$ and it's only in the new agent

NOTE Confidence: 0.715230942

 $00:17:59.455 \longrightarrow 00:18:00.892$ period and therefore different

NOTE Confidence: 0.715230942

00:18:00.892 --> 00:18:02.840 postoperative regiments as well.

 $00:18:02.840 \longrightarrow 00:18:05.495$ But they're they're three year

NOTE Confidence: 0.715230942

 $00:18:05.495 \longrightarrow 00:18:07.790$ overall survival and disease free.

NOTE Confidence: 0.715230942

 $00:18:07.790 \longrightarrow 00:18:09.840$ Survival are are all are

NOTE Confidence: 0.715230942

 $00:18:09.840 \longrightarrow 00:18:11.310$ all relatively similar,

NOTE Confidence: 0.715230942

 $00{:}18{:}11.310 \dashrightarrow 00{:}18{:}14.034$ and comparisons to their control arms

NOTE Confidence: 0.715230942

 $00:18:14.034 \longrightarrow 00:18:17.239$ with the only overall survival benefit.

NOTE Confidence: 0.715230942

00:18:17.240 --> 00:18:19.460 The clearly demonstrated so far

NOTE Confidence: 0.715230942

 $00:18:19.460 \longrightarrow 00:18:22.270$ in the in the stellar trial.

NOTE Confidence: 0.715230942 00:18:22.270 --> 00:18:23.650 So. NOTE Confidence: 0.715230942

00:18:23.650 --> 00:18:24.102 Umm?

NOTE Confidence: 0.715230942

 $00:18:24.102 \longrightarrow 00:18:26.814$ Is TNT a standard of care

NOTE Confidence: 0.715230942

 $00:18:26.814 \longrightarrow 00:18:29.059$ or the standard of care?

NOTE Confidence: 0.715230942

 $00{:}18{:}29.060 \dashrightarrow 00{:}18{:}34.985$ And I I want to say that it's really hard

NOTE Confidence: 0.715230942

 $00{:}18{:}34.985 \dashrightarrow 00{:}18{:}39.030$ to compare and these these trials.

NOTE Confidence: 0.715230942

00:18:39.030 --> 00:18:40.350 How do you mix and match?

 $00:18:40.350 \longrightarrow 00:18:42.162$ You mix and match full thoughts

NOTE Confidence: 0.715230942

 $00:18:42.162 \longrightarrow 00:18:43.068$ with long Horse.

NOTE Confidence: 0.715230942

 $00:18:43.070 \longrightarrow 00:18:45.998$ Full fox theory with short course

NOTE Confidence: 0.715230942

 $00:18:46.000 \longrightarrow 00:18:47.820$ it becomes a little bit busy and

NOTE Confidence: 0.715230942

 $00:18:47.820 \longrightarrow 00:18:49.682$ to think about it and so it's

NOTE Confidence: 0.715230942

 $00{:}18{:}49.682 \dashrightarrow 00{:}18{:}51.212$ hard to say that ordering truly

NOTE Confidence: 0.715230942

 $00:18:51.268 \longrightarrow 00:18:52.958$ matters for survival benefits when

NOTE Confidence: 0.715230942

00:18:52.958 --> 00:18:54.916 the TNT groups are getting more

NOTE Confidence: 0.715230942

 $00{:}18{:}54.916 \dashrightarrow 00{:}18{:}56.246$ effective systemic therapy and all

NOTE Confidence: 0.715230942

 $00:18:56.246 \longrightarrow 00:18:57.945$ the studies because the rate of

NOTE Confidence: 0.715230942

 $00{:}18{:}57.945 \dashrightarrow 00{:}18{:}59.125$ adjuvant the rapy is underwhelming,

NOTE Confidence: 0.715230942

00:18:59.130 --> 00:19:01.146 at least for our US patients,

NOTE Confidence: 0.715230942

 $00:19:01.150 \longrightarrow 00:19:02.341$ one could argue,

NOTE Confidence: 0.715230942 00:19:02.341 --> 00:19:02.738 hey, NOTE Confidence: 0.715230942

 $00:19:02.738 \longrightarrow 00:19:05.635$ that is real life and and people

NOTE Confidence: 0.715230942

00:19:05.635 --> 00:19:08.432 that get a surgery that maybe aren't

 $00:19:08.432 \longrightarrow 00:19:10.819$ as likely to be able to tolerate.

NOTE Confidence: 0.715230942

 $00{:}19{:}10.820 \dashrightarrow 00{:}19{:}12.692$ Affective post of the post treatment

NOTE Confidence: 0.715230942

 $00:19:12.692 \longrightarrow 00:19:14.662$ surgery and so that it's easier

NOTE Confidence: 0.715230942

00:19:14.662 --> 00:19:16.307 to get into systemic therapy

NOTE Confidence: 0.715230942

00:19:16.307 --> 00:19:17.927 in the neoadjuvant pair period.

NOTE Confidence: 0.715230942

00:19:17.927 --> 00:19:20.356 I think that's one of the arguments

NOTE Confidence: 0.715230942

 $00:19:20.356 \longrightarrow 00:19:23.416$ in a more and more of the surgical

NOTE Confidence: 0.715230942

00:19:23.416 --> 00:19:24.406 disease pancreatic cancer,

NOTE Confidence: 0.715230942

 $00:19:24.406 \longrightarrow 00:19:25.012$ for example.

NOTE Confidence: 0.715230942

00:19:25.012 --> 00:19:27.566 But I I think it's a little bit

NOTE Confidence: 0.715230942

 $00:19:27.566 \longrightarrow 00:19:28.580$ more complex here,

NOTE Confidence: 0.715230942

 $00{:}19{:}28.580 \dashrightarrow 00{:}19{:}30.164$ because that's not quite the case

NOTE Confidence: 0.715230942

 $00{:}19{:}30.164 \dashrightarrow 00{:}19{:}32.199$ that we see in our patient population

NOTE Confidence: 0.715230942

 $00:19:32.199 \longrightarrow 00:19:34.355$ here in the United States that we

NOTE Confidence: 0.715230942

 $00:19:34.410 \longrightarrow 00:19:36.192$ aren't able to get in affective

 $00:19:36.192 \longrightarrow 00:19:38.304$ systemic therapy up to 3040% of the time.

NOTE Confidence: 0.715230942

00:19:38.304 --> 00:19:39.459 It seems a bit extreme,

NOTE Confidence: 0.715230942

 $00:19:39.460 \longrightarrow 00:19:40.260$ so I think that.

NOTE Confidence: 0.715230942

 $00:19:40.260 \longrightarrow 00:19:41.723$ One of the contenders here is that

NOTE Confidence: 0.715230942

00:19:41.723 --> 00:19:43.427 these guys are all done outside the US,

NOTE Confidence: 0.715230942

 $00{:}19{:}43.430 \dashrightarrow 00{:}19{:}44.700$ where the less aggregate the rapy

NOTE Confidence: 0.715230942

 $00:19:44.700 \longrightarrow 00:19:45.970$ is used for rectal cancer.

NOTE Confidence: 0.715230942

 $00:19:45.970 \longrightarrow 00:19:47.657$ So we may be seeing mainly an

NOTE Confidence: 0.715230942

 $00{:}19{:}47.657 \dashrightarrow 00{:}19{:}49.388$ effect that one group of patients

NOTE Confidence: 0.715230942

 $00:19:49.388 \longrightarrow 00:19:50.968$ is getting systemic therapy and

NOTE Confidence: 0.715230942

00:19:50.968 --> 00:19:51.600 one isn't NOTE Confidence: 0.779020331428571

 $00:19:51.663 \longrightarrow 00:19:53.746$ in 25% of the time, but in the end.

NOTE Confidence: 0.779020331428571

 $00:19:53.750 \longrightarrow 00:19:55.286$ For me, the positives outweigh that.

NOTE Confidence: 0.779020331428571

 $00:19:55.290 \longrightarrow 00:19:56.698$ The potential negatives here,

NOTE Confidence: 0.779020331428571

00:19:56.698 --> 00:19:58.106 and I'm using this,

NOTE Confidence: 0.779020331428571

00:19:58.110 --> 00:19:59.378 I'm using neoadjuvant therapy

 $00:19:59.378 \longrightarrow 00:20:00.963$ in the majority of patients,

NOTE Confidence: 0.779020331428571

 $00:20:00.970 \longrightarrow 00:20:03.287$ and certainly I think this is a

NOTE Confidence: 0.779020331428571

 $00:20:03.287 \longrightarrow 00:20:04.940$ finitive care, and if an OS benefit

NOTE Confidence: 0.779020331428571

 $00:20:04.940 \longrightarrow 00:20:06.429$ is shown kind of across the board,

NOTE Confidence: 0.779020331428571

 $00{:}20{:}06.430 \longrightarrow 00{:}20{:}08.747$ it will become the standard of care.

NOTE Confidence: 0.779020331428571

 $00:20:08.750 \longrightarrow 00:20:10.520$ So I think some of my.

NOTE Confidence: 0.779020331428571

00:20:10.520 --> 00:20:12.072 Panelists will focus especially

NOTE Confidence: 0.779020331428571

00:20:12.072 --> 00:20:14.012 Doctor Reddy talking about the

NOTE Confidence: 0.779020331428571

 $00:20:14.012 \longrightarrow 00:20:15.717$ surgical benefits of this we'll.

NOTE Confidence: 0.779020331428571

 $00{:}20{:}15.720 \dashrightarrow 00{:}20{:}18.368$ We'll talk about the reduced time to often

NOTE Confidence: 0.779020331428571

00:20:18.368 --> 00:20:20.377 reserve reversal of the major advantage,

NOTE Confidence: 0.779020331428571

 $00:20:20:380 \longrightarrow 00:20:22.550$ the possibility of reduced surgical

NOTE Confidence: 0.779020331428571

 $00{:}20{:}22.550 \dashrightarrow 00{:}20{:}24.720$ morbidity for low rectal cancer.

NOTE Confidence: 0.779020331428571

 $00:20:24.720 \longrightarrow 00:20:26.888$ Certainly in selected patients.

NOTE Confidence: 0.779020331428571

 $00:20:26.888 \longrightarrow 00:20:29.056$ Improve disease free survival.

 $00:20:29.060 \longrightarrow 00:20:30.544$ Possibility of OS benefit.

NOTE Confidence: 0.779020331428571

 $00:20:30.544 \longrightarrow 00:20:31.657$ There's longer follow-up.

NOTE Confidence: 0.779020331428571

 $00:20:31.660 \longrightarrow 00:20:34.404$ Certainly in some of these studies like the.

NOTE Confidence: 0.779020331428571

 $00:20:34.410 \longrightarrow 00:20:36.168$ Or just stay and we're not

NOTE Confidence: 0.779020331428571

 $00:20:36.168 \longrightarrow 00:20:37.730$ going to talk about well,

NOTE Confidence: 0.779020331428571

00:20:37.730 --> 00:20:39.386 I'm not going to talk about watching me much,

NOTE Confidence: 0.779020331428571

 $00:20:39.390 \longrightarrow 00:20:42.546$ but but the possibility of

NOTE Confidence: 0.779020331428571

 $00:20:42.546 \longrightarrow 00:20:43.650$ available for watching rate.

NOTE Confidence: 0.779020331428571 00:20:43.650 --> 00:20:44.322 Of course,

NOTE Confidence: 0.779020331428571

 $00:20:44.322 \longrightarrow 00:20:46.002$ with TNT that's not available

NOTE Confidence: 0.779020331428571

 $00{:}20{:}46.002 \dashrightarrow 00{:}20{:}47.453$ with without it disadvantages,

NOTE Confidence: 0.779020331428571

 $00:20:47.453 \longrightarrow 00:20:50.554$ I think, for a lower rate of

NOTE Confidence: 0.779020331428571

 $00:20:50.554 \longrightarrow 00:20:52.659$ therapy completion compared to CRT.

NOTE Confidence: 0.779020331428571

 $00:20:52.660 \longrightarrow 00:20:55.258$ Even so, it just it's small.

NOTE Confidence: 0.779020331428571

00:20:55.260 --> 00:20:56.940 It's delaying tended defended his surgery,

NOTE Confidence: 0.779020331428571

 $00:20:56.940 \longrightarrow 00:20:58.602$ which can be important and many

 $00:20:58.602 \longrightarrow 00:21:00.080$ patients cannot tolerate the long

NOTE Confidence: 0.779020331428571

00:21:00.080 --> 00:21:01.340 duration of systemic therapy.

NOTE Confidence: 0.779020331428571

 $00:21:01.340 \longrightarrow 00:21:03.176$ For example, studies and produce 23.

NOTE Confidence: 0.779020331428571

00:21:03.180 --> 00:21:05.760 So I think that brings me to my next point,

NOTE Confidence: 0.779020331428571

 $00:21:05.760 \longrightarrow 00:21:08.014$ that which chemotherapy regimen to you this?

NOTE Confidence: 0.779020331428571

 $00:21:08.020 \longrightarrow 00:21:09.436$ I think full Cox Cable box

NOTE Confidence: 0.779020331428571

 $00:21:09.436 \longrightarrow 00:21:10.820$ for at least four months,

NOTE Confidence: 0.779020331428571

 $00:21:10.820 \longrightarrow 00:21:12.773$ and the majority of patients for the

NOTE Confidence: 0.779020331428571

 $00{:}21{:}12.773 \dashrightarrow 00{:}21{:}14.579$ total nudging the rapy is there's there's.

NOTE Confidence: 0.779020331428571

00:21:14.580 --> 00:21:17.106 There's the approach most widely adopted,

NOTE Confidence: 0.779020331428571

 $00:21:17.110 \longrightarrow 00:21:19.958$ and I support that.

NOTE Confidence: 0.779020331428571

 $00:21:19.960 \longrightarrow 00:21:22.018$ Thus can be used for select patients

NOTE Confidence: 0.779020331428571

 $00{:}21{:}22.018 \dashrightarrow 00{:}21{:}24.002$ that are younger fit where local

NOTE Confidence: 0.779020331428571

00:21:24.002 --> 00:21:26.078 response is more meaningful for surgery,

NOTE Confidence: 0.779020331428571

00:21:26.080 --> 00:21:28.474 but I think there's insufficient evidence

 $00:21:28.474 \longrightarrow 00:21:30.760$ to recommend this over whole Fox.

NOTE Confidence: 0.779020331428571

 $00{:}21{:}30.760 \dashrightarrow 00{:}21{:}32.975$ For for patients and shouldn't

NOTE Confidence: 0.779020331428571

 $00:21:32.975 \longrightarrow 00:21:35.190$ necessarily be broadly used yet.

NOTE Confidence: 0.779020331428571

 $00:21:35.190 \longrightarrow 00:21:38.232$ So just spend a few minutes

NOTE Confidence: 0.779020331428571

 $00:21:38.232 \longrightarrow 00:21:39.753$ talking about the.

NOTE Confidence: 0.779020331428571

00:21:39.760 --> 00:21:42.168 The role of checkpoint inhibitors for MSI

NOTE Confidence: 0.779020331428571

 $00:21:42.168 \longrightarrow 00:21:44.518$ high rectal cancer that is nonmetastatic.

NOTE Confidence: 0.779020331428571

 $00:21:44.520 \longrightarrow 00:21:45.832$ This was presented data

NOTE Confidence: 0.779020331428571

 $00{:}21{:}45.832 \dashrightarrow 00{:}21{:}47.472$ presented at GIS this year,

NOTE Confidence: 0.779020331428571

 $00:21:47.480 \longrightarrow 00:21:49.000$ which I do ultimately think

NOTE Confidence: 0.779020331428571

00:21:49.000 --> 00:21:50.216 will be practice changing,

NOTE Confidence: 0.779020331428571

00:21:50.220 --> 00:21:53.139 but small numbers because these are patients,

NOTE Confidence: 0.779020331428571

 $00:21:53.140 \longrightarrow 00:21:55.124$ so mismatch repair deficient

NOTE Confidence: 0.779020331428571

 $00:21:55.124 \longrightarrow 00:21:57.604$ colorectal cancer in rectal cancer.

NOTE Confidence: 0.779020331428571 00:21:57.610 --> 00:21:58.578 Excuse me, NOTE Confidence: 0.779020331428571

 $00:21:58.578 \longrightarrow 00:22:02.468$ is is 5 to 10% of of rectal cancer,

 $00:22:02.468 \longrightarrow 00:22:03.936$ mostly when syndrome patients.

NOTE Confidence: 0.779020331428571

 $00:22:03.940 \longrightarrow 00:22:05.820$ Important to note that these

NOTE Confidence: 0.779020331428571

 $00:22:05.820 \longrightarrow 00:22:07.324$ patients have chemo resistant

NOTE Confidence: 0.779020331428571

 $00:22:07.324 \longrightarrow 00:22:10.050$ disease and so the group.

NOTE Confidence: 0.779020331428571

 $00:22:10.050 \longrightarrow 00:22:13.050$ Somewhere else when Kettering evaluated,

NOTE Confidence: 0.779020331428571

 $00:22:13.050 \longrightarrow 00:22:15.070$ giving these patients the checkpoint

NOTE Confidence: 0.779020331428571

00:22:15.070 --> 00:22:17.090 inhibitors to taking clinical stage

NOTE Confidence: 0.779020331428571

 $00{:}22{:}17.149 \dashrightarrow 00{:}22{:}19.032$ two or three rectal cancer giving an

NOTE Confidence: 0.779020331428571

 $00{:}22{:}19.032 \dashrightarrow 00{:}22{:}21.308$ anti PD one therapy and then following

NOTE Confidence: 0.779020331428571

 $00{:}22{:}21.308 \dashrightarrow 00{:}22{:}23.935$ them by endoscopy and an MRI to see

NOTE Confidence: 0.779020331428571

00:22:23.935 --> 00:22:26.015 if they responded and had responded

NOTE Confidence: 0.779020331428571

00:22:26.015 --> 00:22:28.637 or had residual disease and then

NOTE Confidence: 0.779020331428571

 $00{:}22{:}28.637 \dashrightarrow 00{:}22{:}31.409$ patients would go on to the standard.

NOTE Confidence: 0.779020331428571

00:22:31.410 --> 00:22:33.002 Emma radiotherapy and surgery,

NOTE Confidence: 0.779020331428571

 $00:22:33.002 \longrightarrow 00:22:35.966$ and we know that the immune checkpoint

00:22:35.966 --> 00:22:38.496 behaviors are very effective in

NOTE Confidence: 0.779020331428571

 $00{:}22{:}38.496 \dashrightarrow 00{:}22{:}40.994$ systemic disease and for various for

NOTE Confidence: 0.779020331428571

00:22:40.994 --> 00:22:42.849 various reasons that it's certainly

NOTE Confidence: 0.779020331428571

 $00:22:42.849 \longrightarrow 00:22:45.085$ been hypothesized for a while that

NOTE Confidence: 0.779020331428571

00:22:45.085 --> 00:22:47.336 would be even more effective than

NOTE Confidence: 0.779020331428571

00:22:47.336 --> 00:22:49.286 localized disease because they feel

NOTE Confidence: 0.779020331428571

00:22:49.286 --> 00:22:51.621 like immune escape and and they'll go,

NOTE Confidence: 0.779020331428571

 $00:22:51.621 \longrightarrow 00:22:53.420$ and they certainly went on to show

NOTE Confidence: 0.704020315454546

 $00:22:53.474 \longrightarrow 00:22:57.248$ that so that. I just put this slide up

NOTE Confidence: 0.704020315454546

 $00:22:57.248 \longrightarrow 00:22:59.442$ to to to mention that they they actually

NOTE Confidence: 0.704020315454546

00:22:59.442 --> 00:23:01.097 enroll pretty advanced patients too,

NOTE Confidence: 0.704020315454546

00:23:01.100 --> 00:23:02.829 and they still showed great outcomes here,

NOTE Confidence: 0.704020315454546

 $00:23:02.830 \longrightarrow 00:23:05.342$ so almost all the patients were no positive

NOTE Confidence: 0.704020315454546

 $00:23:05.342 \longrightarrow 00:23:07.347$ and certainly higher key stage tumors.

NOTE Confidence: 0.704020315454546

 $00:23:07.350 \longrightarrow 00:23:08.772$ What did they show when they

NOTE Confidence: 0.704020315454546

00:23:08.772 --> 00:23:09.483 did endoscopic following?

00:23:09.490 --> 00:23:11.230 Essentially all these patients,

NOTE Confidence: 0.704020315454546

 $00{:}23{:}11.230 \dashrightarrow 00{:}23{:}14.378$ essentially the either got a New York

NOTE Confidence: 0.704020315454546

00:23:14.378 --> 00:23:17.144 complete or complete response within roughly,

NOTE Confidence: 0.704020315454546

00:23:17.144 --> 00:23:19.886 you know, six months of starting

NOTE Confidence: 0.704020315454546

00:23:19.886 --> 00:23:21.430 immune checkpoint diggers.

NOTE Confidence: 0.704020315454546

 $00:23:21.430 \longrightarrow 00:23:24.142$ What about looking at these these

NOTE Confidence: 0.704020315454546

00:23:24.142 --> 00:23:26.460 this radiographically by MRI again?

NOTE Confidence: 0.704020315454546

 $00:23:26.460 \longrightarrow 00:23:28.075$ Almost all of these patients

NOTE Confidence: 0.704020315454546

00:23:28.075 --> 00:23:30.050 and this this patient you know,

NOTE Confidence: 0.704020315454546

 $00:23:30.050 \longrightarrow 00:23:31.590$ subsided from analysis that wasn't

NOTE Confidence: 0.704020315454546

 $00:23:31.590 \longrightarrow 00:23:33.712$ on far enough, but all of this.

NOTE Confidence: 0.704020315454546

 $00:23:33.712 \longrightarrow 00:23:35.500$ All the patients analyzed actually got

NOTE Confidence: 0.704020315454546

 $00{:}23{:}35.560 {\:{\mbox{--}}\!>} 00{:}23{:}37.460$ again a complete clinical response.

NOTE Confidence: 0.704020315454546

 $00:23:37.460 \longrightarrow 00:23:40.449$ So all 11 patients that have been

NOTE Confidence: 0.704020315454546

 $00:23:40.449 \longrightarrow 00:23:42.035$ followed for adequate duration

 $00:23:42.035 \longrightarrow 00:23:44.345$ to be together data analyzed had

NOTE Confidence: 0.704020315454546

 $00{:}23{:}44.345 \dashrightarrow 00{:}23{:}46.659$ a complete clinical response.

NOTE Confidence: 0.704020315454546

00:23:46.660 --> 00:23:48.998 Again, this is an 11 patient study,

NOTE Confidence: 0.704020315454546

 $00:23:49.000 \longrightarrow 00:23:50.925$ but I think there will be perhaps

NOTE Confidence: 0.704020315454546

 $00:23:50.925 \longrightarrow 00:23:52.920$ more data looking at this patient

NOTE Confidence: 0.704020315454546

 $00:23:52.920 \longrightarrow 00:23:54.408$ population from other investigators

NOTE Confidence: 0.704020315454546

 $00{:}23{:}54.408 \to 00{:}23{:}56.548$ and released from perhaps this team.

NOTE Confidence: 0.704020315454546 00:23:56.550 --> 00:23:56.931 Well,

NOTE Confidence: 0.704020315454546

00:23:56.931 --> 00:23:59.598 it may ultimately result in this becoming

NOTE Confidence: 0.704020315454546

00:23:59.598 --> 00:24:01.249 practice changing in the future,

NOTE Confidence: 0.704020315454546

 $00:24:01.250 \longrightarrow 00:24:03.210$ so I think stay tuned.

NOTE Confidence: 0.704020315454546

 $00:24:03.210 \longrightarrow 00:24:05.464$ I this is not approved yet for

NOTE Confidence: 0.704020315454546

 $00{:}24{:}05.464 \dashrightarrow 00{:}24{:}06.430$ localized colorectal cancer.

NOTE Confidence: 0.704020315454546

00:24:06.430 --> 00:24:08.164 These patients need to watch very

NOTE Confidence: 0.704020315454546

 $00:24:08.164 \longrightarrow 00:24:09.320$ closely for progression because

NOTE Confidence: 0.704020315454546

00:24:09.367 --> 00:24:10.389 they're chemoresistant.

 $00:24:10.390 \longrightarrow 00:24:12.518 \text{ I do think it will probably be}$

NOTE Confidence: 0.704020315454546

 $00:24:12.518 \longrightarrow 00:24:14.210$ incorporated into guidelines in the future.

NOTE Confidence: 0.704020315454546

00:24:14.210 --> 00:24:15.083 So in summary,

NOTE Confidence: 0.704020315454546

 $00:24:15.083 \longrightarrow 00:24:16.829$ total new agent therapy can be

NOTE Confidence: 0.704020315454546

 $00:24:16.829 \longrightarrow 00:24:18.529$ considered standard for most patients

NOTE Confidence: 0.704020315454546

00:24:18.530 --> 00:24:19.960 where systemic therapy is planned,

NOTE Confidence: 0.704020315454546

 $00:24:19.960 \longrightarrow 00:24:21.556$ which is most clinical teeth region

NOTE Confidence: 0.704020315454546

 $00:24:21.556 \longrightarrow 00:24:23.389$ 1 disease in the United States?

NOTE Confidence: 0.704020315454546

 $00:24:23.390 \longrightarrow 00:24:24.860$ Both Foxrock Fox can be used

NOTE Confidence: 0.704020315454546

 $00:24:24.860 \longrightarrow 00:24:26.329$ for most patients and full Fox,

NOTE Confidence: 0.704020315454546

 $00:24:26.330 \longrightarrow 00:24:27.562$ full, fair and ox.

NOTE Confidence: 0.704020315454546

00:24:27.562 --> 00:24:28.486 For select patients,

NOTE Confidence: 0.704020315454546

 $00{:}24{:}28.490 \dashrightarrow 00{:}24{:}29.710$ immune checkpoint inhibitors will

NOTE Confidence: 0.704020315454546

 $00:24:29.710 \longrightarrow 00:24:31.540$ become a treatment option for localized

NOTE Confidence: 0.704020315454546

 $00:24:31.582 \longrightarrow 00:24:32.863$ disease in the future but are not

 $00:24:32.863 \longrightarrow 00:24:34.340$ yet in the treatment guidelines.

NOTE Confidence: 0.03717491

 $00:24:44.880 \longrightarrow 00:24:50.000$ Umm? I think if anyone has any

NOTE Confidence: 0.03717491

 $00:24:50.000 \longrightarrow 00:24:54.150$ questions we can take one question now.

NOTE Confidence: 0.03717491

00:24:54.150 --> 00:24:56.880 Although I am not entirely sure.

NOTE Confidence: 0.03717491

 $00:24:56.880 \longrightarrow 00:25:01.184$ Since I cannot see anybody but the panelists.

NOTE Confidence: 0.03717491

 $00:25:01.190 \longrightarrow 00:25:02.835$ Whether a question can get to me,

NOTE Confidence: 0.686984582

 $00:25:03.450 \longrightarrow 00:25:05.100$ I can't see anybody either.

NOTE Confidence: 0.58848537

00:25:14.910 --> 00:25:20.194 OK, on the chat, so certainly I'll answer

NOTE Confidence: 0.58848537

 $00{:}25{:}20.194 \dashrightarrow 00{:}25{:}21.888$ this one question and then I'll I'll.

NOTE Confidence: 0.58848537

 $00:25:21.890 \longrightarrow 00:25:22.940$ I'll watch the chat a little

NOTE Confidence: 0.58848537

 $00:25:22.940 \longrightarrow 00:25:23.640$ bit closer after this.

NOTE Confidence: 0.58848537

 $00:25:23.640 \longrightarrow 00:25:25.010$ What is your current approach?

NOTE Confidence: 0.58848537

00:25:25.010 --> 00:25:27.884 My current approach is typically full

NOTE Confidence: 0.58848537

 $00:25:27.884 \longrightarrow 00:25:31.380$ fox for for four months cycles and

NOTE Confidence: 0.58848537

 $00:25:31.380 \longrightarrow 00:25:33.360$ long course radiotherapy for the most

NOTE Confidence: 0.58848537

 $00:25:33.360 \longrightarrow 00:25:35.505$ patients with John will talk about

 $00:25:35.505 \longrightarrow 00:25:37.330$ the radiation selection and planning,

NOTE Confidence: 0.58848537

 $00{:}25{:}37.330 \dashrightarrow 00{:}25{:}39.195$ but usually starting with systemic

NOTE Confidence: 0.58848537

 $00:25:39.195 \longrightarrow 00:25:40.687$ therapy for logistical purposes.

NOTE Confidence: 0.58848537

 $00:25:40.690 \longrightarrow 00:25:45.950$ The fox, or for a cycles well Fox series,

NOTE Confidence: 0.58848537

 $00:25:45.950 \longrightarrow 00:25:47.747$ certainly unused in those select

NOTE Confidence: 0.58848537

 $00{:}25{:}47.747 \dashrightarrow 00{:}25{:}49.541$ younger 5th patients where I think

NOTE Confidence: 0.58848537

00:25:49.541 --> 00:25:51.480 they have more aggressive disease,

NOTE Confidence: 0.58848537

 $00{:}25{:}51.480 \dashrightarrow 00{:}25{:}53.566$ but that is not my normal practice.

NOTE Confidence: 0.844957160833333

00:25:54.730 --> 00:25:56.476 Right, I think our practice has

NOTE Confidence: 0.844957160833333

00:25:56.476 --> 00:25:58.200 been long course and you know,

NOTE Confidence: 0.844957160833333

 $00:25:58.200 \longrightarrow 00:26:00.502$ we'll talk about. I think Mike.

NOTE Confidence: 0.844957160833333

 $00{:}26{:}00.502 \dashrightarrow 00{:}26{:}02.826$ You talked a lot about TNT will

NOTE Confidence: 0.844957160833333

 $00{:}26{:}02.826 \dashrightarrow 00{:}26{:}05.184$ probably skip over my stellar trial and

NOTE Confidence: 0.844957160833333

00:26:05.184 --> 00:26:07.729 rapidough that I have in my slide set,

NOTE Confidence: 0.844957160833333

 $00:26:07.730 \longrightarrow 00:26:09.170$ so there were not redundant.

 $00:26:09.170 \longrightarrow 00:26:10.520$ Try to focus more on short

NOTE Confidence: 0.844957160833333

 $00:26:10.520 \longrightarrow 00:26:12.310$ course versus long course.

NOTE Confidence: 0.844957160833333

 $00:26:12.310 \longrightarrow 00:26:14.170$ We probably could incorporate short

NOTE Confidence: 0.844957160833333

00:26:14.170 --> 00:26:16.030 course more into our practice,

NOTE Confidence: 0.844957160833333

00:26:16.030 --> 00:26:17.110 but you know,

NOTE Confidence: 0.844957160833333

00:26:17.110 --> 00:26:19.270 I think everyone's just more comfortable

NOTE Confidence: 0.844957160833333

00:26:19.270 --> 00:26:21.670 with long course and the patients do well,

NOTE Confidence: 0.844957160833333

 $00:26:21.670 \longrightarrow 00:26:23.838$ so I'm going to dig in a little

NOTE Confidence: 0.844957160833333

 $00{:}26{:}23.838 \dashrightarrow 00{:}26{:}26.208$ into the nitty gritty of radiation.

NOTE Confidence: 0.844957160833333

 $00:26:26.210 \longrightarrow 00:26:28.218$ So you guys have a sense of what

NOTE Confidence: 0.844957160833333

 $00{:}26{:}28.218 \dashrightarrow 00{:}26{:}30.220$ we do for rectal cancer when

NOTE Confidence: 0.844957160833333

 $00:26:30.220 \longrightarrow 00:26:32.020$ we live down in the basement,

NOTE Confidence: 0.844957160833333

 $00:26:32.020 \longrightarrow 00:26:33.679$ so have a little bit of the

NOTE Confidence: 0.844957160833333

00:26:33.679 --> 00:26:35.396 technique and then we'll talk about

NOTE Confidence: 0.844957160833333

 $00:26:35.396 \longrightarrow 00:26:36.976$ short course versus long course.

NOTE Confidence: 0.844957160833333

00:26:36.980 --> 00:26:38.196 I'll touch on TNT,

 $00:26:38.196 \longrightarrow 00:26:40.461$ but I'm going to breeze over that

NOTE Confidence: 0.844957160833333

 $00{:}26{:}40.461 \dashrightarrow 00{:}26{:}42.336$ fast because Doctor Shakini covered

NOTE Confidence: 0.844957160833333

 $00:26:42.336 \longrightarrow 00:26:45.116$ it quite well and then we'll leave

NOTE Confidence: 0.844957160833333

00:26:45.116 --> 00:26:47.136 watchful waiting to Doctor Reddy.

NOTE Confidence: 0.844957160833333

00:26:47.140 --> 00:26:48.580 So Kim, Johann, I treat you.

NOTE Confidence: 0.844957160833333

 $00:26:48.580 \longrightarrow 00:26:50.412$ I cancers here in New Haven and I

NOTE Confidence: 0.844957160833333

 $00:26:50.412 \longrightarrow 00:26:52.401$ think one of the things we need to

NOTE Confidence: 0.844957160833333

00:26:52.401 --> 00:26:54.058 emphasize is that the treatment of

NOTE Confidence: 0.844957160833333

 $00:26:54.058 \longrightarrow 00:26:56.214$ rectal cancer is a team based approach.

NOTE Confidence: 0.844957160833333

 $00{:}26{:}56.220 \dashrightarrow 00{:}26{:}58.089$ So I'm lucky to work with these

NOTE Confidence: 0.844957160833333

 $00{:}26{:}58.089 \dashrightarrow 00{:}27{:}00.078$ folks and a handful of others,

NOTE Confidence: 0.844957160833333

 $00:27:00.080 \longrightarrow 00:27:02.131$ and we really need to work together

NOTE Confidence: 0.844957160833333

 $00{:}27{:}02.131 \dashrightarrow 00{:}27{:}04.206$ to get these patients treated and

NOTE Confidence: 0.844957160833333

 $00:27:04.206 \longrightarrow 00:27:06.474$ it's a collaborative approach and I

NOTE Confidence: 0.844957160833333

 $00:27:06.474 \longrightarrow 00:27:08.750$ think that's important to recognize.

 $00:27:08.750 \longrightarrow 00:27:10.130$ So with that I'll get started.

NOTE Confidence: 0.844957160833333

 $00{:}27{:}10.130 \dashrightarrow 00{:}27{:}13.190$ So plan for today is I was going to

NOTE Confidence: 0.844957160833333

 $00:27:13.190 \longrightarrow 00:27:15.510$ talk about what is the benefit of

NOTE Confidence: 0.844957160833333

 $00:27:15.510 \longrightarrow 00:27:16.970$ radiation therapy for rectal cancer?

NOTE Confidence: 0.844957160833333

 $00:27:16.970 \longrightarrow 00:27:19.070$ So local control benefit prior to

NOTE Confidence: 0.844957160833333

 $00{:}27{:}19.070 \dashrightarrow 00{:}27{:}20.880$ surgery that's quick doctor Chikani

NOTE Confidence: 0.844957160833333

 $00:27:20.880 \longrightarrow 00:27:22.950$ already touched on the sour trial.

NOTE Confidence: 0.844957160833333

 $00:27:22.950 \longrightarrow 00:27:24.454$ We'll talk about different

NOTE Confidence: 0.844957160833333

00:27:24.454 --> 00:27:25.206 radiation techniques,

NOTE Confidence: 0.844957160833333

 $00:27:25.210 \longrightarrow 00:27:26.484$ so when you see in my note,

NOTE Confidence: 0.844957160833333

 $00:27:26.490 \longrightarrow 00:27:29.010$ should we do 3D conformal should be the IRT.

NOTE Confidence: 0.844957160833333

 $00:27:29.010 \longrightarrow 00:27:31.162$ What does SBRT so that everyone has a

NOTE Confidence: 0.844957160833333

 $00{:}27{:}31.162 \dashrightarrow 00{:}27{:}33.613$ sense of what those techniques are and

NOTE Confidence: 0.844957160833333

00:27:33.613 --> 00:27:36.110 how they're helpful for different scenarios?

NOTE Confidence: 0.844957160833333

00:27:36.110 --> 00:27:38.728 Then I'll touch on the standard long.

NOTE Confidence: 0.844957160833333 00:27:38.730 --> 00:27:39.640 Of course,

 $00:27:39.640 \longrightarrow 00:27:41.460$ chemoradiation versus short course

NOTE Confidence: 0.844957160833333

 $00:27:41.460 \longrightarrow 00:27:44.604$ radiation and then do a quick review of

NOTE Confidence: 0.844957160833333

00:27:44.604 --> 00:27:47.510 TNT because I think we we got a great

NOTE Confidence: 0.844957160833333

00:27:47.510 --> 00:27:49.760 review of that from Doctor Dakini,

NOTE Confidence: 0.844957160833333

 $00:27:49.760 \longrightarrow 00:27:50.980$ so I'm just showing some

NOTE Confidence: 0.844957160833333

 $00:27:50.980 \longrightarrow 00:27:51.956$ rectal plans down here.

NOTE Confidence: 0.844957160833333

 $00:27:51.960 \longrightarrow 00:27:54.407$ This is a 3D conformal plan and

NOTE Confidence: 0.844957160833333

 $00:27:54.407 \longrightarrow 00:27:56.303$ the one to the right is a IRT

NOTE Confidence: 0.844957160833333

 $00:27:56.303 \longrightarrow 00:27:58.416$ plan and we'll talk about the

NOTE Confidence: 0.844957160833333

 $00:27:58.416 \longrightarrow 00:28:00.226$ benefits of those two approaches.

NOTE Confidence: 0.872966478125

00:28:02.400 --> 00:28:05.829 OK, so why do we use preop chemo radiation

NOTE Confidence: 0.872966478125

 $00:28:05.829 \longrightarrow 00:28:09.315$ prior to surgery for rectal cancer patients?

NOTE Confidence: 0.872966478125

 $00{:}28{:}09.320 \dashrightarrow 00{:}28{:}11.497$ Michael talked about this already a bit,

NOTE Confidence: 0.872966478125

 $00:28:11.500 \longrightarrow 00:28:12.940$ but the benefit is local control.

NOTE Confidence: 0.872966478125

 $00:28:12.940 \longrightarrow 00:28:15.838$ We don't see the overall survival benefit,

 $00:28:15.840 \longrightarrow 00:28:17.840$ so this is the classic

NOTE Confidence: 0.872966478125

00:28:17.840 --> 00:28:19.440 German rectal trial rate,

NOTE Confidence: 0.872966478125

 $00:28:19.440 \longrightarrow 00:28:22.328$ which I think we all know about that

NOTE Confidence: 0.872966478125

 $00:28:22.328 \longrightarrow 00:28:25.153$ compares pre-op versus post-op radiation in

NOTE Confidence: 0.872966478125

 $00:28:25.153 \longrightarrow 00:28:28.195$ patients with locally advanced rectal cancer.

NOTE Confidence: 0.872966478125

00:28:28.200 --> 00:28:31.208 And what we see is that patients who

NOTE Confidence: 0.872966478125

 $00:28:31.208 \longrightarrow 00:28:33.911$ have locally advanced disease so T3T4

NOTE Confidence: 0.872966478125

00:28:33.911 --> 00:28:36.788 or node positive, who had preop radiation.

NOTE Confidence: 0.872966478125

00:28:36.790 --> 00:28:38.396 And this is long course with

NOTE Confidence: 0.872966478125

 $00:28:38.396 \longrightarrow 00:28:39.420$ concurrent 5 of you.

NOTE Confidence: 0.872966478125

 $00:28:39.420 \longrightarrow 00:28:41.598$ Now we more commonly used alotta

NOTE Confidence: 0.872966478125

 $00:28:41.598 \longrightarrow 00:28:43.820$ compared to post op radiation.

NOTE Confidence: 0.872966478125

 $00{:}28{:}43.820 \dashrightarrow 00{:}28{:}45.415$ The local control was improved

NOTE Confidence: 0.872966478125

 $00:28:45.415 \longrightarrow 00:28:47.010$ in the pre OP setting.

NOTE Confidence: 0.872966478125

00:28:47.010 --> 00:28:49.103 And really it's you know if you

NOTE Confidence: 0.872966478125

 $00{:}28{:}49.103 \dashrightarrow 00{:}28{:}50.996$ contour these cases is that I can

00:28:50.996 --> 00:28:52.753 see the tumor in the preop setting

NOTE Confidence: 0.872966478125

 $00{:}28{:}52.753 \dashrightarrow 00{:}28{:}54.762$ in the post op setting I'm merging

NOTE Confidence: 0.872966478125

00:28:54.762 --> 00:28:56.966 in the pre OP imaging and kind of

NOTE Confidence: 0.872966478125

 $00:28:56.966 \longrightarrow 00:28:58.690$ treating where the tumor used to be.

NOTE Confidence: 0.872966478125

 $00:28:58.690 \longrightarrow 00:29:00.888$ So I think that helps people understand

NOTE Confidence: 0.872966478125

 $00:29:00.888 \longrightarrow 00:29:02.643$ why the local control benefit

NOTE Confidence: 0.872966478125

00:29:02.643 --> 00:29:04.905 really exists in the preop setting.

NOTE Confidence: 0.872966478125

 $00{:}29{:}04.910 \dashrightarrow 00{:}29{:}06.884$ The other benefit of preop radiation is

NOTE Confidence: 0.872966478125

 $00:29:06.884 \longrightarrow 00:29:09.238$ for those patients with distal tumors, right?

NOTE Confidence: 0.872966478125

 $00{:}29{:}09.238 \dashrightarrow 00{:}29{:}14.120$ We see an increased improvement in.

NOTE Confidence: 0.872966478125

00:29:14.120 --> 00:29:17.816 Sphincter sparing surgeries or lack of need.

NOTE Confidence: 0.872966478125

 $00:29:17.820 \longrightarrow 00:29:20.524$ Sorry my leg is going off for an

NOTE Confidence: 0.872966478125

 $00{:}29{:}20.524 \dashrightarrow 00{:}29{:}23.360$ APR and permanent colostomy so you

NOTE Confidence: 0.872966478125

 $00{:}29{:}23.360 \dashrightarrow 00{:}29{:}24.770$ know there are some patients where

NOTE Confidence: 0.872966478125

 $00:29:24.770 \longrightarrow 00:29:26.456$ the tumor is so distal and involving

00:29:26.456 --> 00:29:28.155 this finger that we know that it's

NOTE Confidence: 0.872966478125

00:29:28.155 --> 00:29:29.340 not going to benefit them.

NOTE Confidence: 0.872966478125

00:29:29.340 --> 00:29:30.117 But you know,

NOTE Confidence: 0.872966478125

00:29:30.117 --> 00:29:31.930 for patients who kind of have that

NOTE Confidence: 0.872966478125

 $00:29:31.991 \longrightarrow 00:29:33.993$ distal tumor where they're on the brink

NOTE Confidence: 0.872966478125

 $00{:}29{:}33.993 \dashrightarrow 00{:}29{:}35.940$ of needing an APR versus and LAR,

NOTE Confidence: 0.872966478125

 $00:29:35.940 \longrightarrow 00:29:38.369$ I think that that is another benefit

NOTE Confidence: 0.872966478125

 $00:29:38.369 \longrightarrow 00:29:40.100$ of pre OP therapy.

NOTE Confidence: 0.872966478125

 $00{:}29{:}40.100 \dashrightarrow 00{:}29{:}43.058$ Toxicities are less in the Preop

NOTE Confidence: 0.872966478125

 $00:29:43.058 \longrightarrow 00:29:44.537$ sitting as well.

NOTE Confidence: 0.872966478125

 $00:29:44.540 \longrightarrow 00:29:45.668$ And but though,

NOTE Confidence: 0.872966478125

 $00:29:45.668 \longrightarrow 00:29:46.796$ as I mentioned,

NOTE Confidence: 0.872966478125

 $00{:}29{:}46.800 \dashrightarrow 00{:}29{:}49.930$ no difference in overall survival.

NOTE Confidence: 0.872966478125

 $00:29:49.930 \longrightarrow 00:29:52.294$ So that's that's why we employ

NOTE Confidence: 0.872966478125

 $00:29:52.294 \longrightarrow 00:29:53.870$ radiation prior to surgery.

NOTE Confidence: 0.872966478125

 $00{:}29{:}53.870 \dashrightarrow 00{:}29{:}55.278$ So now I'm going to dig into a

00:29:55.278 --> 00:29:56.370 little bit of nitty gritty,

NOTE Confidence: 0.872966478125

 $00{:}29{:}56.370 \dashrightarrow 00{:}29{:}58.410$ dorky radiation therapy techniques.

NOTE Confidence: 0.872966478125

 $00:29:58.410 \longrightarrow 00:30:02.529$ But I think it hopefully is of interest.

NOTE Confidence: 0.872966478125 $00:30:02.530 \longrightarrow 00:30:03.026$ So what?

NOTE Confidence: 0.872966478125

00:30:03.026 --> 00:30:04.266 What are these different things

NOTE Confidence: 0.872966478125

 $00:30:04.266 \longrightarrow 00:30:05.310$ that we're talking about,

NOTE Confidence: 0.872966478125

 $00:30:05.310 \longrightarrow 00:30:07.470$ and what are the techniques and what are

NOTE Confidence: 0.872966478125

 $00:30:07.470 \longrightarrow 00:30:09.466$ the benefits of using one versus another

NOTE Confidence: 0.872966478125

00:30:09.466 --> 00:30:12.006 right in the setting of rectal cancer?

NOTE Confidence: 0.872966478125

 $00{:}30{:}12.010 \dashrightarrow 00{:}30{:}13.894$ So how we shape our radiation

NOTE Confidence: 0.872966478125

 $00:30:13.894 \longrightarrow 00:30:16.128$ fields are with what we call

NOTE Confidence: 0.872966478125

00:30:16.128 --> 00:30:17.487 these multileaf collimators,

NOTE Confidence: 0.872966478125

 $00{:}30{:}17.490 --> 00{:}30{:}19.929$ so these are.

NOTE Confidence: 0.872966478125

 $00:30:19.930 \longrightarrow 00:30:23.440$ Tungsten leaves that are two millimeters

NOTE Confidence: 0.872966478125

 $00:30:23.440 \longrightarrow 00:30:25.880$ or less and they move in and out of the

 $00:30:25.947 \longrightarrow 00:30:28.577$ beam so we can use them to shape the beam.

NOTE Confidence: 0.872966478125

 $00{:}30{:}28.580 \dashrightarrow 00{:}30{:}31.004$ But we also can use them to modulate

NOTE Confidence: 0.872966478125

 $00:30:31.004 \longrightarrow 00:30:32.579$ the intensity of of the beam.

NOTE Confidence: 0.872966478125

 $00:30:32.580 \longrightarrow 00:30:34.668$ So if you turn the beat Mom and they

NOTE Confidence: 0.872966478125

 $00:30:34.668 \longrightarrow 00:30:36.611$ come in and out during treatment

NOTE Confidence: 0.872966478125

 $00:30:36.611 \longrightarrow 00:30:38.256$ right then at different times,

NOTE Confidence: 0.872966478125

 $00:30:38.260 \longrightarrow 00:30:40.940$ each portion of the tumor target can be

NOTE Confidence: 0.872966478125

 $00:30:40.940 \longrightarrow 00:30:43.018$ getting different intensity of radiation,

NOTE Confidence: 0.872966478125

 $00:30:43.020 \longrightarrow 00:30:44.904$ which allows us to conform the

NOTE Confidence: 0.872966478125

 $00:30:44.904 \longrightarrow 00:30:46.763$ radiation dose to our tumor target

NOTE Confidence: 0.872966478125

 $00:30:46.763 \longrightarrow 00:30:48.660$ and the goal here is dose of

NOTE Confidence: 0.872966478125

 $00:30:48.660 \longrightarrow 00:30:50.627$ the tumor reduced side effects.

NOTE Confidence: 0.872966478125

 $00{:}30{:}50.630 \dashrightarrow 00{:}30{:}52.910$ So when we're talking about 3D

NOTE Confidence: 0.872966478125

 $00{:}30{:}52.910 \to 00{:}30{:}54.786$ conformal radiation, this is basically,

NOTE Confidence: 0.872966478125

00:30:54.786 --> 00:30:55.530 you know,

NOTE Confidence: 0.872966478125

 $00:30:55.530 \longrightarrow 00:30:57.850$ in the old days we would use an X ray

 $00:30:57.919 \longrightarrow 00:31:00.367$ and use Bony anatomy to set our fields.

NOTE Confidence: 0.822109623333333

 $00:31:00.370 \longrightarrow 00:31:02.470$ 3D conformal radiation just means

NOTE Confidence: 0.822109623333333

 $00:31:02.470 \longrightarrow 00:31:05.252$ that we're using a CAT scan and

NOTE Confidence: 0.822109623333333

 $00:31:05.252 \longrightarrow 00:31:07.652$ I sit for a couple of hours and

NOTE Confidence: 0.822109623333333

00:31:07.731 --> 00:31:10.056 contour my targets and contour.

NOTE Confidence: 0.822109623333333

 $00:31:10.060 \longrightarrow 00:31:11.830$ The normal tissues around those

NOTE Confidence: 0.822109623333333

00:31:11.830 --> 00:31:13.600 tumor targets every 2 millimeters

NOTE Confidence: 0.822109623333333

 $00:31:13.662 \longrightarrow 00:31:15.300$ through the slice of the skin,

NOTE Confidence: 0.822109623333333

 $00:31:15.300 \longrightarrow 00:31:17.925$ so that we can use those contours

NOTE Confidence: 0.822109623333333

 $00:31:17.925 \longrightarrow 00:31:20.720$ to shape the beams to fit the

NOTE Confidence: 0.822109623333333

 $00:31:20.720 \longrightarrow 00:31:22.818$ tumor target and avoid the normal

NOTE Confidence: 0.822109623333333

 $00{:}31{:}22.818 \dashrightarrow 00{:}31{:}24.453$ structures as much as possible.

NOTE Confidence: 0.822109623333333

00:31:24.460 --> 00:31:25.884 But you can see that when we do

NOTE Confidence: 0.822109623333333

 $00:31:25.884 \longrightarrow 00:31:27.300$ that for a rectal plan, right,

NOTE Confidence: 0.822109623333333

00:31:27.300 --> 00:31:29.580 we're shaped around the muzzle ******

 $00:31:29.580 \longrightarrow 00:31:32.172$ but we're still treating quite a bit of

NOTE Confidence: 0.822109623333333

 $00{:}31{:}32.172 \dashrightarrow 00{:}31{:}34.357$ normal tissue around the rectal tumor,

NOTE Confidence: 0.822109623333333

 $00:31:34.360 \longrightarrow 00:31:37.156$ so that would be the downside

NOTE Confidence: 0.822109623333333

 $00:31:37.160 \longrightarrow 00:31:40.570$ of a 3D conformal plan.

NOTE Confidence: 0.822109623333333

 $00:31:40.570 \longrightarrow 00:31:43.276$ Intensity modulated radiation or IRT that

NOTE Confidence: 0.822109623333333

00:31:43.276 --> 00:31:46.608 you'll hear us throwing around in the charts?

NOTE Confidence: 0.822109623333333

00:31:46.610 --> 00:31:48.044 It's something that's a little harder

NOTE Confidence: 0.822109623333333

 $00:31:48.044 \longrightarrow 00:31:49.649$ to get approved by the insurance

NOTE Confidence: 0.822109623333333

 $00{:}31{:}49.649 {\:{\circ}{\circ}{\circ}}> 00{:}31{:}50.845$ companies for rectal cancer,

NOTE Confidence: 0.822109623333333

 $00:31:50.850 \longrightarrow 00:31:53.040$ but I'm seeing it approved more

NOTE Confidence: 0.822109623333333

 $00{:}31{:}53.040 --> 00{:}31{:}53.770 \ commonly \ nowadays.$

NOTE Confidence: 0.822109623333333

 $00:31:53.770 \longrightarrow 00:31:56.066$ So this I would think about as

NOTE Confidence: 0.822109623333333

 $00:31:56.066 \longrightarrow 00:31:58.279$ your radiation beam is divided into

NOTE Confidence: 0.822109623333333

 $00:31:58.279 \longrightarrow 00:32:00.209$ like these tiny little beamlet.

NOTE Confidence: 0.822109623333333

00:32:00.210 --> 00:32:02.030 So if you're thinking about a flashlight,

NOTE Confidence: 0.822109623333333

 $00:32:02.030 \longrightarrow 00:32:04.125$ each portion of the flashlight

 $00:32:04.125 \longrightarrow 00:32:06.220$ has different intensity and then

NOTE Confidence: 0.822109623333333

00:32:06.288 --> 00:32:08.613 basically we're using a computer

NOTE Confidence: 0.822109623333333

 $00:32:08.613 \longrightarrow 00:32:10.473$ to optimize these intensities.

NOTE Confidence: 0.822109623333333

 $00:32:10.480 \longrightarrow 00:32:12.300$ And the shape of the beam so

NOTE Confidence: 0.822109623333333

 $00:32:12.300 \longrightarrow 00:32:14.444$ that we can create concave dose

NOTE Confidence: 0.822109623333333

 $00:32:14.444 \longrightarrow 00:32:16.164$ distributions that really conform

NOTE Confidence: 0.822109623333333

 $00:32:16.164 \longrightarrow 00:32:18.944$ to the shape of our tumor target

NOTE Confidence: 0.822109623333333

 $00:32:18.944 \longrightarrow 00:32:20.719$ and try to decrease toxicity.

NOTE Confidence: 0.822109623333333

 $00{:}32{:}20.720 \dashrightarrow 00{:}32{:}23.436$ I have more luck getting this approved

NOTE Confidence: 0.822109623333333

 $00:32:23.436 \longrightarrow 00:32:25.031$ for postoperative cases because

NOTE Confidence: 0.822109623333333

 $00:32:25.031 \longrightarrow 00:32:27.245$ there's more normal bowel that falls

NOTE Confidence: 0.822109623333333

 $00:32:27.245 \longrightarrow 00:32:29.862$ into the field after surgery and I

NOTE Confidence: 0.822109623333333

 $00{:}32{:}29.862 \dashrightarrow 00{:}32{:}32.074$ think it is more helpful for patients

NOTE Confidence: 0.822109623333333

 $00:32:32.074 \longrightarrow 00:32:34.564$ with T4 disease where we're treating

NOTE Confidence: 0.822109623333333

 $00:32:34.564 \longrightarrow 00:32:36.669$ external iliac nodes because the

 $00:32:36.742 \longrightarrow 00:32:39.070$ volume comes more anterior and there's

NOTE Confidence: 0.822109623333333

00:32:39.070 --> 00:32:41.550 more bowel that's in your field.

NOTE Confidence: 0.822109623333333

00:32:41.550 --> 00:32:43.390 But for T3 case,

NOTE Confidence: 0.822109623333333

 $00:32:43.390 \longrightarrow 00:32:45.700$ probably a 3D conformal plan is adequate.

NOTE Confidence: 0.868231560588235

 $00:32:48.050 \longrightarrow 00:32:49.802$ So I think this is just a good

NOTE Confidence: 0.868231560588235

 $00:32:49.802 \longrightarrow 00:32:51.255$ pictorial of what an intensity

NOTE Confidence: 0.868231560588235

 $00:32:51.255 \longrightarrow 00:32:52.535$ modulated plan looks like.

NOTE Confidence: 0.868231560588235

00:32:52.540 --> 00:32:53.608 This is a head neck case,

NOTE Confidence: 0.868231560588235

 $00:32:53.610 \longrightarrow 00:32:55.762$ but it can give you the sense that

NOTE Confidence: 0.868231560588235

 $00:32:55.762 \longrightarrow 00:32:57.914$ you have multiple beams targeted at

NOTE Confidence: 0.868231560588235

 $00{:}32{:}57.914 \dashrightarrow 00{:}33{:}01.030$ your tumor with intensity of the beam.

NOTE Confidence: 0.868231560588235

 $00:33:01.030 \longrightarrow 00:33:05.950$ You know different across the entire area.

NOTE Confidence: 0.845937430526316

 $00:33:08.000 \longrightarrow 00:33:10.499$ And the other thing that IRT allows

NOTE Confidence: 0.845937430526316

 $00:33:10.499 \longrightarrow 00:33:13.252$ us to do is differentially dose

NOTE Confidence: 0.845937430526316

 $00:33:13.252 \longrightarrow 00:33:16.444$ different areas of the tumor target.

NOTE Confidence: 0.845937430526316

 $00:33:16.450 \longrightarrow 00:33:20.350$ So, for example, you can give.

 $00:33:20.350 \longrightarrow 00:33:23.195$ Gross disease, a high dose

NOTE Confidence: 0.845937430526316

 $00:33:23.195 \longrightarrow 00:33:24.902$ and simultaneously elective

NOTE Confidence: 0.845937430526316

 $00:33:24.902 \longrightarrow 00:33:27.637$ nodes can get a lower dose.

NOTE Confidence: 0.845937430526316

 $00:33:27.640 \longrightarrow 00:33:29.472$ You know which is.

NOTE Confidence: 0.845937430526316

 $00:33:29.472 \longrightarrow 00:33:32.220$ It's a convenient way to plan.

NOTE Confidence: 0.845937430526316

 $00:33:32.220 \longrightarrow 00:33:34.052$ So this is an example of an IRT

NOTE Confidence: 0.845937430526316

 $00:33:34.052 \longrightarrow 00:33:35.768$ plan for a postop rectal case,

NOTE Confidence: 0.845937430526316

 $00{:}33{:}35.770 \longrightarrow 00{:}33{:}37.751$ and you can see right compared to

NOTE Confidence: 0.845937430526316

00:33:37.751 --> 00:33:39.564 that 3D conformal plan that I showed

NOTE Confidence: 0.845937430526316

 $00:33:39.564 \longrightarrow 00:33:41.431$ you that was like a box coming

NOTE Confidence: 0.845937430526316

 $00:33:41.431 \longrightarrow 00:33:42.795$ across this whole area, right?

NOTE Confidence: 0.845937430526316

00:33:42.795 --> 00:33:44.565 We're really able to carve the

NOTE Confidence: 0.845937430526316

 $00{:}33{:}44.565 \dashrightarrow 00{:}33{:}46.546$ dose out of this anterior small

NOTE Confidence: 0.845937430526316

 $00{:}33{:}46.546 \dashrightarrow 00{:}33{:}48.598$ bell and try to spare toxicity,

NOTE Confidence: 0.845937430526316

 $00:33:48.600 \longrightarrow 00:33:50.616$ so I think this is where we're moving.

 $00:33:50.620 \longrightarrow 00:33:53.226$ If we can get insurance to

NOTE Confidence: 0.845937430526316

00:33:53.226 --> 00:33:54.370 play along with us.

NOTE Confidence: 0.765508517692308

 $00:33:56.760 \longrightarrow 00:33:59.442$ So then last as radiation technique

NOTE Confidence: 0.765508517692308

 $00:33:59.442 \longrightarrow 00:34:02.779$ that I wanted to mention was SBRT.

NOTE Confidence: 0.765508517692308

 $00:34:02.780 \longrightarrow 00:34:05.558$ So this is stereotactic radiation therapy

NOTE Confidence: 0.765508517692308

 $00:34:05.558 \longrightarrow 00:34:08.996$ which is really delivery of a blade of doses

NOTE Confidence: 0.765508517692308

 $00:34:08.996 \longrightarrow 00:34:11.700$ of radiation in five or fewer fractions.

NOTE Confidence: 0.765508517692308

 $00:34:11.700 \longrightarrow 00:34:13.665$ So we use this in the brain or

NOTE Confidence: 0.765508517692308

 $00:34:13.665 \longrightarrow 00:34:15.520$ outside of the brain in the body.

NOTE Confidence: 0.765508517692308

 $00:34:15.520 \longrightarrow 00:34:17.576$ And where are we using this in the

NOTE Confidence: 0.765508517692308

00:34:17.576 --> 00:34:19.293 context of rectal cancer, right?

NOTE Confidence: 0.765508517692308

 $00:34:19.293 \longrightarrow 00:34:20.665$ Because that's what we're

NOTE Confidence: 0.765508517692308

00:34:20.665 --> 00:34:21.694 talking about to night.

NOTE Confidence: 0.765508517692308

 $00{:}34{:}21.700 \dashrightarrow 00{:}34{:}23.972$ So as I said, multiple conformal beams are

NOTE Confidence: 0.765508517692308

 $00:34:23.972 \longrightarrow 00:34:26.426$ arcs to deliver high doses of radiation.

NOTE Confidence: 0.765508517692308

 $00:34:26.430 \longrightarrow 00:34:28.789$ With rapid falloff beyond the target volume.

 $00:34:28.790 \longrightarrow 00:34:31.607$ So if we use technology to be very tight

NOTE Confidence: 0.765508517692308

 $00{:}34{:}31.607 \dashrightarrow 00{:}34{:}34.255$ with our dose distribution then we can

NOTE Confidence: 0.765508517692308

 $00:34:34.255 \longrightarrow 00:34:37.508$ get away with giving high doses of radiation.

NOTE Confidence: 0.765508517692308

 $00:34:37.510 \longrightarrow 00:34:40.752$ And protect the normal tissues so you

NOTE Confidence: 0.765508517692308

 $00:34:40.752 \longrightarrow 00:34:42.708$ know the technology outside of the

NOTE Confidence: 0.765508517692308

00:34:42.708 --> 00:34:44.820 brain really started in early stage.

NOTE Confidence: 0.765508517692308

00:34:44.820 --> 00:34:46.876 Lung cancers were using it in liver cancers,

NOTE Confidence: 0.765508517692308

 $00:34:46.880 \longrightarrow 00:34:47.572$ pancreas cancers,

NOTE Confidence: 0.765508517692308

 $00:34:47.572 \longrightarrow 00:34:48.264$ prostate cancers,

NOTE Confidence: 0.765508517692308

 $00:34:48.264 \longrightarrow 00:34:50.744$ but where we use it for rectal

NOTE Confidence: 0.765508517692308

 $00:34:50.744 \longrightarrow 00:34:52.784$ cancer is really in the setting

NOTE Confidence: 0.765508517692308

 $00:34:52.784 \longrightarrow 00:34:54.340$ of oligo metastatic disease,

NOTE Confidence: 0.765508517692308

 $00{:}34{:}54.340 \dashrightarrow 00{:}34{:}56.156$ so I wanted to touch on that briefly.

NOTE Confidence: 0.765508517692308

00:34:56.160 --> 00:34:59.790 So in order to deliver these high

NOTE Confidence: 0.765508517692308

 $00:34:59.790 \longrightarrow 00:35:01.473$ doses of radiation where quite

00:35:01.473 --> 00:35:03.399 precise with our patient set up.

NOTE Confidence: 0.765508517692308

 $00:35:03.400 \longrightarrow 00:35:04.570$ So this is what your patient

NOTE Confidence: 0.765508517692308

 $00:35:04.570 \longrightarrow 00:35:05.620$ is going to look like,

NOTE Confidence: 0.765508517692308

 $00:35:05.620 \longrightarrow 00:35:07.685$ if you send them to me for.

NOTE Confidence: 0.765508517692308

00:35:07.690 --> 00:35:11.858 SBRT, so we build something called VAC Lock,

NOTE Confidence: 0.765508517692308

 $00:35:11.860 \longrightarrow 00:35:13.474$ which is a mold underneath them

NOTE Confidence: 0.765508517692308

 $00:35:13.474 \longrightarrow 00:35:15.090$ that holds them in position.

NOTE Confidence: 0.765508517692308

 $00{:}35{:}15.090 \dashrightarrow 00{:}35{:}17.930$ I often put abdominal compression

NOTE Confidence: 0.765508517692308

 $00{:}35{:}17.930 \dashrightarrow 00{:}35{:}19.955$ so that they're breathing more

NOTE Confidence: 0.765508517692308

 $00:35:19.955 \longrightarrow 00:35:21.430$ shallow so we're really looks

NOTE Confidence: 0.765508517692308

 $00:35:21.430 \longrightarrow 00:35:23.069$ like a blood pressure cuff,

NOTE Confidence: 0.76550851769230800:35:23.070 --> 00:35:23.550 shown here,

NOTE Confidence: 0.765508517692308

 $00:35:23.550 \longrightarrow 00:35:25.230$ but it's placed over their belly and

NOTE Confidence: 0.765508517692308

 $00:35:25.230 \longrightarrow 00:35:26.844$ if they're breathing more shallow

NOTE Confidence: 0.765508517692308

 $00:35:26.844 \longrightarrow 00:35:28.164$ then there's less respiratory

NOTE Confidence: 0.765508517692308

 $00:35:28.164 \longrightarrow 00:35:29.628$ motion of my tumor target.

 $00{:}35{:}29.630 \dashrightarrow 00{:}35{:}31.886$ So my tumor volume is smaller.

NOTE Confidence: 0.765508517692308

 $00{:}35{:}31.890 \dashrightarrow 00{:}35{:}34.466$ We then obtain usually an Ivy contrast

NOTE Confidence: 0.765508517692308

00:35:34.466 --> 00:35:37.235 CT scan from planning and then what

NOTE Confidence: 0.765508517692308

 $00:35:37.235 \longrightarrow 00:35:39.617$ we call a four dimensional scan.

NOTE Confidence: 0.765508517692308

 $00:35:39.620 \longrightarrow 00:35:41.700$ Which is really a video and it shows

NOTE Confidence: 0.765508517692308

 $00:35:41.700 \longrightarrow 00:35:44.168$ me how the tumor moves right if we

NOTE Confidence: 0.765508517692308

00:35:44.168 --> 00:35:46.279 have an oligo metastasis in the liver,

NOTE Confidence: 0.765508517692308

 $00{:}35{:}46.280 \to 00{:}35{:}48.704$ it would show me how that moves as

NOTE Confidence: 0.765508517692308

 $00:35:48.704 \longrightarrow 00:35:50.996$ the patient breathes so that I can

NOTE Confidence: 0.765508517692308

 $00{:}35{:}50.996 \dashrightarrow 00{:}35{:}53.469$ focus my radiation on that path and

NOTE Confidence: 0.765508517692308

00:35:53.469 --> 00:35:55.444 tighten up the dose distribution.

NOTE Confidence: 0.765508517692308

 $00:35:55.450 \longrightarrow 00:35:57.016$ We always use image guidance and

NOTE Confidence: 0.765508517692308

 $00{:}35{:}57.016 \dashrightarrow 00{:}35{:}59.254$ I have a slide on that in I think

NOTE Confidence: 0.765508517692308

 $00:35:59.254 \longrightarrow 00:36:01.232$ the next slide to help us align

NOTE Confidence: 0.765508517692308

 $00:36:01.232 \longrightarrow 00:36:02.399$ the patient appropriately.

 $00:36:02.400 \longrightarrow 00:36:04.626$ For treatment we often put markers in

NOTE Confidence: 0.765508517692308

 $00:36:04.626 \longrightarrow 00:36:07.169$ the tumor so that we can use those

NOTE Confidence: 0.765508517692308

 $00:36:07.169 \longrightarrow 00:36:09.270$ as surrogates to align the patient.

NOTE Confidence: 0.765508517692308

 $00:36:09.270 \longrightarrow 00:36:10.272$ To be precise,

NOTE Confidence: 0.765508517692308

 $00:36:10.272 \longrightarrow 00:36:12.610$ with treatment and some places are used

NOTE Confidence: 0.765508517692308

00:36:12.680 --> 00:36:14.846 in what we call respiratory gating,

NOTE Confidence: 0.765508517692308

 $00:36:14.850 \longrightarrow 00:36:17.570$ where you can treat the patient only in

NOTE Confidence: 0.765508517692308

 $00:36:17.570 \longrightarrow 00:36:19.887$ certain phases of the respiratory cycle.

NOTE Confidence: 0.765508517692308

 $00{:}36{:}19.890 \dashrightarrow 00{:}36{:}22.416$ So only in deep inspiration or

NOTE Confidence: 0.765508517692308

 $00:36:22.416 \longrightarrow 00:36:25.139$ exhalation in order to also reduce.

NOTE Confidence: 0.828787364827586

00:36:27.710 --> 00:36:28.454 Treatment volume.

NOTE Confidence: 0.828787364827586

 $00:36:28.454 \longrightarrow 00:36:30.686$ So basically the shape of the

NOTE Confidence: 0.828787364827586

 $00:36:30.686 \longrightarrow 00:36:32.486$ beam changes and the intensity

NOTE Confidence: 0.828787364827586

 $00:36:32.486 \longrightarrow 00:36:34.460$ across the beam changes as the

NOTE Confidence: 0.828787364827586

 $00:36:34.460 \longrightarrow 00:36:36.438$ beam arcs around the patient and

NOTE Confidence: 0.828787364827586

 $00:36:36.438 \longrightarrow 00:36:38.444$ that allows us to, you know,

 $00:36:38.444 \longrightarrow 00:36:40.279$ deliver this tight dose distribution.

NOTE Confidence: 0.918599632

 $00:36:43.940 \longrightarrow 00:36:46.028$ So this is just an example

NOTE Confidence: 0.918599632

 $00:36:46.028 \longrightarrow 00:36:47.420$ of our image guidance,

NOTE Confidence: 0.918599632

 $00:36:47.420 \longrightarrow 00:36:50.297$ so we usually obtain what we call

NOTE Confidence: 0.918599632

 $00:36:50.297 \longrightarrow 00:36:53.240$ it cone beam CT on the machine,

NOTE Confidence: 0.918599632

 $00:36:53.240 \longrightarrow 00:36:55.046$ and that is something that we fuse

NOTE Confidence: 0.918599632

 $00:36:55.046 \longrightarrow 00:36:57.020$ in with the planning CT so that

NOTE Confidence: 0.918599632

 $00:36:57.020 \longrightarrow 00:36:59.066$ we can scoot the patient around on

NOTE Confidence: 0.918599632

 $00:36:59.066 \longrightarrow 00:37:00.710$ the machine and make sure they're

NOTE Confidence: 0.918599632

 $00:37:00.710 \longrightarrow 00:37:03.972$ in the exact same position as they

NOTE Confidence: 0.918599632

 $00:37:03.972 \longrightarrow 00:37:06.360$ were for planning to be precise.

NOTE Confidence: 0.918599632

 $00:37:06.360 \longrightarrow 00:37:07.257$ So the purple,

NOTE Confidence: 0.918599632

 $00{:}37{:}07.257 \dashrightarrow 00{:}37{:}09.051$ for example is planning CT and

NOTE Confidence: 0.918599632

 $00:37:09.051 \longrightarrow 00:37:10.693$ the green is what they look

NOTE Confidence: 0.918599632

 $00:37:10.693 \longrightarrow 00:37:12.650$ like on the day of treatment.

 $00:37:12.650 \longrightarrow 00:37:14.474$ And with that fusion we get

NOTE Confidence: 0.918599632

 $00:37:14.474 \longrightarrow 00:37:16.310$ them into the perfect position.

NOTE Confidence: 0.918599632

 $00:37:16.310 \longrightarrow 00:37:18.690$ So how do we use stereotactic radiation

NOTE Confidence: 0.918599632

 $00:37:18.690 \longrightarrow 00:37:20.849$ in the context of rectal cancer?

NOTE Confidence: 0.918599632

00:37:20.850 --> 00:37:22.605 So I wanted to bring up the Saber comment,

NOTE Confidence: 0.918599632

 $00:37:22.610 \longrightarrow 00:37:23.870$ trial touch on it briefly,

NOTE Confidence: 0.918599632

 $00:37:23.870 \dashrightarrow 00:37:25.712$ because I think we're focusing more

NOTE Confidence: 0.918599632

 $00:37:25.712 \longrightarrow 00:37:27.340$ on locally advanced rectal cancer.

NOTE Confidence: 0.918599632

00:37:27.340 --> 00:37:28.950 But since I mentioned Asperity,

NOTE Confidence: 0.918599632

00:37:28.950 --> 00:37:31.470 I thought this was important to talk about.

NOTE Confidence: 0.918599632

00:37:31.470 --> 00:37:35.340 So the question is here in patients who

NOTE Confidence: 0.918599632

 $00:37:35.340 \longrightarrow 00:37:37.720$ have a controlled primary and only one

NOTE Confidence: 0.918599632

 $00{:}37{:}37.788 \dashrightarrow 00{:}37{:}40.210$ to five sites of metastatic disease is

NOTE Confidence: 0.918599632

 $00:37:40.210 \longrightarrow 00:37:42.768$ what they looked at with all metastases.

NOTE Confidence: 0.918599632

00:37:42.770 --> 00:37:45.098 Amenable to stereotactic radiation,

NOTE Confidence: 0.918599632

 $00:37:45.098 \longrightarrow 00:37:48.008$ patients were randomized to just

00:37:48.008 --> 00:37:50.138 continuing on standard of care.

NOTE Confidence: 0.918599632

 $00{:}37{:}50.140 \to 00{:}37{:}52.153$ Palliative chemotherapy versus

NOTE Confidence: 0.918599632

 $00:37:52.153 \longrightarrow 00:37:55.508$ that followed by ablating all

NOTE Confidence: 0.918599632

00:37:55.508 --> 00:37:58.998 sites of metastases with SBRT.

NOTE Confidence: 0.918599632

 $00:37:59.000 \longrightarrow 00:38:01.096$ Most patients had breast,

NOTE Confidence: 0.918599632 00:38:01.096 --> 00:38:01.620 lung, NOTE Confidence: 0.918599632

00:38:01.620 --> 00:38:03.600 colorectal or prostate cancer so

NOTE Confidence: 0.918599632

00:38:03.600 --> 00:38:06.554 that's why I thought it was pertinent

NOTE Confidence: 0.918599632

 $00:38:06.554 \longrightarrow 00:38:09.266$ to our discussion to night and overall

NOTE Confidence: 0.918599632

 $00:38:09.266 \longrightarrow 00:38:11.589$ survival was actually increased.

NOTE Confidence: 0.918599632

 $00:38:11.590 \longrightarrow 00:38:12.580$ When you.

NOTE Confidence: 0.635121571

 $00:38:16.320 \longrightarrow 00:38:20.840$ I distracted by Vicks. Screenshot there,

NOTE Confidence: 0.635121571

 $00{:}38{:}20.840 \dashrightarrow 00{:}38{:}23.765$ so overall survival was increased.

NOTE Confidence: 0.635121571

 $00{:}38{:}23.770 \dashrightarrow 00{:}38{:}26.929$ If if you use SBRT to a blate all lesions

NOTE Confidence: 0.635121571

 $00:38:26.929 \longrightarrow 00:38:29.647$ after standard of care chemotherapy,

 $00:38:29.650 \longrightarrow 00:38:33.418$ so increasingly we're seeing referrals for

NOTE Confidence: 0.635121571

 $00{:}38{:}33.418 \dashrightarrow 00{:}38{:}36.797$ patients who finished chemotherapy and may

NOTE Confidence: 0.635121571

 $00{:}38{:}36.797 \dashrightarrow 00{:}38{:}39.925$ have one to five liver metastases or one

NOTE Confidence: 0.635121571

 $00:38:40.014 \longrightarrow 00:38:43.356$ lung metastasis and one liver metastasis.

NOTE Confidence: 0.635121571

00:38:43.360 --> 00:38:45.135 And actually, I'll mention that

NOTE Confidence: 0.635121571

 $00:38:45.135 \longrightarrow 00:38:47.784$ we are getting a new linac called

NOTE Confidence: 0.635121571

 $00{:}38{:}47.784 \dashrightarrow 00{:}38{:}49.600$ the reflection probably installed.

NOTE Confidence: 0.635121571

 $00:38:49.600 \longrightarrow 00:38:50.908$ Within the next year,

NOTE Confidence: 0.635121571

 $00{:}38{:}50.908 \dashrightarrow 00{:}38{:}53.679$ we're going to be one of the first

NOTE Confidence: 0.635121571

 $00:38:53.679 \longrightarrow 00:38:56.227$ in the nation to get this installed,

NOTE Confidence: 0.635121571

 $00{:}38{:}56.230 \dashrightarrow 00{:}38{:}59.786$ so Stanford has one now and I

NOTE Confidence: 0.635121571

00:38:59.786 --> 00:39:01.526 think we'll probably be third,

NOTE Confidence: 0.635121571

 $00:39:01.530 \longrightarrow 00:39:03.888$ but the benefit of this is you can treat

NOTE Confidence: 0.635121571

 $00{:}39{:}03.888 \dashrightarrow > 00{:}39{:}05.709$ multiple alignments at the same time.

NOTE Confidence: 0.635121571

00:39:05.710 --> 00:39:08.070 So now if I put a patient on the machine,

NOTE Confidence: 0.635121571

 $00:39:08.070 \longrightarrow 00:39:10.798$ I have to allot 30 minutes for each

 $00:39:10.798 \longrightarrow 00:39:12.675$ oligo metastatic site on the reflection

NOTE Confidence: 0.635121571

 $00:39:12.675 \longrightarrow 00:39:15.090$ I can treat 5 at the same time,

NOTE Confidence: 0.635121571

 $00:39:15.090 \longrightarrow 00:39:17.915$ so it really increases output

NOTE Confidence: 0.635121571

 $00{:}39{:}17.915 \dashrightarrow 00{:}39{:}19.610$ and also decreases.

NOTE Confidence: 0.635121571

00:39:19.610 --> 00:39:21.130 You know patient burden.

NOTE Confidence: 0.635121571

 $00:39:21.130 \longrightarrow 00:39:23.410$ The other thing that the reflection

NOTE Confidence: 0.635121571

 $00:39:23.476 \longrightarrow 00:39:25.246$ does is tracks based on PET.

NOTE Confidence: 0.635121571

 $00:39:25.250 \longrightarrow 00:39:28.043$ So we'll be infusing pet tracer in

NOTE Confidence: 0.635121571

 $00{:}39{:}28.043 \dashrightarrow 00{:}39{:}30.652$ our department and then the machine

NOTE Confidence: 0.635121571

 $00:39:30.652 \longrightarrow 00:39:33.316$ communicates with the pet tracer and

NOTE Confidence: 0.635121571

00:39:33.316 --> 00:39:35.919 we'll track the tumor based on pet

NOTE Confidence: 0.635121571

 $00:39:35.919 \longrightarrow 00:39:38.639$ and move with the tip tumor during

NOTE Confidence: 0.635121571

 $00{:}39{:}38.639 \dashrightarrow 00{:}39{:}40.854$ treatment again to tighten radiation

NOTE Confidence: 0.635121571

 $00:39:40.854 \longrightarrow 00:39:43.301$ dose and the other exciting thing

NOTE Confidence: 0.635121571

 $00:39:43.301 \longrightarrow 00:39:45.988$ is right that we can create a lot

 $00:39:45.988 \longrightarrow 00:39:48.850$ of advances in new bio tracers.

NOTE Confidence: 0.635121571

 $00:39:48.850 \longrightarrow 00:39:52.527$ For patients who have molecular targets.

NOTE Confidence: 0.635121571

 $00:39:52.527 \longrightarrow 00:39:55.389$ Sorry my leg keeps hurting though.

NOTE Confidence: 0.635121571 00:39:55.390 --> 00:39:57.820 OK. NOTE Confidence: 0.635121571

 $00:39:57.820 \longrightarrow 00:39:59.868$ So those are me going into the nitty

NOTE Confidence: 0.635121571

 $00:39:59.868 \longrightarrow 00:40:01.593$ gritty of radiation techniques and I

NOTE Confidence: 0.635121571

 $00:40:01.593 \longrightarrow 00:40:03.889$ hope I have not bored you to tears.

NOTE Confidence: 0.635121571

 $00:40:03.890 \longrightarrow 00:40:06.362$ I'm going to touch a little bit on

NOTE Confidence: 0.635121571

 $00{:}40{:}06.362 \dashrightarrow 00{:}40{:}08.300$ short course versus long course,

NOTE Confidence: 0.635121571

 $00:40:08.300 \longrightarrow 00:40:10.827$ and then we'll we'll talk a little

NOTE Confidence: 0.635121571

00:40:10.827 --> 00:40:11.927 bit about T&T.

NOTE Confidence: 0.635121571

 $00:40:11.927 \longrightarrow 00:40:14.189$ So the data for short course

NOTE Confidence: 0.635121571

 $00:40:14.189 \longrightarrow 00:40:15.320$ versus long course,

NOTE Confidence: 0.635121571

 $00:40:15.320 \longrightarrow 00:40:17.090$ I think is really mixed and

NOTE Confidence: 0.635121571

00:40:17.090 --> 00:40:17.975 challenging to interpret,

NOTE Confidence: 0.635121571

 $00:40:17.980 \longrightarrow 00:40:19.240$ and I think the problem is is,

 $00:40:19.240 \longrightarrow 00:40:21.660$ as doctor Shakini touched on,

NOTE Confidence: 0.635121571

 $00{:}40{:}21.660 \dashrightarrow 00{:}40{:}24.642$ a lot of the studies are comparing

NOTE Confidence: 0.635121571

 $00:40:24.642 \longrightarrow 00:40:27.349$ short course T&T versus standard.

NOTE Confidence: 0.635121571

00:40:27.350 --> 00:40:27.808 On course,

NOTE Confidence: 0.635121571

 $00{:}40{:}27.808 \to 00{:}40{:}30.560$ so you don't know if it's the TNT or if it's

NOTE Confidence: 0.635121571

00:40:30.560 --> 00:40:32.569 the short course that's causing the benefit,

NOTE Confidence: 0.635121571 00:40:32.570 --> 00:40:34.460 right?

NOTE Confidence: 0.635121571

 $00:40:34.460 \longrightarrow 00:40:36.368$ So I always start back at

NOTE Confidence: 0.635121571

 $00:40:36.368 \longrightarrow 00:40:37.640$ this old Polish study,

NOTE Confidence: 0.635121571

 $00{:}40{:}37.640 \dashrightarrow 00{:}40{:}40.265$ which is a classic study looking at

NOTE Confidence: 0.635121571

 $00:40:40.265 \longrightarrow 00:40:42.418$ advanced tumors randomized to short course,

NOTE Confidence: 0.635121571

 $00:40:42.420 \longrightarrow 00:40:44.610$ followed by surgery followed by

NOTE Confidence: 0.635121571

00:40:44.610 --> 00:40:46.800 chemo versus standard long course

NOTE Confidence: 0.635121571

 $00:40:46.800 \longrightarrow 00:40:49.050$ followed by surgery followed by chemo.

NOTE Confidence: 0.635121571

 $00:40:49.050 \longrightarrow 00:40:50.330$ No difference in outcomes.

 $00:40:50.330 \longrightarrow 00:40:52.762$ But what I in terms of local

NOTE Confidence: 0.635121571

00:40:52.762 --> 00:40:54.538 control or overall survival.

NOTE Confidence: 0.635121571

 $00:40:54.540 \longrightarrow 00:40:59.350$ But I will point out that.

NOTE Confidence: 0.635121571

 $00:40:59.350 \longrightarrow 00:41:02.830$ If you look at patients.

NOTE Confidence: 0.635121571

00:41:02.830 --> 00:41:06.344 Who have so in this Trog study,

NOTE Confidence: 0.635121571

 $00:41:06.350 \longrightarrow 00:41:08.625$ which asked a similar question

NOTE Confidence: 0.635121571

 $00:41:08.625 \longrightarrow 00:41:09.990$ for advanced patients.

NOTE Confidence: 0.635121571

00:41:09.990 --> 00:41:12.175 Again no difference in local

NOTE Confidence: 0.635121571

00:41:12.175 --> 00:41:13.486 controller overall survival,

NOTE Confidence: 0.635121571

00:41:13.490 --> 00:41:15.242 but I think the important thing

NOTE Confidence: 0.635121571

 $00{:}41{:}15.242 \dashrightarrow 00{:}41{:}17.560$ to note is that for our patients

NOTE Confidence: 0.635121571

 $00:41:17.560 \longrightarrow 00:41:20.132$ with distal tumors there was not

NOTE Confidence: 0.635121571

 $00:41:20.132 \longrightarrow 00:41:22.108$ a statistically significant but

NOTE Confidence: 0.635121571

 $00:41:22.108 \longrightarrow 00:41:23.590$ an absolute numbers.

NOTE Confidence: 0.635121571

 $00:41:23.590 \longrightarrow 00:41:25.534$ Hard to ignore difference in terms

NOTE Confidence: 0.635121571

 $00:41:25.534 \longrightarrow 00:41:27.398$ of local control, so I think.

00:41:30.050 --> 00:41:31.835 For all of us, we're still a

NOTE Confidence: 0.8751437

 $00:41:31.835 \longrightarrow 00:41:33.289$ little bit weary about using

NOTE Confidence: 0.8751437

00:41:33.290 --> 00:41:36.230 short course for distal patients.

NOTE Confidence: 0.8751437

00:41:36.230 --> 00:41:38.454 Because of this data, and I can let

NOTE Confidence: 0.8751437

00:41:38.454 --> 00:41:40.467 Vick touch on that in his opinion,

NOTE Confidence: 0.8751437

 $00:41:40.470 \longrightarrow 00:41:43.837$ when he gets a chance to speak.

NOTE Confidence: 0.8751437

00:41:43.840 --> 00:41:46.144 I think this is interesting because

NOTE Confidence: 0.8751437

 $00:41:46.144 \longrightarrow 00:41:48.131$ so traditionally for short course

NOTE Confidence: 0.8751437

 $00:41:48.131 \longrightarrow 00:41:50.051$ radiation we were following by

NOTE Confidence: 0.8751437

 $00{:}41{:}50.051 \dashrightarrow 00{:}41{:}52.361$ immediate surgery and so the question

NOTE Confidence: 0.8751437

00:41:52.361 --> 00:41:54.479 asked in the Stockholm three trial

NOTE Confidence: 0.8751437

 $00{:}41{:}54.479 \dashrightarrow 00{:}41{:}56.375$ right was short course followed

NOTE Confidence: 0.8751437

 $00{:}41{:}56.375 \dashrightarrow 00{:}41{:}58.350$ by immediate surgery versus short

NOTE Confidence: 0.8751437

00:41:58.350 --> 00:42:00.236 course followed by delayed surgery

NOTE Confidence: 0.8751437

 $00:42:00.236 \longrightarrow 00:42:01.961$ versus long course where strangely

 $00:42:01.961 \longrightarrow 00:42:03.880$ they did not use chemotherapy.

NOTE Confidence: 0.8751437

 $00{:}42{:}03.880 \dashrightarrow 00{:}42{:}05.938$ So I think that's a hard comparison.

NOTE Confidence: 0.8751437

00:42:05.940 --> 00:42:07.068 So in my mind,

NOTE Confidence: 0.8751437

 $00:42:07.068 \longrightarrow 00:42:09.238$ I look at this trial and interpret

NOTE Confidence: 0.8751437

 $00:42:09.238 \longrightarrow 00:42:11.668$ it as should we doing short

NOTE Confidence: 0.8751437

00:42:11.668 --> 00:42:13.680 course followed by immediate.

NOTE Confidence: 0.8751437

00:42:13.680 --> 00:42:15.815 Surgery or should we be doing short

NOTE Confidence: 0.8751437

00:42:15.815 --> 00:42:17.690 course followed by delayed surgery?

NOTE Confidence: 0.8751437

00:42:17.690 --> 00:42:18.646 Everyone had a TM.

NOTE Confidence: 0.8751437

 $00:42:18.646 \longrightarrow 00:42:20.080$ There was no difference in the

NOTE Confidence: 0.8751437

 $00{:}42{:}20.137 \dashrightarrow 00{:}42{:}21.847$ outcomes in terms of local control,

NOTE Confidence: 0.8751437

 $00:42:21.850 \longrightarrow 00:42:23.610$ Mets or overall survival.

NOTE Confidence: 0.818020557684211

 $00{:}42{:}25.950 \dashrightarrow 00{:}42{:}28.430$ And so the final outcome was that short

NOTE Confidence: 0.818020557684211

 $00:42:28.430 \longrightarrow 00:42:30.764$ course with delay was noninferior to

NOTE Confidence: 0.818020557684211

 $00:42:30.764 \longrightarrow 00:42:32.824$ short course with immediate surgery.

NOTE Confidence: 0.818020557684211

 $00{:}42{:}32.830 \dashrightarrow 00{:}42{:}34.671$ I think the important thing to note

 $00:42:34.671 \longrightarrow 00:42:37.081$ is that the past CR for patients who

NOTE Confidence: 0.818020557684211

 $00{:}42{:}37.081 \dashrightarrow 00{:}42{:}38.963$ had immediate surgery right was a

NOTE Confidence: 0.818020557684211

 $00:42:38.963 \longrightarrow 00:42:41.019$ lot lower than the path CR rate for

NOTE Confidence: 0.818020557684211

00:42:41.019 --> 00:42:42.336 patients who had delayed surgery.

NOTE Confidence: 0.818020557684211

00:42:42.336 --> 00:42:44.690 So I think right when Vick and I share

NOTE Confidence: 0.818020557684211

 $00:42:44.690 \longrightarrow 00:42:46.356$ patience and we do give them short

NOTE Confidence: 0.818020557684211

00:42:46.412 --> 00:42:48.074 course therapy, we're increasingly

NOTE Confidence: 0.818020557684211

 $00:42:48.074 \longrightarrow 00:42:50.726$ doing that with delay to surgery.

NOTE Confidence: 0.818020557684211

 $00{:}42{:}50.730 \dashrightarrow 00{:}42{:}52.522$ I guess the question Mike would be do

NOTE Confidence: 0.818020557684211

 $00:42:52.522 \longrightarrow 00:42:54.468$ we give chemotherapy in that interim?

NOTE Confidence: 0.818020557684211

 $00:42:54.470 \longrightarrow 00:42:55.774$ Or do we just?

NOTE Confidence: 0.818020557684211

 $00:42:55.774 \longrightarrow 00:42:57.078$ Relay them to surgery.

NOTE Confidence: 0.818020557684211

 $00:42:57.080 \longrightarrow 00:42:59.944$ The concern was that there would be more.

NOTE Confidence: 0.818020557684211

 $00{:}42{:}59.950 \dashrightarrow 00{:}43{:}01.605$ Complications if you don't take

NOTE Confidence: 0.818020557684211

00:43:01.605 --> 00:43:03.770 the ****** out right away after

00:43:03.770 --> 00:43:05.645 high dose short course radiation,

NOTE Confidence: 0.818020557684211

 $00{:}43{:}05.650 \dashrightarrow 00{:}43{:}07.115$ but in fact postop complications

NOTE Confidence: 0.818020557684211

00:43:07.115 --> 00:43:09.140 were lower in the patients who had

NOTE Confidence: 0.818020557684211

 $00:43:09.140 \longrightarrow 00:43:10.664$ a short course followed by delay.

NOTE Confidence: 0.82495301125

00:43:14.670 --> 00:43:18.606 So finally T& amp; T and I'll make this short,

NOTE Confidence: 0.82495301125

00:43:18.610 --> 00:43:21.262 because I think Mike really covered

NOTE Confidence: 0.82495301125

 $00:43:21.262 \longrightarrow 00:43:23.764$ this well, so I think this is an

NOTE Confidence: 0.82495301125

 $00:43:23.764 \longrightarrow 00:43:25.798$ interesting study that sort of sets the

NOTE Confidence: 0.82495301125

 $00:43:25.798 \longrightarrow 00:43:27.581$ groundwork for the TNT approach, right?

NOTE Confidence: 0.82495301125

 $00:43:27.581 \longrightarrow 00:43:29.207$ It's only a phase two trial.

NOTE Confidence: 0.82495301125

 $00:43:29.210 \longrightarrow 00:43:31.378$ It's a small trial.

NOTE Confidence: 0.82495301125

00:43:31.378 --> 00:43:33.216 Well, 250 patients are not so small,

NOTE Confidence: 0.82495301125

 $00:43:33.220 \longrightarrow 00:43:35.569$ but non randomized,

NOTE Confidence: 0.82495301125

 $00{:}43{:}35.570 \dashrightarrow 00{:}43{:}38.902$ and we're really looking at long course,

NOTE Confidence: 0.82495301125

00:43:38.902 --> 00:43:42.838 followed by surgery or increasing cycles.

NOTE Confidence: 0.82495301125

00:43:42.840 --> 00:43:46.080 Full Fox prior to surgery and you see that

 $00:43:46.080 \longrightarrow 00:43:49.315$ within each cycle of folfox prior to surgery,

NOTE Confidence: 0.82495301125

 $00{:}43{:}49.320 \dashrightarrow 00{:}43{:}52.320$ the past CR rate is increasing.

NOTE Confidence: 0.82495301125

 $00:43:52.320 \longrightarrow 00:43:53.360$ So in my mind,

NOTE Confidence: 0.82495301125

 $00:43:53.360 \longrightarrow 00:43:55.752$ this is sort of like the setup for

NOTE Confidence: 0.82495301125

 $00:43:55.752 \longrightarrow 00:43:57.652$ thinking about the TNT approach

NOTE Confidence: 0.82495301125

 $00:43:57.652 \longrightarrow 00:43:59.400$ and then Polish to Mike.

NOTE Confidence: 0.82495301125

00:43:59.400 --> 00:44:00.576 I think you touched on this,

NOTE Confidence: 0.82495301125

 $00:44:00.580 \longrightarrow 00:44:03.220$ so I'll also be quick,

NOTE Confidence: 0.82495301125

 $00:44:03.220 \longrightarrow 00:44:05.957$ but really we're looking at patients who

NOTE Confidence: 0.82495301125

00:44:05.957 --> 00:44:08.330 have again locally advanced disease,

NOTE Confidence: 0.82495301125

 $00:44:08.330 \longrightarrow 00:44:12.150$ randomized to long course.

NOTE Confidence: 0.82495301125

00:44:12.150 --> 00:44:13.805 Followed by surgery versus short

NOTE Confidence: 0.82495301125

 $00:44:13.805 \longrightarrow 00:44:15.129$ course chemo and TMB.

NOTE Confidence: 0.82495301125

 $00:44:15.130 \longrightarrow 00:44:16.300$ So now the problem is right.

NOTE Confidence: 0.82495301125

 $00:44:16.300 \longrightarrow 00:44:17.596$ We're looking at two different questions.

 $00:44:17.600 \longrightarrow 00:44:20.771$ We're looking at short course and neoadjuvant

NOTE Confidence: 0.82495301125

 $00{:}44{:}20.771 \dashrightarrow 00{:}44{:}23.246$ chemo at the same time as we're looking

NOTE Confidence: 0.82495301125

00:44:23.246 --> 00:44:25.370 at long course versus short course,

NOTE Confidence: 0.82495301125

 $00:44:25.370 \longrightarrow 00:44:27.520$ but no difference in outcomes

NOTE Confidence: 0.82495301125

 $00:44:27.520 \longrightarrow 00:44:29.670$ in terms of local control.

NOTE Confidence: 0.82495301125

 $00{:}44{:}29.670 \dashrightarrow 00{:}44{:}32.070$ Distant meds are zero resections.

NOTE Confidence: 0.82495301125

 $00:44:32.070 \longrightarrow 00:44:34.760$ Past CR.

NOTE Confidence: 0.82495301125

 $00:44:34.760 \longrightarrow 00:44:36.968$ And those three year overall survival

NOTE Confidence: 0.82495301125

 $00{:}44{:}36.968 \dashrightarrow 00{:}44{:}38.940$ was higher with short course.

NOTE Confidence: 0.82495301125

 $00:44:38.940 \longrightarrow 00:44:39.752$ But the question is,

NOTE Confidence: 0.82495301125

 $00:44:39.752 \longrightarrow 00:44:41.275$ is it higher because of the short

NOTE Confidence: 0.82495301125

00:44:41.275 --> 00:44:42.580 course or it's probably higher?

NOTE Confidence: 0.82495301125

 $00:44:42.580 \longrightarrow 00:44:44.788$ I would say because of the

NOTE Confidence: 0.82495301125

 $00{:}44{:}44.788 \dashrightarrow 00{:}44{:}46.890$ full Fox prior to surgery.

NOTE Confidence: 0.913632164444444

00:44:50.020 --> 00:44:53.296 And then if we look at long term follow-up,

NOTE Confidence: 0.913632164444444

 $00:44:53.300 \longrightarrow 00:44:58.316$ the overall survival difference was lost.

00:44:58.320 --> 00:45:01.698 For Polish two and then Stella,

NOTE Confidence: 0.913632164444444

00:45:01.700 --> 00:45:05.034 I think we we did discuss quite well,

NOTE Confidence: 0.913632164444444

 $00{:}45{:}05.034 \dashrightarrow 00{:}45{:}07.596$ so I'll briefly talk about this,

NOTE Confidence: 0.913632164444444

00:45:07.600 --> 00:45:09.896 but again, this was looking at Preop

NOTE Confidence: 0.913632164444444

00:45:09.896 --> 00:45:11.214 short course radiation followed

NOTE Confidence: 0.913632164444444

 $00:45:11.214 \longrightarrow 00:45:13.160$ by chemo and whether it was not

NOTE Confidence: 0.913632164444444

 $00:45:13.160 \longrightarrow 00:45:14.900$ inferior to long course chemo,

NOTE Confidence: 0.913632164444444

00:45:14.900 --> 00:45:16.260 radiation and patient with

NOTE Confidence: 0.913632164444444

 $00:45:16.260 \longrightarrow 00:45:17.280$ locally advanced disease.

NOTE Confidence: 0.913632164444444

 $00:45:17.280 \longrightarrow 00:45:19.632$ So patients are getting short course

NOTE Confidence: 0.913632164444444

00:45:19.632 --> 00:45:22.318 followed by 4 cycles of chemo followed

NOTE Confidence: 0.913632164444444

 $00:45:22.318 \longrightarrow 00:45:25.306$ by surgery and randomized to either

NOTE Confidence: 0.913632164444444

 $00{:}45{:}25.306 \dashrightarrow 00{:}45{:}28.850$ TNT or loan course chemoradiation.

NOTE Confidence: 0.913632164444444

 $00:45:28.850 \longrightarrow 00:45:30.590$ And there was no difference in

NOTE Confidence: 0.913632164444444

 $00:45:30.590 \longrightarrow 00:45:32.370$ survival or local regional recurrence.

 $00{:}45{:}32.370 \dashrightarrow 00{:}45{:}35.408$ The TNT group actually had better three

NOTE Confidence: 0.913632164444444

 $00{:}45{:}35.408 \dashrightarrow 00{:}45{:}38.630$ year overall survival and a cute Grade

NOTE Confidence: 0.913632164444444

00:45:38.630 --> 00:45:42.409 3 toxicities during preop treatment

NOTE Confidence: 0.913632164444444

 $00:45:42.410 \longrightarrow 00:45:45.364$ were slightly higher in the TNT group

NOTE Confidence: 0.913632164444444

 $00:45:45.364 \longrightarrow 00:45:47.220$ versus in the Chemo Radiation group.

NOTE Confidence: 0.913632164444444

 $00:45:47.220 \longrightarrow 00:45:48.588$ But I think we found this

NOTE Confidence: 0.913632164444444

 $00:45:48.588 \longrightarrow 00:45:49.500$ is tolerable for patients.

NOTE Confidence: 0.913632164444444

 $00:45:49.500 \longrightarrow 00:45:51.516$ So as Michael said, I think we're

NOTE Confidence: 0.913632164444444

00:45:51.516 --> 00:45:53.450 moving more and more towards T&T.

NOTE Confidence: 0.913632164444444

 $00:45:53.450 \longrightarrow 00:45:55.170$ For most of our patients.

NOTE Confidence: 0.913632164444444

 $00:45:55.170 \longrightarrow 00:45:57.690$ Based on these studies.

NOTE Confidence: 0.913632164444444

 $00:45:57.690 \longrightarrow 00:46:00.840$ Rapido I think Doctor Jacchini also.

NOTE Confidence: 0.52953102

 $00:46:06.400 \longrightarrow 00:46:09.692$ Four and two. Looking at

NOTE Confidence: 0.52953102

00:46:09.692 --> 00:46:11.236 standard long course treatment.

NOTE Confidence: 0.756452546

00:46:13.270 --> 00:46:18.290 Versus short course chemo TMDE.

NOTE Confidence: 0.756452546

00:46:18.290 --> 00:46:22.950 With past CR higher with T&T.

 $00:46:22.950 \longrightarrow 00:46:26.550$ And distant means lower with TNT,

NOTE Confidence: 0.756452546

 $00{:}46{:}26.550 \dashrightarrow 00{:}46{:}30.323$ so again, I think supporting our our

NOTE Confidence: 0.756452546

 $00:46:30.323 \longrightarrow 00:46:33.179$ practice change more towards TNT.

NOTE Confidence: 0.756452546

00:46:33.180 --> 00:46:34.630 I've NCCN guidelines in here.

NOTE Confidence: 0.756452546

 $00:46:34.630 \longrightarrow 00:46:35.617$ I don't think we need to review

NOTE Confidence: 0.756452546

00:46:35.617 --> 00:46:36.677 them because we cannot look at them,

NOTE Confidence: 0.756452546

 $00:46:36.680 \longrightarrow 00:46:41.584$ but basically supporting more the use of TNT.

NOTE Confidence: 0.756452546

 $00:46:41.590 \longrightarrow 00:46:42.650$ So that's what I had.

NOTE Confidence: 0.756452546

 $00:46:42.650 \longrightarrow 00:46:44.530$ I'm happy to take questions.

NOTE Confidence: 0.756452546

 $00:46:44.530 \longrightarrow 00:46:45.772$ I went fast, but it's getting

NOTE Confidence: 0.756452546

00:46:45.772 --> 00:46:47.292 late so I don't want to keep

NOTE Confidence: 0.756452546

 $00:46:47.292 \longrightarrow 00:46:48.720$ everyone on the line too long.

NOTE Confidence: 0.668511413333333

 $00{:}46{:}55.210 \dashrightarrow 00{:}46{:}56.416$ We hand it over to you.

NOTE Confidence: 0.83438848

00:47:03.950 --> 00:47:05.822 Oh, I need to stop my screen share right?

NOTE Confidence: 0.943436542

00:47:34.930 --> 00:47:39.018 Can you see my screen? Yes, looks perfect.

 $00:47:41.130 \longrightarrow 00:47:41.990$ So I'm back ready.

NOTE Confidence: 0.73946904

 $00{:}47{:}41.990 \dashrightarrow 00{:}47{:}43.530$ I'm one of the colorectal surgeons here.

NOTE Confidence: 0.73946904

 $00:47:43.530 \longrightarrow 00:47:45.735$ I'm going to talk about the surgical

NOTE Confidence: 0.73946904

00:47:45.735 --> 00:47:47.130 management of rectal cancer.

NOTE Confidence: 0.73946904

 $00:47:47.130 \longrightarrow 00:47:49.650$ I want to echo what Kim said.

NOTE Confidence: 0.73946904

00:47:49.650 --> 00:47:52.020 This is truly a multidisciplinary approach,

NOTE Confidence: 0.73946904

00:47:52.020 --> 00:47:53.064 and if anything,

NOTE Confidence: 0.73946904

 $00:47:53.064 \longrightarrow 00:47:55.970$ I actually use more services than I think.

NOTE Confidence: 0.73946904

 $00:47:55.970 \longrightarrow 00:47:57.503$ Mike and Kim,

NOTE Confidence: 0.73946904

 $00:47:57.503 \longrightarrow 00:48:01.080$ with the Intrastromal therapy nurses we use.

NOTE Confidence: 0.73946904

 $00:48:01.080 \longrightarrow 00:48:04.356$ We use our anesthesiologist and without

NOTE Confidence: 0.73946904

 $00:48:04.356 \longrightarrow 00:48:07.536$ all of these people surgical management

NOTE Confidence: 0.73946904

 $00:48:07.536 \longrightarrow 00:48:10.524$ of rectal cancer will be impossible.

NOTE Confidence: 0.73946904

 $00:48:10.530 \longrightarrow 00:48:13.098$ Before we talk about the surgical.

NOTE Confidence: 0.73946904

00:48:13.100 --> 00:48:14.448 The management of surgery.

NOTE Confidence: 0.73946904

 $00:48:14.448 \longrightarrow 00:48:17.462$ I think it's it's important to look at the

00:48:17.462 --> 00:48:19.618 origins of of surgery for rectal cancer.

NOTE Confidence: 0.73946904

 $00{:}48{:}19.620 \dashrightarrow 00{:}48{:}21.580$ Surgery was usually very limited,

NOTE Confidence: 0.73946904

 $00:48:21.580 \longrightarrow 00:48:23.380$ mainly because of the high

NOTE Confidence: 0.73946904

 $00:48:23.380 \longrightarrow 00:48:24.460$ morbidity and mortality.

NOTE Confidence: 0.73946904

 $00:48:24.460 \longrightarrow 00:48:28.500$ This is like in the pre 1900s.

NOTE Confidence: 0.73946904

 $00:48:28.500 \longrightarrow 00:48:30.186$ Most of the rectal cancers were

NOTE Confidence: 0.73946904

 $00:48:30.186 \longrightarrow 00:48:31.310$ treated by transient illusion.

NOTE Confidence: 0.73946904

 $00:48:31.310 \longrightarrow 00:48:34.556$ It was described by Lisfranc initially.

NOTE Confidence: 0.73946904

 $00:48:34.560 \longrightarrow 00:48:37.050$ It wasn't until 1907 that the

NOTE Confidence: 0.73946904

 $00:48:37.050 \longrightarrow 00:48:38.710$ traditional proctectomy that we

NOTE Confidence: 0.73946904

 $00:48:38.787 \longrightarrow 00:48:40.928$ see nowadays was described this.

NOTE Confidence: 0.73946904

 $00{:}48{:}40.928 \dashrightarrow 00{:}48{:}42.768$ This involves both an abdominal

NOTE Confidence: 0.73946904

00:48:42.768 --> 00:48:43.872 and perennial approach,

NOTE Confidence: 0.73946904

 $00:48:43.880 \longrightarrow 00:48:45.406$ and it was the abdominal perineal resection.

NOTE Confidence: 0.859235435294118

00:48:47.690 --> 00:48:50.813 And it wasn't until 75 years later that the

 $00:48:50.813 \longrightarrow 00:48:53.596$ holy plane of surgery that we currently

NOTE Confidence: 0.859235435294118

00:48:53.596 --> 00:48:56.830 use was described by Bill Hill in 1982.

NOTE Confidence: 0.859235435294118

 $00:48:56.830 \longrightarrow 00:49:00.032$ Now, in between 1907 and 1982 some

NOTE Confidence: 0.859235435294118

00:49:00.032 --> 00:49:01.787 surgeons were still doing PME,

NOTE Confidence: 0.859235435294118

00:49:01.790 --> 00:49:03.666 even though they didn't call it PME,

NOTE Confidence: 0.859235435294118

00:49:03.670 --> 00:49:05.746 but because they weren't doing tme.

NOTE Confidence: 0.859235435294118

 $00:49:05.750 \longrightarrow 00:49:06.878$ They were persistent,

NOTE Confidence: 0.859235435294118

00:49:06.878 --> 00:49:09.134 high local recurrence rates and because

NOTE Confidence: 0.859235435294118

 $00:49:09.134 \longrightarrow 00:49:11.749$ of this there was a lot of interest

NOTE Confidence: 0.859235435294118

00:49:11.749 --> 00:49:13.569 in both chemotherapy and radiation.

NOTE Confidence: 0.859235435294118

 $00:49:13.570 \longrightarrow 00:49:15.778$ In addition to surgery for the

NOTE Confidence: 0.859235435294118

 $00:49:15.778 \longrightarrow 00:49:17.250$ management of rectal cancer.

NOTE Confidence: 0.859235435294118

 $00:49:17.250 \longrightarrow 00:49:19.385$ So the role of chemotherapy and radiation

NOTE Confidence: 0.859235435294118

00:49:19.385 --> 00:49:21.810 was mainly to decrease local recurrence,

NOTE Confidence: 0.859235435294118

 $00:49:21.810 \longrightarrow 00:49:24.315$ improve surgical resection of non

NOTE Confidence: 0.859235435294118

 $00{:}49{:}24.315 \dashrightarrow 00{:}49{:}26.319$ resectable lesions and sphincter

 $00:49:26.319 \longrightarrow 00:49:28.666$ preservation and low lying rectal tumors.

NOTE Confidence: 0.859235435294118

 $00:49:28.670 \longrightarrow 00:49:31.390$ We went through a phase of several trials.

NOTE Confidence: 0.859235435294118

 $00:49:31.390 \longrightarrow 00:49:32.929$ I'm not going to go through all the trials.

NOTE Confidence: 0.85923543529411800:49:32.930 --> 00:49:33.942 Pretty much.

NOTE Confidence: 0.859235435294118

 $00:49:33.942 \longrightarrow 00:49:36.472$ They all showed that multimodality

NOTE Confidence: 0.859235435294118

 $00:49:36.472 \longrightarrow 00:49:38.830$ treatment decreased local recurrence.

NOTE Confidence: 0.859235435294118

 $00:49:38.830 \longrightarrow 00:49:40.102$ So one of the important trials

NOTE Confidence: 0.859235435294118

 $00{:}49{:}40.102 \dashrightarrow 00{:}49{:}41.709$ that I'm going to mention is this.

NOTE Confidence: 0.859235435294118

 $00:49:41.710 \longrightarrow 00:49:42.316$ Dutch tme trial.

NOTE Confidence: 0.859235435294118

 $00:49:42.316 \longrightarrow 00:49:44.075$ Now if you look at all the studies

NOTE Confidence: 0.859235435294118

 $00{:}49{:}44.075 \dashrightarrow 00{:}49{:}45.525$ where they did surgery alone,

NOTE Confidence: 0.859235435294118

00:49:45.530 --> 00:49:48.410 local recurrence was about 2825%.

NOTE Confidence: 0.859235435294118

 $00:49:48.410 \longrightarrow 00:49:49.510$ When they added radiation,

NOTE Confidence: 0.859235435294118

 $00{:}49{:}49{:}510 \dashrightarrow 00{:}49{:}51.729$ it dropped it down to about 12 to 14%,

NOTE Confidence: 0.859235435294118

00:49:51.730 --> 00:49:53.978 but if you look at the Dutch TME

 $00:49:53.978 \longrightarrow 00:49:56.049$ trial surgery alone by just following

NOTE Confidence: 0.859235435294118

 $00{:}49{:}56.049 \dashrightarrow 00{:}49{:}58.215$ good surgical principles at a local

NOTE Confidence: 0.859235435294118

 $00:49:58.276 \longrightarrow 00:50:00.046$ recurrence rate of about 10%,

NOTE Confidence: 0.859235435294118

 $00:50:00.050 \longrightarrow 00:50:01.714$ you throw in radiation.

NOTE Confidence: 0.859235435294118

 $00:50:01.714 \longrightarrow 00:50:04.146$ After that we dropped it down to 5%,

NOTE Confidence: 0.859235435294118

 $00:50:04.150 \longrightarrow 00:50:07.456$ so DME becomes the standard no.

NOTE Confidence: 0.859235435294118

00:50:07.460 --> 00:50:09.296 You know we just debated between

NOTE Confidence: 0.859235435294118

 $00:50:09.296 \longrightarrow 00:50:10.930$ short and long hours chemo,

NOTE Confidence: 0.859235435294118

00:50:10.930 --> 00:50:11.920 radiation versus radiation,

NOTE Confidence: 0.859235435294118

 $00:50:11.920 \longrightarrow 00:50:14.620$ and then we finally come to this study,

NOTE Confidence: 0.859235435294118

 $00:50:14.620 \longrightarrow 00:50:16.300$ which kind of established what we

NOTE Confidence: 0.859235435294118

 $00:50:16.300 \longrightarrow 00:50:18.425$ do right now or what we used to

NOTE Confidence: 0.859235435294118

 $00{:}50{:}18.425 \dashrightarrow 00{:}50{:}20.828$ do about 10 years ago and that was

NOTE Confidence: 0.859235435294118

00:50:20.828 --> 00:50:22.700 preoperative chemotherapy and radiation,

NOTE Confidence: 0.859235435294118

 $00:50:22.700 \longrightarrow 00:50:24.716$ followed by surgery followed by chemotherapy.

NOTE Confidence: 0.859235435294118

00:50:24.720 --> 00:50:28.060 Local recurrence was about 6%.

 $00:50:28.060 \longrightarrow 00:50:29.764$ So the summary of the trials

NOTE Confidence: 0.859235435294118

00:50:29.764 --> 00:50:31.305 basically showed that PME surgery

NOTE Confidence: 0.859235435294118

 $00:50:31.305 \longrightarrow 00:50:33.020$ was important for all patients.

NOTE Confidence: 0.859235435294118

 $00:50:33.020 \longrightarrow 00:50:35.708$ It really brought the local countries.

NOTE Confidence: 0.859235435294118

 $00:50:35.710 \longrightarrow 00:50:38.120$ And then pre-op chemoradiation with

NOTE Confidence: 0.859235435294118

 $00{:}50{:}38.120 \dashrightarrow 00{:}50{:}41.318$ surgery and chemotherapy was the way to go.

NOTE Confidence: 0.859235435294118

 $00:50:41.320 \longrightarrow 00:50:43.790$ So now in recent times this I'm

NOTE Confidence: 0.859235435294118

 $00{:}50{:}43.790 \dashrightarrow 00{:}50{:}45.800$ talking about 5 plus years ago

NOTE Confidence: 0.859235435294118

00:50:45.800 --> 00:50:47.375 patients got endoscopy.

NOTE Confidence: 0.859235435294118

 $00:50:47.375 \longrightarrow 00:50:49.475$ They got transrectal ultrasound.

NOTE Confidence: 0.859235435294118

 $00:50:49.480 \longrightarrow 00:50:51.560$ And they have two options.

NOTE Confidence: 0.859235435294118

 $00:50:51.560 \longrightarrow 00:50:53.720$ One, if it was an early stage cancer,

NOTE Confidence: 0.859235435294118

00:50:53.720 --> 00:50:55.760 either P1 or two lesion,

NOTE Confidence: 0.859235435294118

 $00{:}50{:}55.760 \dashrightarrow 00{:}50{:}57.866$ they went for up front surgery.

NOTE Confidence: 0.859235435294118

 $00:50:57.870 \longrightarrow 00:50:58.010$ If,

 $00:50:58.010 \longrightarrow 00:50:58.570$ on the other hand,

NOTE Confidence: 0.859235435294118

 $00:50:58.570 \longrightarrow 00:50:59.956$ if they have locally advanced cancers,

NOTE Confidence: 0.859235435294118

00:50:59.960 --> 00:51:02.221 which was any cancer P3 and higher

NOTE Confidence: 0.859235435294118

00:51:02.221 --> 00:51:03.790 or no positive disease,

NOTE Confidence: 0.859235435294118

 $00:51:03.790 \longrightarrow 00:51:05.525$ they got chemoradiation followed by

NOTE Confidence: 0.859235435294118

 $00:51:05.525 \longrightarrow 00:51:06.913$ surgery followed by chemotherapy.

NOTE Confidence: 0.91030978

00:51:09.430 --> 00:51:11.554 Now we went from local pelvic

NOTE Confidence: 0.91030978

 $00:51:11.554 \longrightarrow 00:51:13.866$ failure of more than 25% by

NOTE Confidence: 0.91030978

 $00:51:13.866 \longrightarrow 00:51:15.658$ changing the surgical technique

NOTE Confidence: 0.91030978

 $00:51:15.658 \longrightarrow 00:51:17.450$ and by adding chemoradiation.

NOTE Confidence: 0.91030978

 $00{:}51{:}17.450 \dashrightarrow 00{:}51{:}19.325$ We changed our local recurrence

NOTE Confidence: 0.91030978

 $00:51:19.325 \longrightarrow 00:51:21.266$ for 25% to about 5 to 10%.

NOTE Confidence: 0.81423353

 $00:51:23.740 \longrightarrow 00:51:26.676$ How are about 30 to 40% still went

NOTE Confidence: 0.81423353

00:51:26.676 --> 00:51:29.616 down to develop distant disease?

NOTE Confidence: 0.81423353

 $00:51:29.620 \longrightarrow 00:51:31.769$ Now, none of the trials we looked

NOTE Confidence: 0.81423353

00:51:31.769 --> 00:51:33.280 at improved overall survival.

00:51:33.280 --> 00:51:35.200 They established rules for good surgery,

NOTE Confidence: 0.81423353

 $00{:}51{:}35.200 \dashrightarrow 00{:}51{:}36.778$ radiation and chemotherapy.

NOTE Confidence: 0.81423353

 $00:51:36.778 \longrightarrow 00:51:39.934$ But they didn't address any micrometastatic

NOTE Confidence: 0.81423353

 $00:51:39.934 \longrightarrow 00:51:42.259$ disease with upfront chemotherapy.

NOTE Confidence: 0.809624648333333

 $00:51:44.750 \longrightarrow 00:51:46.514$ They did not increase patient compliance

NOTE Confidence: 0.809624648333333

 $00:51:46.514 \longrightarrow 00:51:48.829$ and they did not increase downstaging.

NOTE Confidence: 0.809624648333333

 $00:51:48.830 \longrightarrow 00:51:52.494$ Now with chemoradiation what we saw was that.

NOTE Confidence: 0.809624648333333

 $00:51:52.500 \longrightarrow 00:51:53.776$ Pathologic complete response was

NOTE Confidence: 0.809624648333333

 $00:51:53.776 \longrightarrow 00:51:55.960$ noted in anywhere from 10 to 15%,

NOTE Confidence: 0.809624648333333

 $00:51:55.960 \longrightarrow 00:51:58.320$ but the question was can we do more

NOTE Confidence: 0.809624648333333

00:51:58.320 --> 00:51:59.916 and this is where T&T comes in.

NOTE Confidence: 0.809624648333333

 $00{:}51{:}59.920 \dashrightarrow 00{:}52{:}01.760$ There were a bunch of trials I'm not

NOTE Confidence: 0.809624648333333

 $00{:}52{:}01.760 \longrightarrow 00{:}52{:}03.546$ going to go through all the trials

NOTE Confidence: 0.809624648333333

 $00:52:03.546 \longrightarrow 00:52:05.439$ because Mike and Kim did a good job.

NOTE Confidence: 0.809624648333333

 $00:52:05.440 \longrightarrow 00:52:07.967$ And pretty much every trial talks about

 $00:52:07.967 \longrightarrow 00:52:10.159$ increase in Pathologic complete response.

NOTE Confidence: 0.809624648333333

00:52:10.160 --> 00:52:12.392 Now the reason I focus only on this and

NOTE Confidence: 0.809624648333333

 $00:52:12.392 \longrightarrow 00:52:14.883$ not the other stuff is this plays a role

NOTE Confidence: 0.809624648333333

 $00:52:14.883 \longrightarrow 00:52:17.652$ and should we do surgery for rectal cancer

NOTE Confidence: 0.809624648333333

 $00:52:17.652 \longrightarrow 00:52:21.040$ patients underwent total management therapy.

NOTE Confidence: 0.809624648333333

 $00:52:21.040 \longrightarrow 00:52:22.516$ So what are the surgical options?

NOTE Confidence: 0.809624648333333

 $00:52:22.520 \longrightarrow 00:52:24.984$ One TNT changed this so it should not

NOTE Confidence: 0.809624648333333

 $00:52:24.984 \longrightarrow 00:52:28.121$ be an option when we talk about local

NOTE Confidence: 0.809624648333333

 $00:52:28.121 \longrightarrow 00:52:31.120$ excision and more radical surgery like LARP.

NOTE Confidence: 0.809624648333333

 $00:52:31.120 \longrightarrow 00:52:33.748$ Or even exempt for that matter.

NOTE Confidence: 0.809624648333333

00:52:33.750 --> 00:52:36.470 So let's talk about watch and wait now.

NOTE Confidence: 0.809624648333333

00:52:36.470 --> 00:52:37.990 Now when we talk about watch and wait,

NOTE Confidence: 0.809624648333333

 $00:52:37.990 \longrightarrow 00:52:39.508$ some of the terminology is important.

NOTE Confidence: 0.809624648333333

 $00:52:39.510 \longrightarrow 00:52:40.974$ You know there's differences

NOTE Confidence: 0.809624648333333

 $00:52:40.974 \longrightarrow 00:52:42.288$ between induction, chemotherapy,

NOTE Confidence: 0.809624648333333

00:52:42.288 --> 00:52:43.444 consolidation, chemotherapy,

 $00:52:43.444 \longrightarrow 00:52:46.334$ and DNMT is basically induction

NOTE Confidence: 0.809624648333333

 $00:52:46.334 \longrightarrow 00:52:48.390$ or consolidation chemotherapy.

NOTE Confidence: 0.809624648333333

00:52:48.390 --> 00:52:50.014 Now, Pathologic complete response.

NOTE Confidence: 0.809624648333333

 $00:52:50.014 \longrightarrow 00:52:53.353$ You know the definition of that is important

NOTE Confidence: 0.809624648333333

00:52:53.353 --> 00:52:55.861 because it's no evidence on pathology

NOTE Confidence: 0.809624648333333

 $00:52:55.861 \longrightarrow 00:52:58.427$ after proctectomy or full thickness excision.

NOTE Confidence: 0.809624648333333

 $00:52:58.430 \longrightarrow 00:52:59.578$ Now some of these cancers if you

NOTE Confidence: 0.809624648333333

00:52:59.578 --> 00:53:00.859 do a full thickness excision,

NOTE Confidence: 0.809624648333333

 $00{:}53{:}00.860 \dashrightarrow 00{:}53{:}02.492$ you could still have tumor behind

NOTE Confidence: 0.809624648333333

 $00:53:02.492 \longrightarrow 00:53:03.308$ the rectal wall,

NOTE Confidence: 0.809624648333333

 $00:53:03.310 \longrightarrow 00:53:05.285$ which can't be excised with

NOTE Confidence: 0.809624648333333

 $00:53:05.285 \longrightarrow 00:53:06.470$ the transanal excision.

NOTE Confidence: 0.809624648333333

 $00:53:06.470 \longrightarrow 00:53:07.154$ So sometimes,

NOTE Confidence: 0.809624648333333

00:53:07.154 --> 00:53:09.548 even though we may say on a

NOTE Confidence: 0.809624648333333

 $00:53:09.548 \longrightarrow 00:53:10.696$ transitional excision specimen,

 $00:53:10.696 \longrightarrow 00:53:12.308$ that there's pathologic complete

NOTE Confidence: 0.809624648333333

 $00:53:12.308 \longrightarrow 00:53:14.845$ response that may not really be

NOTE Confidence: 0.809624648333333

 $00:53:14.845 \longrightarrow 00:53:16.138$ pathologic complete response.

NOTE Confidence: 0.809624648333333

 $00:53:16.140 \longrightarrow 00:53:17.712$ A few other things.

NOTE Confidence: 0.809624648333333

 $00:53:17.712 \longrightarrow 00:53:20.070$ What is a complete clinical response?

NOTE Confidence: 0.809624648333333

00:53:20.070 --> 00:53:22.190 This basically includes 3 things.

NOTE Confidence: 0.809624648333333

 $00:53:22.190 \longrightarrow 00:53:22.592$ One,

NOTE Confidence: 0.809624648333333

 $00:53:22.592 \longrightarrow 00:53:25.406$ there's no evidence of tumor on clinical

NOTE Confidence: 0.809624648333333

 $00:53:25.410 \longrightarrow 00:53:27.214$ endoscopic and radiologic studies

NOTE Confidence: 0.809624648333333

 $00:53:27.214 \longrightarrow 00:53:29.920$ clinical this digital rectal exam endoscopic.

NOTE Confidence: 0.809624648333333

 $00:53:29.920 \longrightarrow 00:53:31.877$ You know with the camera radiologic

NOTE Confidence: 0.809624648333333

 $00:53:31.877 \longrightarrow 00:53:34.376$ is with an MRI and usually the

NOTE Confidence: 0.809624648333333

 $00:53:34.376 \longrightarrow 00:53:36.987$ lesion on endoscopy looks like this.

NOTE Confidence: 0.809624648333333

 $00:53:36.990 \longrightarrow 00:53:38.230$ Here was the rectal cancer.

NOTE Confidence: 0.809624648333333

 $00:53:38.230 \longrightarrow 00:53:39.466$ It's gone now.

NOTE Confidence: 0.809624648333333

 $00:53:39.466 \longrightarrow 00:53:41.938$ You have this whitish scar with

 $00:53:41.938 \longrightarrow 00:53:43.650$ some telangiectatic.

NOTE Confidence: 0.809624648333333

00:53:43.650 --> 00:53:46.010 Then there's near complete

NOTE Confidence: 0.809624648333333

00:53:46.010 --> 00:53:47.190 pathological response,

NOTE Confidence: 0.809624648333333

 $00:53:47.190 \longrightarrow 00:53:48.850$ so some tumor is present.

NOTE Confidence: 0.809624648333333

 $00:53:48.850 \longrightarrow 00:53:50.218$ But if you give it a little bit

NOTE Confidence: 0.809624648333333

 $00:53:50.218 \longrightarrow 00:53:51.230$ more time from radiation,

NOTE Confidence: 0.809624648333333

 $00:53:51.230 \longrightarrow 00:53:54.160$ potentially this area can disappear.

NOTE Confidence: 0.809624648333333

 $00{:}53{:}54.160 \dashrightarrow 00{:}53{:}57.060$ Then there's incomplete pathologic response.

NOTE Confidence: 0.809624648333333

 $00:53:57.060 \longrightarrow 00:53:58.638$ And here you see the ulcer.

NOTE Confidence: 0.809624648333333

 $00:53:58.640 \longrightarrow 00:53:59.750$ You know there's like a bed.

NOTE Confidence: 0.809624648333333

 $00:53:59.750 \longrightarrow 00:54:01.278$ There's some necrotic tissue.

NOTE Confidence: 0.809624648333333

00:54:01.278 --> 00:54:04.470 Likely this thing is not going to be

NOTE Confidence: 0.809624648333333

 $00{:}54{:}04.470 \dashrightarrow 00{:}54{:}06.126$ a complete neurological response.

NOTE Confidence: 0.809624648333333

 $00:54:06.130 \longrightarrow 00:54:08.380$ And these three things become important

NOTE Confidence: 0.809624648333333

 $00:54:08.380 \longrightarrow 00:54:11.758$ when we when we talk about watching ready.

00:54:11.760 --> 00:54:15.456 Now, how did we come to watching late?

NOTE Confidence: 0.809624648333333

 $00:54:15.460 \longrightarrow 00:54:18.134$ A lot of this started looking at

NOTE Confidence: 0.809624648333333

 $00:54:18.134 \longrightarrow 00:54:19.840$ anal cancer treatment so long

NOTE Confidence: 0.809624648333333

 $00:54:19.840 \longrightarrow 00:54:21.240$ time ago for anal cancer,

NOTE Confidence: 0.809624648333333

 $00:54:21.240 \longrightarrow 00:54:22.920$ so you have to have any PR,

NOTE Confidence: 0.809624648333333

 $00:54:22.920 \longrightarrow 00:54:25.520$ but then chemotherapy and radiation

NOTE Confidence: 0.809624648333333

 $00:54:25.520 \longrightarrow 00:54:27.485$ effectively melted away the cancer

NOTE Confidence: 0.809624648333333

00:54:27.485 --> 00:54:30.740 that now we do APR's for anal

NOTE Confidence: 0.809624648333333

 $00:54:30.740 \longrightarrow 00:54:33.540$ cancer just purely for salvage.

NOTE Confidence: 0.809624648333333

 $00:54:33.540 \longrightarrow 00:54:35.316$ And for rectal cancer also we

NOTE Confidence: 0.809624648333333

 $00{:}54{:}35.316 \to 00{:}54{:}37.629$ saw kind of saw it accidentally,

NOTE Confidence: 0.809624648333333

00:54:37.630 --> 00:54:39.976 like patients who had advanced age

NOTE Confidence: 0.809624648333333

00:54:39.980 --> 00:54:41.366 that no surgeon wanted to touch,

NOTE Confidence: 0.809624648333333

 $00:54:41.370 \longrightarrow 00:54:42.906$ or patients who have high core

NOTE Confidence: 0.809624648333333

 $00:54:42.906 \longrightarrow 00:54:44.358$ morbidities when we gave them

NOTE Confidence: 0.809624648333333

 $00{:}54{:}44.358 \dashrightarrow 00{:}54{:}45.477$ chemotherapy and radiation,

 $00:54:45.480 \longrightarrow 00:54:47.440$ we saw Pathologic complete response

NOTE Confidence: 0.809624648333333

 $00:54:47.440 \longrightarrow 00:54:49.400$ and as we waited there

NOTE Confidence: 0.784055472142857

 $00:54:49.475 \longrightarrow 00:54:51.099$ tumors did not progress.

NOTE Confidence: 0.784055472142857

 $00:54:51.100 \longrightarrow 00:54:52.402$ And then we have a second group

NOTE Confidence: 0.784055472142857

00:54:52.402 --> 00:54:53.732 of patients where you know they

NOTE Confidence: 0.784055472142857

00:54:53.732 --> 00:54:54.708 got chemotherapy and radiation.

NOTE Confidence: 0.784055472142857

00:54:54.710 --> 00:54:56.858 They didn't see anything inside and

NOTE Confidence: 0.784055472142857

 $00:54:56.858 \longrightarrow 00:54:59.470$ they said why am I doing surgery?

NOTE Confidence: 0.784055472142857

 $00:54:59.470 \longrightarrow 00:55:01.794$ So now we have tried to transition

NOTE Confidence: 0.784055472142857

 $00:55:01.794 \longrightarrow 00:55:03.612$ to more intentional watching weight

NOTE Confidence: 0.784055472142857

 $00:55:03.612 \longrightarrow 00:55:05.868$ where this is for less advanced

NOTE Confidence: 0.784055472142857

 $00:55:05.868 \longrightarrow 00:55:08.374$ disease and if you get the complete

NOTE Confidence: 0.784055472142857

 $00{:}55{:}08.374 \dashrightarrow 00{:}55{:}09.790$ or clinical complete response,

NOTE Confidence: 0.784055472142857

 $00{:}55{:}09.790 \dashrightarrow 00{:}55{:}12.571$ we follow them very closely and we see if

NOTE Confidence: 0.784055472142857

 $00:55:12.571 \longrightarrow 00:55:15.417$ we can get away without doing surgery.

 $00:55:15.420 \longrightarrow 00:55:16.885$ Now the important thing for

NOTE Confidence: 0.784055472142857

 $00:55:16.885 \longrightarrow 00:55:18.057$ this is the selection.

NOTE Confidence: 0.784055472142857

00:55:18.060 --> 00:55:19.938 So the baseline stage is important.

NOTE Confidence: 0.784055472142857

 $00:55:19.940 \longrightarrow 00:55:22.823$ So when we stage them, if I'm MRI,

NOTE Confidence: 0.784055472142857

 $00:55:22.823 \longrightarrow 00:55:24.086$ the circumferential resection

NOTE Confidence: 0.784055472142857

 $00:55:24.086 \longrightarrow 00:55:26.880$ margin is less than one millimeter.

NOTE Confidence: 0.784055472142857

 $00:55:26.880 \longrightarrow 00:55:28.710$ Likely this patient is not a

NOTE Confidence: 0.784055472142857

 $00:55:28.710 \longrightarrow 00:55:30.260$ good candidate for watching late.

NOTE Confidence: 0.784055472142857

 $00{:}55{:}30.260 \dashrightarrow 00{:}55{:}32.096$ If they have extensive nodal disease,

NOTE Confidence: 0.784055472142857

 $00:55:32.100 \longrightarrow 00:55:34.724$ or if they have lateral pelvic nodal disease,

NOTE Confidence: 0.784055472142857

 $00:55:34.730 \longrightarrow 00:55:36.356$ they're not good candidates for watching,

NOTE Confidence: 0.78405547214285700:55:36.360 --> 00:55:37.810 right?

NOTE Confidence: 0.784055472142857

00:55:37.810 --> 00:55:39.532 The other important thing is that

NOTE Confidence: 0.784055472142857

 $00:55:39.532 \longrightarrow 00:55:41.113$ the tumor should be profitable

NOTE Confidence: 0.784055472142857

 $00:55:41.113 \longrightarrow 00:55:42.629$ and digital rectal exam.

NOTE Confidence: 0.784055472142857

 $00:55:42.630 \longrightarrow 00:55:45.710$ So if you can't palpate the tumor,

 $00:55:45.710 \longrightarrow 00:55:47.796$ they may not be a good candidate

NOTE Confidence: 0.784055472142857

 $00:55:47.796 \longrightarrow 00:55:48.926$ for watching right now.

NOTE Confidence: 0.784055472142857

 $00:55:48.926 \longrightarrow 00:55:50.578$ We also look at some endoscopic features

NOTE Confidence: 0.784055472142857

00:55:50.578 --> 00:55:52.189 to see if they're good candidates

NOTE Confidence: 0.784055472142857

 $00:55:52.189 \longrightarrow 00:55:53.821$ for this watch and read approach.

NOTE Confidence: 0.784055472142857

 $00:55:53.830 \longrightarrow 00:55:55.594$ We've got to make sure the tumors are small,

NOTE Confidence: 0.784055472142857

00:55:55.600 --> 00:55:56.452 they're not circumferential,

NOTE Confidence: 0.784055472142857

 $00{:}55{:}56.452 \dashrightarrow 00{:}55{:}58.440$ and if after you do the totally

NOTE Confidence: 0.784055472142857

 $00{:}55{:}58.491 \dashrightarrow 00{:}55{:}59.913$ adjuvant therapy you got to make

NOTE Confidence: 0.784055472142857

00:55:59.913 --> 00:56:01.430 sure there are no strictures,

NOTE Confidence: 0.784055472142857

 $00:56:01.430 \longrightarrow 00:56:03.130$ because if there are strictures,

NOTE Confidence: 0.784055472142857

 $00:56:03.130 \longrightarrow 00:56:06.739$ it's kind of hard to assess that they're in.

NOTE Confidence: 0.784055472142857

 $00{:}56{:}06.740 \dashrightarrow 00{:}56{:}10.135$ Now, once we have these selection criteria,

NOTE Confidence: 0.784055472142857

 $00:56:10.140 \longrightarrow 00:56:13.220$ if all three selection criteria are met,

NOTE Confidence: 0.784055472142857

 $00:56:13.220 \longrightarrow 00:56:16.202$ there's 98% accuracy in what we are

 $00:56:16.202 \longrightarrow 00:56:18.299$ doing with watching now digital rectal

NOTE Confidence: 0.784055472142857

 $00{:}56{:}18.299 \to 00{:}56{:}19.937$ exam again is the most accurate.

NOTE Confidence: 0.784055472142857

 $00:56:19.940 \longrightarrow 00:56:21.868$ We need to get a baseline before treatment,

NOTE Confidence: 0.784055472142857

 $00:56:21.870 \longrightarrow 00:56:22.995$ usually after treatment.

NOTE Confidence: 0.784055472142857

00:56:22.995 --> 00:56:25.620 If you see a smooth and regular

NOTE Confidence: 0.784055472142857

 $00{:}56{:}25.688 {\:{\circ}{\circ}{}}> 00{:}56{:}27.628$ mucosal surface on palpation.

NOTE Confidence: 0.784055472142857

 $00:56:27.630 \longrightarrow 00:56:29.718$ Patients usually don't have are are

NOTE Confidence: 0.784055472142857

 $00:56:29.718 \longrightarrow 00:56:31.989$ good candidates for this watch and with

NOTE Confidence: 0.784055472142857

 $00{:}56{:}31.990 \dashrightarrow 00{:}56{:}33.658$ and endoscopy like I mentioned before,

NOTE Confidence: 0.784055472142857

 $00:56:33.660 \longrightarrow 00:56:35.082$ if there's whitening of the mucosa

NOTE Confidence: 0.784055472142857

 $00{:}56{:}35.082 \to 00{:}56{:}36.830$ and you just see calendar pacius,

NOTE Confidence: 0.784055472142857

 $00:56:36.830 \longrightarrow 00:56:37.721$ they're also good.

NOTE Confidence: 0.784055472142857

 $00:56:37.721 \longrightarrow 00:56:39.503$ But if you see any ulceration,

NOTE Confidence: 0.784055472142857

 $00:56:39.510 \longrightarrow 00:56:41.238$ stenosis or masked,

NOTE Confidence: 0.784055472142857

 $00:56:41.238 \longrightarrow 00:56:45.270$ they don't have a clinical complete response.

NOTE Confidence: 0.784055472142857

 $00{:}56{:}45.270 \dashrightarrow 00{:}56{:}46.940$ Biopsies should not be done

 $00:56:46.940 \longrightarrow 00:56:48.610$ because sometimes you only biopsy

NOTE Confidence: 0.784055472142857

 $00:56:48.673 \longrightarrow 00:56:49.990$ the superficial surface.

NOTE Confidence: 0.784055472142857

 $00:56:49.990 \longrightarrow 00:56:51.560$ Cancer may be found deeper

NOTE Confidence: 0.784055472142857

 $00:56:51.560 \longrightarrow 00:56:52.816$ inside and sometimes this.

NOTE Confidence: 0.784055472142857

 $00:56:52.820 \longrightarrow 00:56:54.585$ This may yield false assurance

NOTE Confidence: 0.784055472142857

 $00:56:54.585 \longrightarrow 00:56:56.350$ location and if they if,

NOTE Confidence: 0.784055472142857

 $00:56:56.350 \longrightarrow 00:56:57.966$ let's say the MRI shows a deeper lesion,

NOTE Confidence: 0.784055472142857

 $00:56:57.970 \longrightarrow 00:56:59.670$ they may not pursue surgery

NOTE Confidence: 0.784055472142857

 $00:56:59.670 \longrightarrow 00:57:01.370$ because they feel that well.

NOTE Confidence: 0.784055472142857

 $00:57:01.370 \longrightarrow 00:57:03.470$ They found the cancer on colonoscopy.

NOTE Confidence: 0.784055472142857

 $00:57:03.470 \longrightarrow 00:57:04.894$ Now I see nothing.

NOTE Confidence: 0.784055472142857

 $00:57:04.894 \longrightarrow 00:57:07.800$ Why why should I go for surgery?

NOTE Confidence: 0.784055472142857

 $00{:}57{:}07.800 --> 00{:}57{:}09.068$ Lastly, MRI is important.

NOTE Confidence: 0.784055472142857

 $00:57:09.068 \longrightarrow 00:57:10.970$ This is where the radiologist comes

NOTE Confidence: 0.784055472142857

00:57:11.028 --> 00:57:13.065 in for us on Tito restored images

00:57:13.065 --> 00:57:14.360 and diffusion weighted images.

NOTE Confidence: 0.784055472142857

 $00{:}57{:}14.360 \dashrightarrow 00{:}57{:}18.440$ We can see if there's any residual to.

NOTE Confidence: 0.78405547214285700:57:18.440 --> 00:57:18.837 Now,

NOTE Confidence: 0.784055472142857

 $00:57:18.837 \longrightarrow 00:57:21.219$ what kind of surveillance do we

NOTE Confidence: 0.784055472142857

00:57:21.219 --> 00:57:23.609 follow after you know the patient

NOTE Confidence: 0.784055472142857

 $00:57:23.609 \longrightarrow 00:57:25.853$ gets done with Mike and Kim,

NOTE Confidence: 0.784055472142857

 $00:57:25.860 \longrightarrow 00:57:28.320$ they come to us in about 6 to 8 weeks later.

NOTE Confidence: 0.784055472142857

 $00:57:28.320 \longrightarrow 00:57:30.318$ We start with digital rectal exam

NOTE Confidence: 0.784055472142857

 $00:57:30.318 \longrightarrow 00:57:32.640$ and they lost and we get an MRI.

NOTE Confidence: 0.784055472142857

 $00:57:32.640 \longrightarrow 00:57:34.490$ If there's an incomplete response.

NOTE Confidence: 0.784055472142857

 $00{:}57{:}34.490 \dashrightarrow 00{:}57{:}35.636$ Meaning we see an All Star

NOTE Confidence: 0.784055472142857

 $00:57:35.636 \longrightarrow 00:57:36.640$ team or anything like that.

NOTE Confidence: 0.82393956

 $00:57:36.640 \longrightarrow 00:57:38.590$ They go for a radical surgery.

NOTE Confidence: 0.82393956

 $00:57:38.590 \longrightarrow 00:57:39.400$ They found the other hand.

NOTE Confidence: 0.82393956

 $00:57:39.400 \longrightarrow 00:57:41.866$ If there's a near complete response.

NOTE Confidence: 0.82393956

 $00:57:41.870 \longrightarrow 00:57:43.907$ It may be reasonable in some patients

 $00:57:43.907 \longrightarrow 00:57:46.126$ to wait another 6 to 8 weeks and

NOTE Confidence: 0.82393956

 $00{:}57{:}46.126 \dashrightarrow 00{:}57{:}47.416$ repeat the digital rectal exam

NOTE Confidence: 0.82393956

 $00:57:47.473 \longrightarrow 00:57:49.391$ and endoscopy to see if they go

NOTE Confidence: 0.82393956

00:57:49.391 --> 00:57:52.690 from near complete response to.

NOTE Confidence: 0.82393956

 $00{:}57{:}52.690 {\:{\mbox{--}}\!\!>}\ 00{:}57{:}54.657$ To complete clinical response now most of

NOTE Confidence: 0.82393956

 $00{:}57{:}54.657 {\:\dashrightarrow\:} 00{:}57{:}56.557$ these patients if you wait long enough,

NOTE Confidence: 0.82393956

00:57:56.560 --> 00:57:58.855 sometimes you have to wait 28 to 34 weeks.

NOTE Confidence: 0.82393956

 $00{:}57{:}58.860 \longrightarrow 00{:}58{:}01.860$ They do become complete clinical

NOTE Confidence: 0.82393956

 $00.58:01.860 \longrightarrow 00.58:03.426$ responders now, if, on the other hand,

NOTE Confidence: 0.82393956

 $00:58:03.430 \longrightarrow 00:58:05.936$ there's no continued response or any growth,

NOTE Confidence: 0.82393956

 $00:58:05.940 \longrightarrow 00:58:07.230$ you've got to look at protecting.

NOTE Confidence: 0.76430194

 $00:58:09.500 \longrightarrow 00:58:11.820$ Now for clinical complete responders,

NOTE Confidence: 0.76430194

 $00{:}58{:}11.820 \dashrightarrow 00{:}58{:}14.576$ we'll be doing is we do

NOTE Confidence: 0.76430194

 $00:58:14.576 \longrightarrow 00:58:15.440$ additional rectal exam,

NOTE Confidence: 0.76430194

 $00:58:15.440 \longrightarrow 00:58:17.856$ anoscopy and MRI every three to four months.

 $00:58:17.860 \longrightarrow 00:58:20.695$ I usually tend to go every three

NOTE Confidence: 0.76430194

 $00{:}58{:}20.695 \dashrightarrow 00{:}58{:}22.260$ months for at least two years.

NOTE Confidence: 0.76430194

 $00:58:22.260 \longrightarrow 00:58:24.780$ After two years we decreased the frequency.

NOTE Confidence: 0.76430194

 $00:58:24.780 \longrightarrow 00:58:26.532$ We do it every six months

NOTE Confidence: 0.76430194

 $00:58:26.532 \longrightarrow 00:58:27.700$ for about three years.

NOTE Confidence: 0.76430194

 $00:58:27.700 \longrightarrow 00:58:29.356$ And then this is the key part is

NOTE Confidence: 0.76430194

 $00:58:29.356 \longrightarrow 00:58:31.256$ that you got to go for this yearly

NOTE Confidence: 0.76430194

00:58:31.256 --> 00:58:33.019 because we don't have long term data.

NOTE Confidence: 0.76430194

00:58:33.020 --> 00:58:34.665 So if you're going to go with

NOTE Confidence: 0.76430194

 $00:58:34.665 \longrightarrow 00:58:36.189$ the watch and wait approach,

NOTE Confidence: 0.76430194

 $00:58:36.190 \longrightarrow 00:58:37.989$ we got ta make sure our application is

NOTE Confidence: 0.76430194

 $00:58:37.989 \longrightarrow 00:58:39.805$ committed to doing this every three months

NOTE Confidence: 0.76430194

 $00:58:39.805 \longrightarrow 00:58:41.620$ for two years every six months after.

NOTE Confidence: 0.73430629

 $00:58:43.900 \longrightarrow 00:58:45.478$ Now, what what is local report?

NOTE Confidence: 0.73430629

 $00:58:45.480 \longrightarrow 00:58:48.280$ The risk of local regrowth is about 10%.

NOTE Confidence: 0.73430629

00:58:48.280 --> 00:58:50.650 If you have, you know clinical

 $00:58:50.650 \longrightarrow 00:58:52.660$ complete response for two years

NOTE Confidence: 0.73430629

 $00{:}58{:}52.660 \dashrightarrow 00{:}58{:}55.614$ and the actual risk is only 25% of

NOTE Confidence: 0.73430629

00:58:55.614 --> 00:58:57.553 two years and then most of these

NOTE Confidence: 0.73430629

00:58:57.553 --> 00:58:59.340 patients have aluminum components,

NOTE Confidence: 0.73430629

 $00:58:59.340 \longrightarrow 00:59:01.433$ so we can pick them up on

NOTE Confidence: 0.73430629

 $00:59:01.433 \longrightarrow 00:59:03.179$ endoscopy or digital rectal exam.

NOTE Confidence: 0.73430629

 $00:59:03.180 \longrightarrow 00:59:05.718$ Rarely do they have mesorectal or

NOTE Confidence: 0.73430629

 $00{:}59{:}05.718 \dashrightarrow 00{:}59{:}07.410$ lateral pelvic sidewall disease.

NOTE Confidence: 0.73430629

 $00:59:07.410 \longrightarrow 00:59:09.690$ And the risk factors are basically

NOTE Confidence: 0.73430629

 $00:59:09.690 \longrightarrow 00:59:11.577$ increasing 2 stage for every

NOTE Confidence: 0.73430629

00:59:11.577 --> 00:59:13.945 increase in T stage from T1 to T3.

NOTE Confidence: 0.73430629

 $00:59{:}13.950 \dashrightarrow 00{:}59{:}16.995$ There's about a 10% increase increase in

NOTE Confidence: 0.73430629

 $00{:}59{:}16.995 \dashrightarrow 00{:}59{:}20.110$ risk of local regrowth after two years.

NOTE Confidence: 0.73430629

 $00:59:20.110 \longrightarrow 00:59:21.910$ If they're complete clinical responder,

NOTE Confidence: 0.73430629

 $00:59:21.910 \longrightarrow 00:59:22.902$ there is no risk,

 $00:59:22.902 \longrightarrow 00:59:24.390$ and there you know just because

NOTE Confidence: 0.73430629

 $00:59:24.450 \longrightarrow 00:59:25.720$ they have a higher stage.

NOTE Confidence: 0.79404524

00:59:27.820 --> 00:59:29.164 Even if there's regrowth,

NOTE Confidence: 0.79404524

 $00:59:29.164 \longrightarrow 00:59:31.228$ 90% of these patients are

NOTE Confidence: 0.79404524

 $00:59:31.228 \longrightarrow 00:59:32.956$ amenable to R0 sections.

NOTE Confidence: 0.79404524

 $00:59:32.960 \longrightarrow 00:59:36.754$ I usually say if there are clinically

NOTE Confidence: 0.79404524

 $00:59:36.754 \longrightarrow 00:59:38.420$ 2M0 because they've had told me,

NOTE Confidence: 0.79404524

00:59:38.420 --> 00:59:40.541 as you been therapy, some patients may

NOTE Confidence: 0.79404524

 $00:59:40.541 \longrightarrow 00:59:42.540$ be candidates for transient addition.

NOTE Confidence: 0.79404524

 $00:59:42.540 \longrightarrow 00:59:44.418$ Some patients do go for proctectomy.

NOTE Confidence: 0.79404524

 $00:59:44.420 \longrightarrow 00:59:45.516$ Anything higher than that.

NOTE Confidence: 0.79404524

00:59:45.516 --> 00:59:46.886 They should go for proctectomy.

NOTE Confidence: 0.905311271428571

 $00:59:49.460 \longrightarrow 00:59:50.980$ There is increased risk for

NOTE Confidence: 0.905311271428571

00:59:50.980 --> 00:59:51.930 metastatic disease, unfortunately,

NOTE Confidence: 0.905311271428571

 $00:59:51.930 \longrightarrow 00:59:53.290$ if there's local regrowth,

NOTE Confidence: 0.905311271428571

 $00:59:53.290 \longrightarrow 00:59:54.739$ we don't know if it's because of

00:59:54.739 --> 00:59:56.324 tumor biology, but I think there's

NOTE Confidence: 0.905311271428571

 $00:59:56.324 \longrightarrow 00:59:58.470$ going to be more work on that.

NOTE Confidence: 0.905311271428571

 $00{:}59{:}58.470 \dashrightarrow 00{:}59{:}59.770$ In terms of functional outcome,

NOTE Confidence: 0.905311271428571

00:59:59.770 --> 01:00:01.429 I mean with watch and wait all

NOTE Confidence: 0.905311271428571

 $01:00:01.429 \longrightarrow 01:00:02.466$ they're getting this chemoradiation

NOTE Confidence: 0.905311271428571

 $01:00:02.466 \longrightarrow 01:00:04.658$ so they're quality of life is so much

NOTE Confidence: 0.905311271428571

01:00:04.658 --> 01:00:06.286 better than what surgery they have.

NOTE Confidence: 0.905311271428571

 $01:00:06.290 \longrightarrow 01:00:08.106$ Fewer defecation, urinary problems.

NOTE Confidence: 0.905311271428571

 $01:00:08.106 \longrightarrow 01:00:10.830$ They also have better sexual function.

NOTE Confidence: 0.905311271428571

 $01:00:10.830 \longrightarrow 01:00:13.150$ They have superior functional outcomes.

NOTE Confidence: 0.905311271428571

 $01:00:13.150 \longrightarrow 01:00:14.538$ Then even those patients

NOTE Confidence: 0.905311271428571

01:00:14.538 --> 01:00:15.926 have had local excision,

NOTE Confidence: 0.905311271428571

01:00:15.930 --> 01:00:18.405 but about a third of the patients do have

NOTE Confidence: 0.905311271428571

 $01:00:18.405 \longrightarrow 01:00:21.041$ this large syndrome which is low interior

NOTE Confidence: 0.905311271428571

 $01:00:21.041 \longrightarrow 01:00:23.530$ section syndrome where they have frequency,

01:00:23.530 --> 01:00:24.600 urgency, clustering,

NOTE Confidence: 0.905311271428571

 $01:00:24.600 \longrightarrow 01:00:25.670$ occasional incontinence.

NOTE Confidence: 0.905311271428571

01:00:25.670 --> 01:00:30.199 But it is manageable and it doesn't prove it.

NOTE Confidence: 0.905311271428571

01:00:30.200 --> 01:00:31.240 Now, what about the future?

NOTE Confidence: 0.905311271428571

 $01:00:31.240 \longrightarrow 01:00:33.648$ Because now we don't know which patients

NOTE Confidence: 0.905311271428571

 $01:00:33.648 \longrightarrow 01:00:36.379$ respond well and become complete responders.

NOTE Confidence: 0.905311271428571

 $01:00:36.380 \longrightarrow 01:00:38.294$ So some people are working on

NOTE Confidence: 0.905311271428571

 $01{:}00{:}38.294 \dashrightarrow 01{:}00{:}40.028$ actually cultures of the rectal

NOTE Confidence: 0.905311271428571

01:00:40.028 --> 01:00:41.998 cancer derived from the patients,

NOTE Confidence: 0.905311271428571

 $01:00:42.000 \longrightarrow 01:00:44.520$ and we treat them.

NOTE Confidence: 0.905311271428571

 $01{:}00{:}44.520 \dashrightarrow 01{:}00{:}46.214$ And then we also create the patient

NOTE Confidence: 0.905311271428571

 $01:00:46.214 \longrightarrow 01:00:48.208$ and we see if these organized

NOTE Confidence: 0.905311271428571

01:00:48.208 --> 01:00:49.420 cultures actually complete.

NOTE Confidence: 0.905311271428571

 $01{:}00{:}49.420 \dashrightarrow 01{:}00{:}50.728$ They respond and they may give

NOTE Confidence: 0.905311271428571

 $01:00:50.728 \longrightarrow 01:00:52.262$ us an indication on what the

NOTE Confidence: 0.905311271428571

01:00:52.262 --> 01:00:53.180 patient completed respond.

 $01:00:55.400 \longrightarrow 01:00:57.262$ Now let's talk about some of the

NOTE Confidence: 0.832203604166667

 $01{:}00{:}57.262 \dashrightarrow 01{:}00{:}58.699$ surgical options that for surgery,

NOTE Confidence: 0.832203604166667

 $01:00:58.700 \longrightarrow 01:01:00.345$ it depends on where the tumor is.

NOTE Confidence: 0.832203604166667

 $01:01:00.350 \longrightarrow 01:01:03.134$ So the anatomy of the ***** is important

NOTE Confidence: 0.832203604166667

 $01:01:03.134 \longrightarrow 01:01:05.904$ to any tumors lower down chances of

NOTE Confidence: 0.832203604166667

01:01:05.904 --> 01:01:08.016 having an ostomy are much higher.

NOTE Confidence: 0.832203604166667

01:01:08.020 --> 01:01:10.960 So let's talk 1st about local excision.

NOTE Confidence: 0.832203604166667

 $01:01:10.960 \longrightarrow 01:01:12.965$ So local excision was described

NOTE Confidence: 0.832203604166667

 $01:01:12.965 \longrightarrow 01:01:15.560$ in the 1800s for benign tumors.

NOTE Confidence: 0.832203604166667

 $01:01:15.560 \longrightarrow 01:01:17.360$ It was kind of refined and

NOTE Confidence: 0.832203604166667

01:01:17.360 --> 01:01:18.560 perfected by Alan Park.

NOTE Confidence: 0.832203604166667

 $01{:}01{:}18.560 \dashrightarrow 01{:}01{:}21.386$ He designed a lot of instruments.

NOTE Confidence: 0.832203604166667

01:01:21.390 --> 01:01:23.280 The first real rectal cancer

NOTE Confidence: 0.832203604166667

 $01:01:23.280 \longrightarrow 01:01:25.170$ transanal excision was done in

NOTE Confidence: 0.832203604166667

 $01:01:25.170 \longrightarrow 01:01:27.990$ 1977 at Saint Marks Hospital.

01:01:27.990 --> 01:01:28.821 In the 1980s,

NOTE Confidence: 0.832203604166667

01:01:28.821 --> 01:01:31.150 this guy was way ahead of his time.

NOTE Confidence: 0.832203604166667

01:01:31.150 --> 01:01:33.684 Gerhard because he designed with the setup,

NOTE Confidence: 0.832203604166667

 $01:01:33.690 \longrightarrow 01:01:36.342$ which is essentially a laparoscopic setup

NOTE Confidence: 0.832203604166667

01:01:36.342 --> 01:01:38.110 that's transiently scopic microsurgery,

NOTE Confidence: 0.832203604166667

 $01:01:38.110 \longrightarrow 01:01:39.909$ where you can go through the ****.

NOTE Confidence: 0.832203604166667

 $01:01:39.910 \longrightarrow 01:01:42.610$ It was the first natural orifice

NOTE Confidence: 0.832203604166667

 $01:01:42.610 \longrightarrow 01:01:44.050$ device where you can go through

NOTE Confidence: 0.832203604166667

 $01:01:44.050 \longrightarrow 01:01:45.703$ the **** and resect tumors,

NOTE Confidence: 0.832203604166667

 $01:01:45.703 \longrightarrow 01:01:48.049$ even up to 20 centimeters higher.

NOTE Confidence: 0.832203604166667

 $01{:}01{:}48.050 \dashrightarrow 01{:}01{:}49.592$ The problem with that is it's

NOTE Confidence: 0.832203604166667

 $01:01:49.592 \longrightarrow 01:01:51.192$ a very complex system and the

NOTE Confidence: 0.832203604166667

 $01:01:51.192 \longrightarrow 01:01:52.487$ training curve is very high,

NOTE Confidence: 0.832203604166667

 $01{:}01{:}52.490 \dashrightarrow 01{:}01{:}54.570$ so it didn't get adopted.

NOTE Confidence: 0.832203604166667

 $01:01:54.570 \longrightarrow 01:01:56.829$ We do have it we we do do these

NOTE Confidence: 0.832203604166667

 $01:01:56.829 \longrightarrow 01:01:57.850$ stem surgeries.

 $01:01:57.850 \longrightarrow 01:02:00.098$ Then they came up with a more easier

NOTE Confidence: 0.832203604166667

 $01{:}02{:}00.098 \dashrightarrow 01{:}02{:}01.782$ platform which is using the laptop

NOTE Confidence: 0.832203604166667

 $01:02:01.782 \longrightarrow 01:02:03.705$ with the equipment in the 20 Tens

NOTE Confidence: 0.832203604166667

 $01:02:03.705 \longrightarrow 01:02:05.668$ this is much cheaper whereas the

NOTE Confidence: 0.832203604166667

 $01:02:05.668 \longrightarrow 01:02:07.813$ temps equipment is probably close

NOTE Confidence: 0.832203604166667

 $01:02:07.813 \longrightarrow 01:02:10.560$ to I think 1/4 of \$1,000,000.

NOTE Confidence: 0.832203604166667

 $01:02:10.560 \longrightarrow 01:02:13.220$ So this one is much more accessible

NOTE Confidence: 0.832203604166667

 $01:02:13.220 \longrightarrow 01:02:15.520$ to all the institutions.

NOTE Confidence: 0.832203604166667

 $01:02:15.520 \longrightarrow 01:02:18.976$ Now we do local excision for T1 lesions.

NOTE Confidence: 0.832203604166667

 $01:02:18.980 \longrightarrow 01:02:20.965$ They usually have to be

NOTE Confidence: 0.832203604166667

 $01:02:20.965 \longrightarrow 01:02:21.759$ histologically favorable.

NOTE Confidence: 0.832203604166667

 $01:02:21.760 \longrightarrow 01:02:23.440$ Usually we make sure they have

NOTE Confidence: 0.832203604166667

 $01{:}02{:}23.440 {\:{\circ}{\circ}{\circ}}> 01{:}02{:}24.280$ no lymphova scular invasion,

NOTE Confidence: 0.832203604166667

01:02:24.280 --> 01:02:26.380 poor differentiation, or tumor planning.

NOTE Confidence: 0.832203604166667

01:02:26.380 --> 01:02:26.631 Unfortunately,

 $01:02:26.631 \longrightarrow 01:02:28.639$ we don't know a lot of this information

NOTE Confidence: 0.832203604166667

 $01:02:28.639 \longrightarrow 01:02:29.978$ until after we did the surgery,

NOTE Confidence: 0.832203604166667

 $01:02:29.980 \longrightarrow 01:02:32.970$ so if a patient undergoes.

NOTE Confidence: 0.832203604166667

 $01:02:32.970 \longrightarrow 01:02:34.785$ Transitional expression for T1 lesion

NOTE Confidence: 0.832203604166667

01:02:34.785 --> 01:02:38.050 and if they have any of these bad features,

NOTE Confidence: 0.832203604166667

01:02:38.050 --> 01:02:39.865 I mean literally region for

NOTE Confidence: 0.832203604166667

 $01:02:39.865 \longrightarrow 01:02:41.317$ differentiation or general budding.

NOTE Confidence: 0.832203604166667

 $01:02:41.320 \longrightarrow 01:02:44.220$ They may have to consider.

NOTE Confidence: 0.832203604166667

01:02:44.220 --> 01:02:47.889 Radiation or protecting?

NOTE Confidence: 0.832203604166667

01:02:47.890 --> 01:02:50.308 Now, how about for two lesions?

NOTE Confidence: 0.832203604166667

 $01{:}02{:}50.310 \dashrightarrow 01{:}02{:}51.840$ The problem with the two lesions

NOTE Confidence: 0.832203604166667

 $01:02:51.840 \longrightarrow 01:02:53.130$ is that local recurrence rate.

NOTE Confidence: 0.832203604166667

 $01:02:53.130 \longrightarrow 01:02:55.125$ If you do a local excision is

NOTE Confidence: 0.832203604166667

 $01:02:55.125 \longrightarrow 01:02:56.330$ about 13 to 30%.

NOTE Confidence: 0.832203604166667

 $01:02:56.330 \longrightarrow 01:02:58.244$ Now the main reason is because

NOTE Confidence: 0.832203604166667

 $01:02:58.244 \longrightarrow 01:02:59.744$ they have nodal involvement in

 $01:02:59.744 \longrightarrow 01:03:01.929$ 30 to 40% of the patients.

NOTE Confidence: 0.832203604166667

01:03:01.930 --> 01:03:02.403 Now,

NOTE Confidence: 0.832203604166667

 $01:03:02.403 \longrightarrow 01:03:04.768$ some patients are still candidates

NOTE Confidence: 0.832203604166667

 $01:03:04.770 \longrightarrow 01:03:07.338$ for local excision of two lesions.

NOTE Confidence: 0.832203604166667

 $01:03:07.340 \longrightarrow 01:03:08.470$ These are high risk patients.

NOTE Confidence: 0.832203604166667

 $01:03:08.470 \longrightarrow 01:03:10.514$ And then there are some patients who

NOTE Confidence: 0.832203604166667

01:03:10.514 --> 01:03:12.370 absolutely refuse to have a philosophy.

NOTE Confidence: 0.832203604166667

01:03:12.370 --> 01:03:14.400 And sometimes you don't have a choice.

NOTE Confidence: 0.832203604166667

 $01:03:14.400 \longrightarrow 01:03:16.899$ You do something that's better than nothing.

NOTE Confidence: 0.806972727368421

 $01{:}03{:}18.970 \dashrightarrow 01{:}03{:}21.322$ And there's data to show that chemo

NOTE Confidence: 0.806972727368421

 $01:03:21.322 \longrightarrow 01:03:23.150$ radiation may decrease local recurrence

NOTE Confidence: 0.806972727368421

 $01{:}03{:}23.150 \dashrightarrow 01{:}03{:}25.810$ and also create this occult nodal disease.

NOTE Confidence: 0.806972727368421

 $01:03:25.810 \longrightarrow 01:03:27.805$ And when we when we give chemoradiation

NOTE Confidence: 0.806972727368421

 $01:03:27.805 \longrightarrow 01:03:29.625$ we see that the local recurrence

NOTE Confidence: 0.806972727368421

 $01:03:29.625 \longrightarrow 01:03:32.090$ is 15% as opposed to about 7%

 $01:03:32.090 \longrightarrow 01:03:34.478$ when we do a formal practice.

NOTE Confidence: 0.806972727368421

 $01:03:34.480 \longrightarrow 01:03:36.796$ So it's lower than the 30%.

NOTE Confidence: 0.813246416923077

01:03:38.940 --> 01:03:41.058 Now, how about doing more radiation

NOTE Confidence: 0.813246416923077

 $01:03:41.058 \longrightarrow 01:03:43.929$ therapy 1st and then doing local exception?

NOTE Confidence: 0.813246416923077

 $01:03:43.930 \longrightarrow 01:03:45.862$ Now, there are several trials which looked

NOTE Confidence: 0.813246416923077

 $01:03:45.862 \longrightarrow 01:03:48.150$ at it and they showed that it's it's

NOTE Confidence: 0.813246416923077

 $01:03:48.150 \longrightarrow 01:03:50.038$ got to be equivalent local recurrence

NOTE Confidence: 0.813246416923077

 $01:03:50.038 \longrightarrow 01:03:52.428$ and overall survival to proctectomy.

NOTE Confidence: 0.813246416923077

 $01:03:52.430 \longrightarrow 01:03:55.598$ So in select patients it may be useful.

NOTE Confidence: 0.813246416923077

 $01:03:55.600 \longrightarrow 01:03:57.882$ The downside is that if you do

NOTE Confidence: 0.813246416923077

 $01:03:57.882 \longrightarrow 01:03:59.831$ chemo radiation or totally adjuvant

NOTE Confidence: 0.813246416923077

 $01:03:59.831 \longrightarrow 01:04:02.219$ therapy up front, is there really

NOTE Confidence: 0.813246416923077

 $01:04:02.219 \longrightarrow 01:04:03.934$ role even for two lesions?

NOTE Confidence: 0.813246416923077

 $01:04:03.940 \longrightarrow 01:04:06.028$ The surgery even necessary,

NOTE Confidence: 0.813246416923077

 $01:04:06.028 \longrightarrow 01:04:08.116$ especially if there are

NOTE Confidence: 0.813246416923077

 $01{:}04{:}08.116 \dashrightarrow 01{:}04{:}09.920$ complete clinical response.

 $01:04:11.930 \longrightarrow 01:04:15.262$ Now the problem with local excision after

NOTE Confidence: 0.750070463571428

 $01:04:15.262 \longrightarrow 01:04:18.750$ radiation is the post hoc healing issues.

NOTE Confidence: 0.750070463571428

 $01:04:18.750 \longrightarrow 01:04:19.510$ Now let's talk about.

NOTE Confidence: 0.750070463571428

 $01:04:19.510 \longrightarrow 01:04:20.650$ Let's go on the task list.

NOTE Confidence: 0.750070463571428

 $01:04:20.650 \longrightarrow 01:04:22.030$ Anytime we do local excision,

NOTE Confidence: 0.750070463571428

 $01{:}04{:}22.030 \dashrightarrow 01{:}04{:}24.046$ this is the biggest thing we worry about.

NOTE Confidence: 0.750070463571428

 $01:04:24.050 \longrightarrow 01:04:25.694$ It is directly correlated to the

NOTE Confidence: 0.750070463571428

01:04:25.694 --> 01:04:27.369 depth of invasion of the tumor.

NOTE Confidence: 0.750070463571428

 $01:04:27.370 \longrightarrow 01:04:29.743$ So for a tumor that's confined to

NOTE Confidence: 0.750070463571428

 $01:04:29.743 \longrightarrow 01:04:32.591$ the top 1/3 of the submucosa of the

NOTE Confidence: 0.750070463571428

 $01:04:32.591 \longrightarrow 01:04:35.008$ wall of the ***** there's only 3%

NOTE Confidence: 0.750070463571428

 $01:04:35.008 \longrightarrow 01:04:36.688$ risk of lower normal metastases.

NOTE Confidence: 0.750070463571428

 $01:04:36.690 \longrightarrow 01:04:38.430$ Now, these are T1 lesions.

NOTE Confidence: 0.750070463571428

 $01:04:38.430 \longrightarrow 01:04:40.642$ Now the same T1 lesions if they

NOTE Confidence: 0.750070463571428

 $01:04:40.642 \longrightarrow 01:04:43.128$ if they invade the lower third or

01:04:43.128 --> 01:04:45.318 the deeper third of the submucosa,

NOTE Confidence: 0.750070463571428

 $01:04:45.320 \longrightarrow 01:04:48.272$ there's a 23% risk of blood from the taxes.

NOTE Confidence: 0.750070463571428

 $01:04:48.280 \longrightarrow 01:04:50.405$ These numbers are almost close

NOTE Confidence: 0.750070463571428

 $01:04:50.405 \longrightarrow 01:04:52.105$ to the two regions.

NOTE Confidence: 0.750070463571428

 $01:04:52.110 \longrightarrow 01:04:54.354$ Also, if they have information or

NOTE Confidence: 0.750070463571428

01:04:54.354 --> 01:04:55.850 invasion and four differentiation,

NOTE Confidence: 0.750070463571428

 $01:04:55.850 \longrightarrow 01:04:59.236$ there's higher chance there were some

NOTE Confidence: 0.750070463571428

 $01:04:59.236 \longrightarrow 01:05:01.408$ nice studies done which showed that

NOTE Confidence: 0.750070463571428

 $01{:}05{:}01.408 {\:\dashrightarrow\:} 01{:}05{:}02.868$ Lymphovascular invasion is associated

NOTE Confidence: 0.750070463571428

01:05:02.868 --> 01:05:05.290 with lymph node metastasis and also with

NOTE Confidence: 0.750070463571428

 $01{:}05{:}05.345 \dashrightarrow 01{:}05{:}07.418$ the 2.5 X increase in systemic recounts.

NOTE Confidence: 0.750070463571428

 $01:05:07.420 \longrightarrow 01:05:09.604$ This is a nice study done by chain

NOTE Confidence: 0.750070463571428

 $01:05:09.610 \longrightarrow 01:05:12.053$ in 2012 where they looked at T1

NOTE Confidence: 0.750070463571428

01:05:12.053 --> 01:05:14.249 lesions and T2 lesions years,

NOTE Confidence: 0.750070463571428

 $01:05:14.250 \longrightarrow 01:05:16.806$ vascular and region and four differentiation.

NOTE Confidence: 0.750070463571428

01:05:16.810 --> 01:05:18.714 And if you look at it, if they have both,

01:05:18.714 --> 01:05:20.304 it's almost 100% chance of winning

NOTE Confidence: 0.750070463571428

 $01:05:20.304 \longrightarrow 01:05:21.328$ on the test disease.

NOTE Confidence: 0.750070463571428

 $01:05:21.330 \longrightarrow 01:05:23.020$ Same for T1 and T2.

NOTE Confidence: 0.750070463571428

 $01:05:23.020 \longrightarrow 01:05:24.604$ Obviously everything is worse

NOTE Confidence: 0.750070463571428

 $01:05:24.604 \longrightarrow 01:05:26.188$ for the two regions.

NOTE Confidence: 0.750070463571428

01:05:26.190 --> 01:05:27.718 Also 44 differentiation again,

NOTE Confidence: 0.750070463571428

 $01:05:27.718 \longrightarrow 01:05:30.010$ another study showed a 5X fold

NOTE Confidence: 0.750070463571428

01:05:30.081 --> 01:05:31.773 increased chance of lymphoma

NOTE Confidence: 0.750070463571428

 $01{:}05{:}31.773 \dashrightarrow 01{:}05{:}34.070$ capacities and that's why you know

NOTE Confidence: 0.750070463571428

01:05:34.070 --> 01:05:36.470 if we have these risk factors we try

NOTE Confidence: 0.750070463571428

 $01:05:36.537 \longrightarrow 01:05:38.704$ not to do a local excision tumor.

NOTE Confidence: 0.750070463571428

 $01:05:38.704 \longrightarrow 01:05:41.801$ Budding was initially described by in 1993.

NOTE Confidence: 0.750070463571428

 $01{:}05{:}41.801 \dashrightarrow 01{:}05{:}45.238$ The Japanese had a lot of literature

NOTE Confidence: 0.750070463571428

 $01:05:45.238 \longrightarrow 01:05:46.930$ on using it as a predictor,

NOTE Confidence: 0.750070463571428

 $01:05:46.930 \longrightarrow 01:05:51.118$ and prognostic indicator of low forecasts.

 $01:05:51.120 \longrightarrow 01:05:54.691$ So we tried to do a local excision

NOTE Confidence: 0.750070463571428

 $01:05:54.691 \longrightarrow 01:05:56.473$ for like the low risk patients.

NOTE Confidence: 0.750070463571428

01:05:56.480 --> 01:05:58.748 Now how do we do it?

NOTE Confidence: 0.750070463571428

01:05:58.750 --> 01:06:01.501 Usually you know we have these operating

NOTE Confidence: 0.750070463571428

 $01:06:01.501 \longrightarrow 01:06:04.209$ scopes and we identify the lesion,

NOTE Confidence: 0.750070463571428

01:06:04.210 --> 01:06:05.690 get about 1 centimeter margin,

NOTE Confidence: 0.750070463571428

 $01:06:05.690 \longrightarrow 01:06:09.042$ excise the lesion down to the parackal fact

NOTE Confidence: 0.750070463571428

 $01:06:09.042 \longrightarrow 01:06:12.019$ some people close it up and some don't.

NOTE Confidence: 0.750070463571428

 $01:06:12.020 \longrightarrow 01:06:13.800$ And here's how attempts approach

NOTE Confidence: 0.750070463571428

 $01:06:13.800 \longrightarrow 01:06:15.580$ with the transcend the transient

NOTE Confidence: 0.750070463571428

 $01{:}06{:}15.643 \dashrightarrow 01{:}06{:}17.179$ landscape with microsurgery.

NOTE Confidence: 0.750070463571428

01:06:17.180 --> 01:06:19.436 You're you have the laparoscopic instruments,

NOTE Confidence: 0.750070463571428

01:06:19.440 --> 01:06:21.843 we actually use it and we can actually go

NOTE Confidence: 0.750070463571428

 $01:06:21.843 \longrightarrow 01:06:24.319$ even up to the sigmoid to recycle lesions.

NOTE Confidence: 0.750070463571428 01:06:24.320 --> 01:06:24.780 This is, NOTE Confidence: 0.750070463571428

 $01:06:24.780 \longrightarrow 01:06:27.149$ this is how it looks for anyone who is in GI.

 $01:06:27.150 \longrightarrow 01:06:30.566$ It looks like an advanced ESD procedure.

NOTE Confidence: 0.750070463571428 01:06:30.570 --> 01:06:30.841 Yeah, NOTE Confidence: 0.750070463571428

 $01:06:30.841 \longrightarrow 01:06:32.196$ and there's a huge training

NOTE Confidence: 0.750070463571428

01:06:32.196 --> 01:06:33.520 curve associated with it now,

NOTE Confidence: 0.750070463571428

 $01:06:33.520 \longrightarrow 01:06:35.336$ even though it's the smallest surgery we do,

NOTE Confidence: 0.750070463571428

 $01:06:35.340 \longrightarrow 01:06:38.040$ there are complications associated with it.

NOTE Confidence: 0.750070463571428

 $01:06:38.040 \longrightarrow 01:06:41.316$ The biggest one is urinary retention.

NOTE Confidence: 0.750070463571428

 $01:06:41.320 \longrightarrow 01:06:42.732$ We also see bleeding.

NOTE Confidence: 0.750070463571428

 $01:06:42.732 \longrightarrow 01:06:45.634$ We receive this in about 5% of the

NOTE Confidence: 0.750070463571428

 $01:06:45.634 \longrightarrow 01:06:47.594$ patients or patients were anticoagulated

NOTE Confidence: 0.750070463571428

 $01:06:47.600 \longrightarrow 01:06:48.790$ and then the big thing is you

NOTE Confidence: 0.750070463571428

 $01:06:48.790 \dashrightarrow 01:06:50.160$ know you can see public accesses.

NOTE Confidence: 0.750070463571428

 $01{:}06{:}50.160 {\:{\mbox{--}}\!>}\ 01{:}06{:}52.856$ These are a bigger issue for higher lesions,

NOTE Confidence: 0.750070463571428

 $01{:}06{:}52.860 \dashrightarrow 01{:}06{:}55.500$ where interpersonal entry is gained,

NOTE Confidence: 0.750070463571428

 $01:06:55.500 \longrightarrow 01:06:58.615$ but these can be managed by easily.

 $01:06:58.620 \longrightarrow 01:07:00.680$ Now what about the outcomes?

NOTE Confidence: 0.750070463571428

 $01:07:00.680 \longrightarrow 01:07:02.878$ One of the worst things about local

NOTE Confidence: 0.750070463571428

 $01:07:02.878 \longrightarrow 01:07:04.829$ excision is that we cannot harvest

NOTE Confidence: 0.750070463571428

 $01:07:04.829 \longrightarrow 01:07:08.488$ or stage the mesorectal lymph nodes.

NOTE Confidence: 0.750070463571428

 $01:07:08.490 \longrightarrow 01:07:10.262$ For key one cancers,

NOTE Confidence: 0.750070463571428

 $01:07:10.262 \longrightarrow 01:07:11.148$ again there's

NOTE Confidence: 0.5960074286

 $01:07:11.150 \longrightarrow 01:07:13.490$ 65% risk of nodal metastasis,

NOTE Confidence: 0.5960074286

01:07:13.490 --> 01:07:14.938 and if you don't do a good surgery

NOTE Confidence: 0.5960074286

 $01{:}07{:}14.938 \dashrightarrow 01{:}07{:}16.009$ and there's positive margins,

NOTE Confidence: 0.5960074286

 $01{:}07{:}16.010 \dashrightarrow 01{:}07{:}17.825$ it increases the local recurrence

NOTE Confidence: 0.5960074286

 $01{:}07{:}17.825 \dashrightarrow 01{:}07{:}20.096$ and decreases the five year old

NOTE Confidence: 0.5960074286

 $01{:}07{:}20.096 \dashrightarrow 01{:}07{:}22.021$ overall survival for two regions.

NOTE Confidence: 0.5960074286

 $01:07:22.021 \longrightarrow 01:07:24.283$ Again, local recurrence you know it's

NOTE Confidence: 0.5960074286

01:07:24.283 --> 01:07:27.005 not the local recurrence is pretty bad,

NOTE Confidence: 0.5960074286

01:07:27.010 --> 01:07:30.104 and the overall survival is slightly lower,

NOTE Confidence: 0.5960074286

 $01:07:30.110 \longrightarrow 01:07:32.546$ but some patients are good candidates

 $01:07:32.546 \longrightarrow 01:07:34.701$ for this. You're more outcomes.

NOTE Confidence: 0.5960074286

01:07:34.701 --> 01:07:36.936 Risk of lymph nodes increase

NOTE Confidence: 0.5960074286

 $01:07:36.936 \longrightarrow 01:07:39.479$ as the destaging increases.

NOTE Confidence: 0.5960074286

01:07:39.480 --> 01:07:41.608 Also, local recurrence increases.

NOTE Confidence: 0.5960074286

 $01:07:41.608 \longrightarrow 01:07:44.800$ There are several studies confirming these.

NOTE Confidence: 0.5960074286

 $01:07:44.800 \longrightarrow 01:07:47.620$ So in summary, we do transitional

NOTE Confidence: 0.5960074286

 $01:07:47.620 \longrightarrow 01:07:50.180$ transitional excisions for T1 regions.

NOTE Confidence: 0.5960074286

01:07:50.180 --> 01:07:51.500 If it's a high risk one,

NOTE Confidence: 0.5960074286

 $01:07:51.500 \longrightarrow 01:07:53.220$ you can add in chemoradiation

NOTE Confidence: 0.5960074286

 $01:07:53.220 \longrightarrow 01:07:54.940$ or do more radical surgery.

NOTE Confidence: 0.5960074286

01:07:54.940 --> 01:07:57.640 For T2 would prefer radical surgery,

NOTE Confidence: 0.5960074286

 $01:07:57.640 \longrightarrow 01:08:00.356$ but in some select patients maybe transient

NOTE Confidence: 0.5960074286

 $01:08:00.356 \longrightarrow 01:08:03.028$ decision keep more regulation T3 no local.

NOTE Confidence: 0.5960074286

 $01:08:03.030 \longrightarrow 01:08:05.514$ Decision to go straight forward main

NOTE Confidence: 0.5960074286

 $01:08:05.514 \longrightarrow 01:08:07.010$ surgery which we will talk about.

 $01:08:07.010 \longrightarrow 01:08:08.924$ So the radical surgery for rectal

NOTE Confidence: 0.5960074286

01:08:08.924 --> 01:08:10.710 cancer is a proctectomy thought.

NOTE Confidence: 0.5960074286

 $01:08:10.710 \longrightarrow 01:08:13.750$ It was initially described in 1907 by Miles.

NOTE Confidence: 0.5960074286

 $01:08:13.750 \longrightarrow 01:08:16.030$ There was the abdominal pain reduction.

NOTE Confidence: 0.5960074286

 $01:08:16.030 \longrightarrow 01:08:17.890$ We further defined what good

NOTE Confidence: 0.5960074286

01:08:17.890 --> 01:08:22.118 surgery means in 1982 by the field.

NOTE Confidence: 0.5960074286

01:08:22.120 --> 01:08:23.880 And why do we have to do timing?

NOTE Confidence: 0.5960074286

 $01:08:23.880 \longrightarrow 01:08:25.698$ The reason is if you do,

NOTE Confidence: 0.5960074286

01:08:25.700 --> 01:08:27.604 if you if you operate in the

NOTE Confidence: 0.5960074286

 $01:08:27.604 \longrightarrow 01:08:28.420$ non teaming planes,

NOTE Confidence: 0.5960074286

 $01:08:28.420 \longrightarrow 01:08:31.164$ local recurrence can be as high as

NOTE Confidence: 0.5960074286

 $01:08:31.164 \longrightarrow 01:08:33.880$ 30% and if if if you look at our

NOTE Confidence: 0.5960074286

01:08:33.880 --> 01:08:34.900 circumferential resection margin,

NOTE Confidence: 0.5960074286

 $01{:}08{:}34.900 \longrightarrow 01{:}08{:}36.457$ if you go right next to the tumor and

NOTE Confidence: 0.5960074286

01:08:36.457 --> 01:08:38.237 get a margin of less than one millimeter,

NOTE Confidence: 0.5960074286

 $01:08:38.240 \longrightarrow 01:08:40.640$ that's a 50% local recurrence rate.

01:08:40.640 --> 01:08:42.710 We don't have to do much better if you

NOTE Confidence: 0.5960074286

 $01{:}08{:}42.710 \longrightarrow 01{:}08{:}45.080$ just go 1 millimeter to the other side.

NOTE Confidence: 0.5960074286

 $01:08:45.080 \longrightarrow 01:08:47.250$ Local recurrence drops to 17% by

NOTE Confidence: 0.5960074286

 $01:08:47.250 \longrightarrow 01:08:50.810$ staying in TME drops to less than 10%.

NOTE Confidence: 0.5960074286

 $01:08:50.810 \longrightarrow 01:08:52.840$ There's embryological portions for the

NOTE Confidence: 0.5960074286

 $01:08:52.840 \longrightarrow 01:08:55.778$ Cammy plan that will not go over this.

NOTE Confidence: 0.5960074286

 $01:08:55.780 \longrightarrow 01:08:57.320$ There are different surgical approaches.

NOTE Confidence: 0.5960074286

 $01:08:57.320 \longrightarrow 01:08:58.700$ Here's the we used to do.

NOTE Confidence: 0.5960074286

 $01:08:58.700 \longrightarrow 01:09:00.260$ Additional open incision and then we

NOTE Confidence: 0.5960074286

 $01:09:00.260 \longrightarrow 01:09:02.399$ started going with a smaller lifestyle that,

NOTE Confidence: 0.5960074286

01:09:02.400 --> 01:09:04.059 or minimally invasive

NOTE Confidence: 0.5960074286

 $01:09:04.059 \longrightarrow 01:09:05.718$ approaches with laparoscopy.

NOTE Confidence: 0.5960074286

 $01:09:05.720 \longrightarrow 01:09:06.230$ The insufflate,

NOTE Confidence: 0.5960074286

 $01:09:06.230 \longrightarrow 01:09:06.740$ the belly,

NOTE Confidence: 0.5960074286

 $01:09:06.740 \longrightarrow 01:09:08.651$ use a camera and use a little

01:09:08.651 --> 01:09:10.296 instruments and do the surgery.

NOTE Confidence: 0.5960074286

 $01{:}09{:}10.300 \dashrightarrow 01{:}09{:}12.118$ Now we're using the robotic thing.

NOTE Confidence: 0.5960074286

 $01:09:12.120 \longrightarrow 01:09:13.626$ It's ergonomically better.

NOTE Confidence: 0.5960074286

 $01:09:13.626 \longrightarrow 01:09:16.158$ The surgeon sits here and the

NOTE Confidence: 0.5960074286

01:09:16.158 --> 01:09:17.971 robot sits next to the patient and

NOTE Confidence: 0.5960074286

 $01:09:17.971 \longrightarrow 01:09:19.958$ we control it to do the surgery.

NOTE Confidence: 0.5960074286

 $01:09:19.960 \longrightarrow 01:09:21.204$ The visualization is phenomenal.

NOTE Confidence: 0.5960074286

 $01:09:21.204 \longrightarrow 01:09:22.759$ This is how it looks.

NOTE Confidence: 0.5960074286

 $01:09:22.760 \longrightarrow 01:09:25.210$ We identify the wrestlers we can see.

NOTE Confidence: 0.5960074286

01:09:25.210 --> 01:09:25.652 You know,

NOTE Confidence: 0.5960074286

01:09:25.652 --> 01:09:27.420 pretty much everything we need to see and.

NOTE Confidence: 0.59944738

01:09:29.670 --> 01:09:30.630 And still again,

NOTE Confidence: 0.59944738

 $01{:}09{:}30.630 \dashrightarrow 01{:}09{:}32.230$ we're out for radical resection.

NOTE Confidence: 0.59944738

01:09:32.230 --> 01:09:34.708 DME is the standard local recurrence,

NOTE Confidence: 0.59944738

 $01:09:34.710 \longrightarrow 01:09:36.336$ can rock to less than 7%.

NOTE Confidence: 0.59944738

 $01:09:36.340 \longrightarrow 01:09:38.342$ The problem with rectal cancer is the

 $01:09:38.342 \longrightarrow 01:09:40.310$ lower the fuel mirrors to the ****

NOTE Confidence: 0.59944738

 $01{:}09{:}40.310 \dashrightarrow 01{:}09{:}41.787$ the higher the chance of the leak.

NOTE Confidence: 0.59944738

 $01:09:41.790 \longrightarrow 01:09:43.370$ So the lower the tumor,

NOTE Confidence: 0.59944738

 $01:09:43.370 \longrightarrow 01:09:45.002$ the higher the chance of them

NOTE Confidence: 0.59944738

 $01:09:45.002 \longrightarrow 01:09:46.090$ having the temporary announcement.

NOTE Confidence: 0.59944738

 $01:09:46.090 \longrightarrow 01:09:47.616$ And when we stay in these planes,

NOTE Confidence: 0.59944738

 $01:09:47.620 \longrightarrow 01:09:49.876$ there's nerves which wrap around us

NOTE Confidence: 0.59944738

 $01{:}09{:}49.876 \dashrightarrow 01{:}09{:}51.813$ which can cause erectile dysfunction

NOTE Confidence: 0.59944738

 $01:09:51.813 \longrightarrow 01:09:54.347$ in attempt to 30% of the patients.

NOTE Confidence: 0.59944738

 $01:09:54.347 \longrightarrow 01:09:56.860$ Some report even as high as 80%.

NOTE Confidence: 0.59944738

01:09:56.860 --> 01:09:58.080 And for the distal margin,

NOTE Confidence: 0.59944738

 $01:09:58.080 \longrightarrow 01:09:59.600$ we need about 2 centimeters,

NOTE Confidence: 0.59944738

 $01{:}09{:}59.600 \dashrightarrow 01{:}10{:}01.014$ and if there's any question of that,

NOTE Confidence: 0.59944738

 $01{:}10{:}01.020 \dashrightarrow 01{:}10{:}03.044$ we can even do a frozen section even

NOTE Confidence: 0.59944738

01:10:03.044 --> 01:10:04.303 1 centimeter after chemoradiation

 $01:10:04.303 \longrightarrow 01:10:06.058$ can be acceptable in certain

NOTE Confidence: 0.59944738

 $01{:}10{:}06.058 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 01{:}10{:}07.989$ patients where the tumors are very.

NOTE Confidence: 0.561672465957143

01:10:10.060 --> 01:10:13.035 No, the most patients want the LAR,

NOTE Confidence: 0.561672465957143

 $01:10:13.040 \longrightarrow 01:10:15.259$ which is a low interior section syndrome

NOTE Confidence: 0.561672465957143

 $01:10:15.260 \longrightarrow 01:10:17.297$ and this is a sphincter preserving surgery.

NOTE Confidence: 0.561672465957143

01:10:17.300 --> 01:10:19.388 There's different kinds if it's a high tumor,

NOTE Confidence: 0.561672465957143

 $01:10:19.390 \longrightarrow 01:10:20.850$ you can do a standard

NOTE Confidence: 0.561672465957143

 $01:10:20.850 \longrightarrow 01:10:22.310$ LAR for super low tumors.

NOTE Confidence: 0.561672465957143

 $01:10:22.310 \longrightarrow 01:10:25.376$ We do low, ultra low or colloidal.

NOTE Confidence: 0.561672465957143

01:10:25.380 --> 01:10:27.912 Usually it's acceptable even if the

NOTE Confidence: 0.561672465957143

 $01{:}10{:}27.912 \dashrightarrow 01{:}10{:}29.600$ internal sphincter is involved.

NOTE Confidence: 0.561672465957143

 $01:10:29.600 \longrightarrow 01:10:31.598$ We got to make sure that this will feel

NOTE Confidence: 0.561672465957143

 $01:10:31.598 \longrightarrow 01:10:33.496$ more margin is about 1 centimeter for us

NOTE Confidence: 0.561672465957143

 $01:10:33.496 \longrightarrow 01:10:35.760$ to be able to renounce the most divinest.

NOTE Confidence: 0.561672465957143

 $01:10:35.760 \longrightarrow 01:10:37.853$ Most of them do get some kind

NOTE Confidence: 0.561672465957143

 $01:10:37.853 \longrightarrow 01:10:39.280$ of an artificial *****.

01:10:39.280 --> 01:10:40.617 Now when we look at their anatomy,

NOTE Confidence: 0.561672465957143

01:10:40.620 --> 01:10:41.760 patients always ask us well,

NOTE Confidence: 0.561672465957143

01:10:41.760 --> 01:10:42.957 why are you picking out my sigmoid?

NOTE Confidence: 0.561672465957143

 $01:10:42.960 \longrightarrow 01:10:44.744$ Also, when the cancer is here and the

NOTE Confidence: 0.561672465957143

 $01:10:44.744 \longrightarrow 01:10:46.908$ reason is it has to do with the blood supply.

NOTE Confidence: 0.561672465957143

 $01:10:46.910 \longrightarrow 01:10:50.820$ So we got the sigmoid colon, the ******.

NOTE Confidence: 0.561672465957143

 $01:10:50.820 \longrightarrow 01:10:52.878$ And this is an open surgery.

NOTE Confidence: 0.561672465957143

 $01{:}10{:}52.880 \dashrightarrow 01{:}10{:}55.316$ Here we are dividing the semi

NOTE Confidence: 0.561672465957143

 $01:10:55.316 \longrightarrow 01:10:56.940$ colon descending colon junction.

NOTE Confidence: 0.561672465957143

 $01:10:56.940 \longrightarrow 01:10:58.280$ Staying in the theme plane,

NOTE Confidence: 0.561672465957143

01:10:58.280 --> 01:10:59.456 identifying the nerves,

NOTE Confidence: 0.561672465957143

01:10:59.456 --> 01:11:01.416 dissecting not off the sacrum,

NOTE Confidence: 0.561672465957143

 $01:11:01.420 \longrightarrow 01:11:03.200$ taking it off the anterior.

NOTE Confidence: 0.561672465957143 01:11:03.200 --> 01:11:04.190 In this case,

NOTE Confidence: 0.561672465957143

 $01:11:04.190 \longrightarrow 01:11:06.796$ it's the uterus dividing it off the

01:11:06.796 --> 01:11:08.520 uterus and then once we do this,

NOTE Confidence: 0.561672465957143 $01:11:08.520 \longrightarrow 01:11:09.444$ we use it. NOTE Confidence: 0.561672465957143

 $01:11:09.444 \longrightarrow 01:11:10.984$ The retractors and open fashion

NOTE Confidence: 0.561672465957143

 $01:11:10.984 \longrightarrow 01:11:13.520$ go all the way low and then we try

NOTE Confidence: 0.561672465957143

 $01:11:13.520 \longrightarrow 01:11:15.652$ to transact it as low as possible

NOTE Confidence: 0.561672465957143

01:11:15.652 --> 01:11:17.317 and then insert statement through

NOTE Confidence: 0.561672465957143

 $01:11:17.317 \longrightarrow 01:11:19.081$ the **** to perform it.

NOTE Confidence: 0.561672465957143

 $01:11:19.081 \longrightarrow 01:11:20.589$ And that's the most.

NOTE Confidence: 0.561672465957143

01:11:20.590 --> 01:11:22.048 Laparoscopically we use

NOTE Confidence: 0.561672465957143

01:11:22.048 --> 01:11:23.506 these little instruments,

NOTE Confidence: 0.561672465957143

 $01{:}11{:}23.510 \dashrightarrow 01{:}11{:}25.028$ so here we are identifying the

NOTE Confidence: 0.561672465957143

 $01:11:25.028 \longrightarrow 01:11:26.640$ IMA that we need to divide.

NOTE Confidence: 0.561672465957143

 $01{:}11{:}26.640 \dashrightarrow 01{:}11{:}28.525$ We isolated and divided divide

NOTE Confidence: 0.561672465957143

 $01:11:28.525 \longrightarrow 01:11:31.435$ the IV and then free up the left

NOTE Confidence: 0.561672465957143

 $01:11:31.435 \longrightarrow 01:11:33.654$ colon and then we take down all

NOTE Confidence: 0.561672465957143

 $01:11:33.737 \longrightarrow 01:11:36.245$ the attachments of the left colon,

 $01:11:36.250 \longrightarrow 01:11:38.644$ dissect the ***** off the presacral plane.

NOTE Confidence: 0.561672465957143

 $01:11:38.650 \longrightarrow 01:11:40.100$ Here's the hypogastric plexus that

NOTE Confidence: 0.561672465957143

 $01:11:40.100 \longrightarrow 01:11:42.222$ we identify and keep safe so that

NOTE Confidence: 0.561672465957143

 $01:11:42.222 \longrightarrow 01:11:43.450$ there's no sexual dysfunction.

NOTE Confidence: 0.84071980125

 $01:11:45.640 \longrightarrow 01:11:47.784$ There's a video of what this is doing.

NOTE Confidence: 0.84071980125

01:11:47.790 --> 01:11:49.020 The surgery robotically?

NOTE Confidence: 0.84071980125

01:11:49.020 --> 01:11:51.778 So we're taking down the plane in

NOTE Confidence: 0.84071980125

 $01{:}11{:}51.778 \dashrightarrow 01{:}11{:}53.566$ a quick second. You'll even see

NOTE Confidence: 0.84071980125

 $01:11:53.566 \longrightarrow 01:11:54.919$ that you're highlighting up here.

NOTE Confidence: 0.84071980125

 $01:11:54.920 \longrightarrow 01:11:56.942$ And green, we have a specialized

NOTE Confidence: 0.84071980125

 $01:11:56.942 \longrightarrow 01:11:59.489$ dye that we use when we use the.

NOTE Confidence: 0.84071980125

 $01:11:59.490 \longrightarrow 01:12:00.458$ They're right there when

NOTE Confidence: 0.84071980125

01:12:00.458 --> 01:12:01.668 we use the robotic surgery,

NOTE Confidence: 0.84071980125

 $01:12:01.670 \longrightarrow 01:12:02.800$ we're opening up the planes.

NOTE Confidence: 0.84071980125

 $01:12:02.800 \longrightarrow 01:12:04.190$ This is the Mesorectal plane,

 $01:12:04.190 \longrightarrow 01:12:06.326$ which is the loose areolar tissue.

NOTE Confidence: 0.84071980125

 $01:12:06.330 \longrightarrow 01:12:07.095$ It's almost bloodless.

NOTE Confidence: 0.84071980125

 $01:12:07.095 \longrightarrow 01:12:08.370$ If you look at it.

NOTE Confidence: 0.84071980125

01:12:08.370 --> 01:12:09.610 We're just, you know,

NOTE Confidence: 0.84071980125

 $01:12:09.610 \longrightarrow 01:12:11.470$ going through it for quite fast.

NOTE Confidence: 0.84071980125

01:12:11.470 --> 01:12:12.154 Like here,

NOTE Confidence: 0.84071980125

 $01:12:12.154 \longrightarrow 01:12:14.206$ we are identifying the hypogastric nerves,

NOTE Confidence: 0.84071980125

01:12:14.210 --> 01:12:16.676 preserving them so there's no sexual

NOTE Confidence: 0.84071980125

 $01{:}12{:}16.676 \dashrightarrow 01{:}12{:}18.250$ dys function, and we keep doing this,

NOTE Confidence: 0.84071980125

 $01:12:18.250 \longrightarrow 01:12:20.880$ so I'll skip over this.

NOTE Confidence: 0.84071980125

 $01:12:20.880 \longrightarrow 01:12:22.320$ You're real isolated on both

NOTE Confidence: 0.84071980125

 $01:12:22.320 \longrightarrow 01:12:24.100$ the right and the left side.

NOTE Confidence: 0.84071980125

 $01:12:24.100 \longrightarrow 01:12:25.172$ Here is the *****.

NOTE Confidence: 0.84071980125

 $01:12:25.172 \longrightarrow 01:12:26.512$ The tumor is somewhere here,

NOTE Confidence: 0.84071980125

 $01:12:26.520 \longrightarrow 01:12:29.985$ so now we're doing the disco mobilization.

NOTE Confidence: 0.84071980125

 $01:12:29.990 \longrightarrow 01:12:32.076$ So you know we're not counting down

 $01:12:32.076 \longrightarrow 01:12:33.870$ we're getting the entirety of me.

NOTE Confidence: 0.84071980125

01:12:33.870 --> 01:12:35.268 We have identified the tumor here,

NOTE Confidence: 0.84071980125

01:12:35.270 --> 01:12:37.190 so now we're marking it off

NOTE Confidence: 0.84071980125

 $01:12:37.190 \longrightarrow 01:12:38.120$ and we're thinning it out.

NOTE Confidence: 0.84071980125

 $01{:}12{:}38.120 \longrightarrow 01{:}12{:}40.160$ The margin needs to be about 2 centimeters.

NOTE Confidence: 0.84980091

 $01:12:42.280 \longrightarrow 01:12:44.644$ Once we do that here, we're basing it off

NOTE Confidence: 0.84980091

 $01:12:44.644 \longrightarrow 01:12:46.300$ the prostate and the Seminole vesicles.

NOTE Confidence: 0.875411612

01:12:48.970 --> 01:12:49.770 Once we have done that,

NOTE Confidence: 0.875411612

 $01:12:49.770 \longrightarrow 01:12:51.024$ we use the stapler to divide

NOTE Confidence: 0.875411612

 $01:12:51.024 \longrightarrow 01:12:52.310$ it and extract the specimen.

NOTE Confidence: 0.875411612

 $01:12:52.310 \longrightarrow 01:12:54.781$ So in this case you know the

NOTE Confidence: 0.875411612

 $01{:}12{:}54.781 \dashrightarrow 01{:}12{:}56.570$ staple really comes in and you

NOTE Confidence: 0.875411612

 $01{:}12{:}56.570 \dashrightarrow 01{:}12{:}58.070$ have cleaned out the rectal wall.

NOTE Confidence: 0.875411612

 $01:12:58.070 \longrightarrow 01:13:00.138$ You can see that.

NOTE Confidence: 0.875411612

 $01:13:00.140 \longrightarrow 01:13:02.010$ The muscles of the rectal

 $01:13:02.010 \longrightarrow 01:13:03.506$ wall were dividing it.

NOTE Confidence: 0.875411612

01:13:03.510 --> 01:13:04.494 Once it's divided,

NOTE Confidence: 0.875411612

 $01:13:04.494 \longrightarrow 01:13:06.134$ the specimen is extracted and

NOTE Confidence: 0.875411612

 $01:13:06.134 \longrightarrow 01:13:07.968$ then we do this anastomosis

NOTE Confidence: 0.875411612

 $01:13:07.970 \longrightarrow 01:13:09.220$ and the fresh colon from

NOTE Confidence: 0.875411612

01:13:09.220 --> 01:13:10.470 higher comes down and it's.

NOTE Confidence: 0.9164710875

 $01:13:13.090 \longrightarrow 01:13:16.274$ This is how it looks in real life.

NOTE Confidence: 0.9164710875

01:13:16.280 --> 01:13:18.100 There's a spike coming in from below,

NOTE Confidence: 0.9164710875

01:13:18.100 --> 01:13:19.148 with Spike with stapler.

NOTE Confidence: 0.9164710875

 $01:13:19.148 \longrightarrow 01:13:20.196$ The spike is standard

NOTE Confidence: 0.9164710875

01:13:20.196 --> 01:13:21.490 deployed on our staple line.

NOTE Confidence: 0.9164710875

 $01:13:21.490 \longrightarrow 01:13:22.818$ There's the proximal annual

NOTE Confidence: 0.9164710875

 $01:13:22.818 \longrightarrow 01:13:24.810$ that gets hooked on to it.

NOTE Confidence: 0.9164710875

 $01:13:24.810 \longrightarrow 01:13:27.034$ And then Atmos as a fraction in two

NOTE Confidence: 0.9164710875

 $01:13:27.034 \longrightarrow 01:13:29.009$ layers with two rows of statements.

NOTE Confidence: 0.9164710875

 $01:13:29.010 \longrightarrow 01:13:31.110$ And sometimes we actually oversaw it.

01:13:31.110 --> 01:13:33.028 Here on hold we're holding up the

NOTE Confidence: 0.9164710875

 $01:13:33.028 \longrightarrow 01:13:34.618$ the the prostate and the what.

NOTE Confidence: 0.628857922

 $01:13:37.770 \longrightarrow 01:13:38.990$ This is just rearranging it.

NOTE Confidence: 0.628857922

01:13:38.990 --> 01:13:40.278 Moving the fat out of the way so

NOTE Confidence: 0.628857922

 $01:13:40.278 \longrightarrow 01:13:41.570$ none of these get incorporated.

NOTE Confidence: 0.5868949385

 $01:13:46.060 \longrightarrow 01:13:47.560$ So there's different colonic

NOTE Confidence: 0.5868949385

 $01:13:47.560 \longrightarrow 01:13:49.060$ resources in this procedure.

NOTE Confidence: 0.5868949385

 $01:13:49.060 \longrightarrow 01:13:50.040$ I showed you this one,

NOTE Confidence: 0.5868949385

 $01:13:50.040 \longrightarrow 01:13:51.570$ which is called the Baker anastomosis.

NOTE Confidence: 0.5868949385

 $01:13:51.570 \longrightarrow 01:13:53.722$ There's a jpegs or coal plasty I'll talk

NOTE Confidence: 0.5868949385

01:13:53.722 --> 01:13:55.819 about why we use the most of the time.

NOTE Confidence: 0.5868949385

 $01:13:55.820 \longrightarrow 01:13:56.825$ We do diversifications,

NOTE Confidence: 0.5868949385

 $01{:}13{:}56.825 \dashrightarrow 01{:}13{:}58.165$ especially after team radiation,

NOTE Confidence: 0.5868949385

 $01:13:58.170 \longrightarrow 01:13:59.358$ or if it's a little tumor.

NOTE Confidence: 0.5868949385

 $01:13:59.360 \longrightarrow 01:14:00.844$ So this is a temporary diverting look.

01:14:00.850 --> 01:14:01.460 Really awesome,

NOTE Confidence: 0.5868949385

 $01:14:01.460 \longrightarrow 01:14:03.595$ now the next most can be done,

NOTE Confidence: 0.5868949385

 $01:14:03.600 \longrightarrow 01:14:04.572$ stapled, or handsome.

NOTE Confidence: 0.5868949385

 $01:14:04.572 \longrightarrow 01:14:07.196$ We prefer the staple because it's easier and

NOTE Confidence: 0.5868949385

01:14:07.196 --> 01:14:09.254 quicker and faster and safer for patient,

NOTE Confidence: 0.5868949385

 $01:14:09.260 \longrightarrow 01:14:10.348$ but in some situations

NOTE Confidence: 0.5868949385

 $01:14:10.348 \longrightarrow 01:14:12.230$ we have to do a hands on,

NOTE Confidence: 0.5868949385

 $01:14:12.230 \longrightarrow 01:14:13.870$ and that's the message because

NOTE Confidence: 0.5868949385

 $01:14:13.870 \longrightarrow 01:14:15.182$ the State Fair misfired.

NOTE Confidence: 0.5868949385

 $01:14:15.190 \longrightarrow 01:14:16.275$ This is a staple anastomosis

NOTE Confidence: 0.5868949385

 $01:14:16.275 \longrightarrow 01:14:17.143$ that I showed you.

NOTE Confidence: 0.5868949385

 $01:14:17.150 \longrightarrow 01:14:18.488$ The answer is much more difficult.

NOTE Confidence: 0.5868949385

 $01:14:18.490 \longrightarrow 01:14:20.994$ We get it, it's it's usually done open.

NOTE Confidence: 0.5868949385

01:14:21.000 --> 01:14:23.060 Uh, takes a longer time,

NOTE Confidence: 0.5868949385

 $01:14:23.060 \longrightarrow 01:14:25.360$ so we usually staple misfires.

NOTE Confidence: 0.5868949385

 $01:14:25.360 \longrightarrow 01:14:27.436$ Here's the tumor that's been excised.

01:14:27.440 --> 01:14:29.920 We take off the cuff of rectal mucosa,

NOTE Confidence: 0.5868949385

 $01:14:29.920 \longrightarrow 01:14:30.958$ pull the corn,

NOTE Confidence: 0.5868949385

 $01:14:30.958 \longrightarrow 01:14:33.720$ and do a hands on an astomosis through the.

NOTE Confidence: 0.5868949385

 $01:14:33.720 \longrightarrow 01:14:35.464$ This adds about an hour to the case.

NOTE Confidence: 0.5868949385

 $01:14:35.470 \longrightarrow 01:14:37.734$ You know this is usually not done nowadays.

NOTE Confidence: 0.5868949385

 $01:14:37.740 \longrightarrow 01:14:39.492$ Now these are for tumors which

NOTE Confidence: 0.5868949385

 $01:14:39.492 \longrightarrow 01:14:40.660$ involve the internal sphincter.

NOTE Confidence: 0.5868949385

 $01:14:40.660 \longrightarrow 01:14:42.651$ What we do is we go all the way down below

NOTE Confidence: 0.5868949385

 $01:14:42.651 \longrightarrow 01:14:44.415$ the headline right by the inner drum,

NOTE Confidence: 0.5868949385

01:14:44.420 --> 01:14:44.990 divide it,

NOTE Confidence: 0.5868949385

 $01:14:44.990 \longrightarrow 01:14:46.700$ pull the colon from above and

NOTE Confidence: 0.5868949385

 $01:14:46.700 \longrightarrow 01:14:48.516$ literally look it up for the intercom.

NOTE Confidence: 0.5868949385

 $01:14:48.520 \longrightarrow 01:14:49.880$ The functional results from

NOTE Confidence: 0.5868949385

 $01:14:49.880 \longrightarrow 01:14:51.240$ this are actually comparable.

NOTE Confidence: 0.5868949385

 $01:14:51.240 \longrightarrow 01:14:54.957$ PR and patients have good functional outcome,

01:14:54.960 --> 01:14:57.120 meaning they don't have incontinence,

NOTE Confidence: 0.5868949385

01:14:57.120 --> 01:15:00.207 even though they only have their sponsor.

NOTE Confidence: 0.5868949385

 $01:15:00.210 \longrightarrow 01:15:02.148$ This is more of historic interest,

NOTE Confidence: 0.5868949385

 $01:15:02.150 \longrightarrow 01:15:03.515$ but we have about two or three

NOTE Confidence: 0.5868949385

01:15:03.515 --> 01:15:04.900 patients where we have done this

NOTE Confidence: 0.5868949385

 $01:15:04.900 \longrightarrow 01:15:06.150$ because they were hostile abdomen.

NOTE Confidence: 0.5868949385

 $01:15:06.150 \longrightarrow 01:15:07.998$ So we do a abdominal incision and

NOTE Confidence: 0.5868949385

 $01:15:07.998 \longrightarrow 01:15:10.084$ then we go through the back and

NOTE Confidence: 0.5868949385

 $01:15:10.084 \longrightarrow 01:15:12.002$ we open up the toxics and actually

NOTE Confidence: 0.5868949385

 $01:15:12.002 \longrightarrow 01:15:13.179$ under direct visualization to

NOTE Confidence: 0.5868949385

 $01:15:13.179 \longrightarrow 01:15:15.174$ then that's the most as if they

NOTE Confidence: 0.5868949385

 $01:15:15.174 \longrightarrow 01:15:16.968$ have a hostile anterior abdomen.

NOTE Confidence: 0.5868949385

 $01:15:16.970 \longrightarrow 01:15:18.800$ This is recently of interest.

NOTE Confidence: 0.5868949385

 $01:15:18.800 \longrightarrow 01:15:20.740$ This is called a transitional

NOTE Confidence: 0.5868949385

 $01:15:20.740 \longrightarrow 01:15:23.260$ PME where the distal portion of

NOTE Confidence: 0.5868949385

 $01:15:23.260 \longrightarrow 01:15:25.435$ the TME is very difficult.

 $01:15:25.440 \longrightarrow 01:15:27.224$ So what they decided to do was why

NOTE Confidence: 0.5868949385

01:15:27.224 --> 01:15:29.306 not go through the **** divide the

NOTE Confidence: 0.5868949385

 $01:15:29.306 \longrightarrow 01:15:32.130$ ****** go up a little higher and then

NOTE Confidence: 0.5868949385

 $01:15:32.212 \longrightarrow 01:15:35.524$ pull the colon down and do that that's mosis.

NOTE Confidence: 0.5868949385

 $01:15:35.530 \longrightarrow 01:15:36.892$ It helps with the distal mobilization

NOTE Confidence: 0.5868949385

 $01:15:36.892 \longrightarrow 01:15:38.726$ of the last three to six centimeters of

NOTE Confidence: 0.5868949385

 $01:15:38.726 \longrightarrow 01:15:40.542$ the ***** but there's some complications.

NOTE Confidence: 0.5868949385

 $01:15:40.542 \longrightarrow 01:15:42.257$ Is that because you're kind

NOTE Confidence: 0.5868949385

01:15:42.257 --> 01:15:43.598 of doing it blindly?

NOTE Confidence: 0.5868949385

01:15:43.600 --> 01:15:44.960 People are transacted the Aretha,

NOTE Confidence: 0.5868949385

01:15:44.960 --> 01:15:46.664 or cause rectovaginal fistula,

NOTE Confidence: 0.5868949385

 $01:15:46.664 \longrightarrow 01:15:48.794$ and these are bad problems.

NOTE Confidence: 0.5868949385

 $01:15:48.800 \longrightarrow 01:15:49.898$ With good luck,

NOTE Confidence: 0.5868949385

01:15:49.898 --> 01:15:50.630 periscopic skills,

NOTE Confidence: 0.5868949385

 $01:15:50.630 \longrightarrow 01:15:52.429$ you're able to do the distal 3

01:15:52.429 --> 01:15:53.200 to 6 centimeters,

NOTE Confidence: 0.5868949385

 $01:15:53.200 \longrightarrow 01:15:55.456$ so you're not huge advocates for the kids.

NOTE Confidence: 0.586894938501:15:55.460 --> 01:15:56.196 I mean,

01:15:56.196 --> 01:15:58.404 you're still in terms of functional

NOTE Confidence: 0.5868949385

NOTE Confidence: 0.5868949385

01:15:58.404 --> 01:15:59.990 outcome after an astomosis.

NOTE Confidence: 0.5868949385

 $01:15:59.990 \longrightarrow 01:16:00.875$ It's conflicted because

NOTE Confidence: 0.5868949385

01:16:00.875 --> 01:16:02.055 you're missing your *****.

NOTE Confidence: 0.5868949385

 $01:16:02.060 \longrightarrow 01:16:03.878$ Some people do report good outcomes,

NOTE Confidence: 0.5868949385

 $01{:}16{:}03.880 \dashrightarrow 01{:}16{:}05.325$ but there's higher rates of

NOTE Confidence: 0.5868949385

01:16:05.325 --> 01:16:07.060 incontinence and worse quality of life,

NOTE Confidence: 0.5868949385

01:16:07.060 --> 01:16:09.379 especially in women.

NOTE Confidence: 0.5868949385

 $01:16:09.380 \longrightarrow 01:16:10.910$ And patients experience this low

NOTE Confidence: 0.5868949385

 $01:16:10.910 \longrightarrow 01:16:12.440$ interoception syndrome where they have

NOTE Confidence: 0.5868949385

 $01:16:12.491 \longrightarrow 01:16:14.087$ origins through frequency clustering,

NOTE Confidence: 0.5868949385

 $01:16:14.090 \longrightarrow 01:16:14.431$ incontinence.

NOTE Confidence: 0.5868949385

 $01:16:14.431 \longrightarrow 01:16:17.159$ Most of these symptoms do improve after year,

01:16:17.160 --> 01:16:19.596 and quantifiers of wars instead of just

NOTE Confidence: 0.5868949385

 $01:16:19.596 \longrightarrow 01:16:21.911$ hooking up the colon straight into

NOTE Confidence: 0.5868949385

 $01:16:21.911 \longrightarrow 01:16:24.317$ the venous actually helps with this.

NOTE Confidence: 0.631037624545454

 $01:16:24.320 \longrightarrow 01:16:26.480$ These are the different options the

NOTE Confidence: 0.631037624545454

 $01:16:26.480 \longrightarrow 01:16:28.364$ cloning jpod was described in 1986.

NOTE Confidence: 0.631037624545454

01:16:28.364 --> 01:16:29.948 Technically, a little bit more difficult.

NOTE Confidence: 0.631037624545454

01:16:29.950 --> 01:16:33.019 Very hard to do it in patients who are

NOTE Confidence: 0.631037624545454

 $01{:}16{:}33.019 \dashrightarrow 01{:}16{:}34.428$ obese patients are diverticulosis,

NOTE Confidence: 0.631037624545454

 $01:16:34.428 \longrightarrow 01:16:36.920$ where bulky colon have a shortened mesentery.

NOTE Confidence: 0.631037624545454

 $01:16:36.920 \longrightarrow 01:16:38.019$ This is how it kind of looks.

NOTE Confidence: 0.631037624545454

01:16:38.020 --> 01:16:39.680 It looks like there's capacity.

NOTE Confidence: 0.631037624545454

 $01:16:39.680 \longrightarrow 01:16:41.717$ It's supposed to have a small colon.

NOTE Confidence: 0.631037624545454

 $01{:}16{:}41.720 \dashrightarrow 01{:}16{:}43.346$ Call pasty was defined as an

NOTE Confidence: 0.631037624545454

01:16:43.346 --> 01:16:44.746 easier approach where you know

NOTE Confidence: 0.631037624545454

 $01:16:44.746 \longrightarrow 01:16:46.294$ you can you get this reservoir,

 $01:16:46.300 \longrightarrow 01:16:48.120$ but the problem is now you run

NOTE Confidence: 0.631037624545454

 $01:16:48.120 \longrightarrow 01:16:49.675$ an atmosphere and another staple

NOTE Confidence: 0.631037624545454

 $01:16:49.675 \longrightarrow 01:16:51.460$ one which can potentially leak.

NOTE Confidence: 0.631037624545454

 $01:16:51.460 \longrightarrow 01:16:53.770$ So we try not to do do this because there's

NOTE Confidence: 0.631037624545454

 $01:16:53.832 \longrightarrow 01:16:55.880$ a higher leak rate of the colopy side.

NOTE Confidence: 0.631037624545454

01:16:55.880 --> 01:16:57.320 Then there's a much easier technique

NOTE Confidence: 0.631037624545454

 $01:16:57.320 \longrightarrow 01:16:59.514$ where we do and decide we do about 3

NOTE Confidence: 0.631037624545454

01:16:59.514 --> 01:17:01.020 centimeters of this and looked it up,

NOTE Confidence: 0.631037624545454

 $01:17:01.020 \longrightarrow 01:17:02.420$ and it has similar outcome

NOTE Confidence: 0.631037624545454

 $01:17:02.420 \longrightarrow 01:17:03.260$ through cloning Jacobs.

NOTE Confidence: 0.631037624545454

 $01{:}17{:}03.260 \dashrightarrow 01{:}17{:}06.236$ So we have now all transitioned to this.

NOTE Confidence: 0.631037624545454

01:17:06.240 --> 01:17:06.987 So in summary,

NOTE Confidence: 0.631037624545454

 $01:17:06.987 \longrightarrow 01:17:09.130$ you can do it stapled or hand so on.

NOTE Confidence: 0.631037624545454

 $01:17:09.130 \longrightarrow 01:17:10.414$ We do use reservoirs.

NOTE Confidence: 0.631037624545454

01:17:10.414 --> 01:17:12.760 Patients do get a perspective of stoma,

NOTE Confidence: 0.631037624545454

 $01:17:12.760 \longrightarrow 01:17:14.140$ but one big downside is this.

 $01:17:14.140 \longrightarrow 01:17:16.108$ Lower anterior resection syndrome.

NOTE Confidence: 0.631037624545454

 $01{:}17{:}16.108 \dashrightarrow 01{:}17{:}19.608$ Now this is the procedure described by miles,

NOTE Confidence: 0.631037624545454

 $01{:}17{:}19.608 \dashrightarrow 01{:}17{:}21.576$ which is abdominal pain and other

NOTE Confidence: 0.631037624545454

 $01:17:21.576 \longrightarrow 01:17:23.576$ section the absolute indication for it

NOTE Confidence: 0.631037624545454

 $01:17:23.576 \longrightarrow 01:17:25.484$ is if any external sphincters involved

NOTE Confidence: 0.631037624545454

 $01:17:25.484 \longrightarrow 01:17:27.632$ or if the patient is incontinent even

NOTE Confidence: 0.631037624545454

01:17:27.632 --> 01:17:30.239 for the diagnosis of the rectal cancer,

NOTE Confidence: 0.631037624545454

 $01{:}17{:}30.239 \dashrightarrow 01{:}17{:}31.658$ some relative indications.

NOTE Confidence: 0.631037624545454

01:17:31.660 --> 01:17:33.170 If you're tall big guy,

NOTE Confidence: 0.631037624545454

 $01:17:33.170 \longrightarrow 01:17:35.702$ you know it's sometimes very hard to

NOTE Confidence: 0.631037624545454

 $01:17:35.702 \longrightarrow 01:17:37.874$ reinforce the walls for low tumor.

NOTE Confidence: 0.631037624545454

 $01:17:37.880 \longrightarrow 01:17:41.527$ So sometimes APR is the only option.

NOTE Confidence: 0.631037624545454

 $01{:}17{:}41.530 \dashrightarrow 01{:}17{:}44.258$ For APR we do the same surgery except

NOTE Confidence: 0.631037624545454

 $01:17:44.258 \longrightarrow 01:17:46.694$ they get an cost and we do the same

NOTE Confidence: 0.631037624545454

 $01:17:46.694 \longrightarrow 01:17:47.990$ surgery as the low anterior section.

 $01:17:47.990 \longrightarrow 01:17:50.420$ But we also detect the **** so there's

NOTE Confidence: 0.631037624545454

 $01:17:50.420 \longrightarrow 01:17:53.030$ an elliptical incision to core down.

NOTE Confidence: 0.631037624545454

 $01:17:53.030 \longrightarrow 01:17:55.967$ Divide the sprinklers and then reach

NOTE Confidence: 0.631037624545454

 $01:17:55.967 \longrightarrow 01:17:58.229$ from our dissection to the other

NOTE Confidence: 0.631037624545454

 $01:17:58.229 \longrightarrow 01:18:00.809$ side and then we close up things.

NOTE Confidence: 0.631037624545454

01:18:00.810 --> 01:18:02.646 So it's used for patients where

NOTE Confidence: 0.631037624545454

 $01:18:02.646 \longrightarrow 01:18:03.564$ they're sphincter involvement.

NOTE Confidence: 0.631037624545454

 $01:18:03.570 \longrightarrow 01:18:05.838$ It's also used in patients who have

NOTE Confidence: 0.631037624545454

 $01:18:05.838 \longrightarrow 01:18:07.560$ in continence in obese or called

NOTE Confidence: 0.631037624545454

 $01:18:07.560 \longrightarrow 01:18:09.270$ patients with mid rectal humans.

NOTE Confidence: 0.631037624545454

01:18:09.270 --> 01:18:10.326 We do an impr.

NOTE Confidence: 0.631037624545454

 $01:18:10.326 \longrightarrow 01:18:11.646$ There's very good long term

NOTE Confidence: 0.631037624545454

 $01:18:11.646 \longrightarrow 01:18:12.410$ functional outcomes,

NOTE Confidence: 0.631037624545454

 $01:18:12.410 \longrightarrow 01:18:14.366$ but no one wants it because

NOTE Confidence: 0.631037624545454

01:18:14.366 --> 01:18:15.670 it's a permanent collection.

NOTE Confidence: 0.631037624545454

 $01:18:15.670 \longrightarrow 01:18:17.945$ Now these are for locally advanced diseases.

 $01:18:17.950 \longrightarrow 01:18:19.590$ This is the public separation.

NOTE Confidence: 0.631037624545454

 $01:18:19.590 \longrightarrow 01:18:21.330$ There's different forms of it.

NOTE Confidence: 0.631037624545454

01:18:21.330 --> 01:18:22.890 You have the posterior pelvic

NOTE Confidence: 0.631037624545454

 $01:18:22.890 \longrightarrow 01:18:24.450$ example or complete public extempore.

NOTE Confidence: 0.631037624545454

 $01:18:24.450 \longrightarrow 01:18:25.382$ Both bladder,

NOTE Confidence: 0.631037624545454

01:18:25.382 --> 01:18:27.482 uterus and ***** or removed

NOTE Confidence: 0.631037624545454

01:18:27.482 --> 01:18:28.886 or and then bladder,

NOTE Confidence: 0.631037624545454

 $01:18:28.890 \longrightarrow 01:18:30.426$ prostate and ***** removed.

NOTE Confidence: 0.631037624545454

 $01:18:30.426 \longrightarrow 01:18:33.238$ Here's an example and then we are

NOTE Confidence: 0.631037624545454

 $01:18:33.238 \longrightarrow 01:18:35.443$ mobilizing the bladder and identifying

NOTE Confidence: 0.631037624545454

 $01:18:35.443 \longrightarrow 01:18:37.844$ the dorsal venous plexus ligating it.

NOTE Confidence: 0.631037624545454

 $01:18:37.844 \longrightarrow 01:18:40.350$ Then you know once we ligate we

NOTE Confidence: 0.631037624545454

 $01{:}18{:}40.422 \dashrightarrow 01{:}18{:}42.948$ divide the prostate and the ure thra.

NOTE Confidence: 0.631037624545454

 $01:18:42.950 \longrightarrow 01:18:44.970$ Now it's fully unblocked removed.

NOTE Confidence: 0.631037624545454

 $01:18:44.970 \longrightarrow 01:18:47.358$ So here's. State, water and *****.

01:18:47.360 --> 01:18:49.104 We take it out and usually patients end

NOTE Confidence: 0.631037624545454

 $01:18:49.104 \longrightarrow 01:18:51.114$ up with two colossal and two Oxo makes 1.

NOTE Confidence: 0.631037624545454

 $01:18:51.120 \longrightarrow 01:18:52.820$ There's a colostomy for stool.

NOTE Confidence: 0.631037624545454

01:18:52.820 --> 01:18:55.214 One is a urinary conduit because they

NOTE Confidence: 0.631037624545454

 $01:18:55.214 \longrightarrow 01:18:57.959$ don't have a ladder anymore for your.

NOTE Confidence: 0.631037624545454

 $01:18:57.960 \longrightarrow 01:18:59.256$ The outcomes from these are great.

NOTE Confidence: 0.631037624545454

 $01:18:59.260 \longrightarrow 01:19:01.426$ Five year overall survival is 53%,

NOTE Confidence: 0.631037624545454

 $01:19:01.426 \longrightarrow 01:19:03.502$ so doing a good operation upfront

NOTE Confidence: 0.631037624545454

 $01:19:03.502 \longrightarrow 01:19:05.629$ is better for locally advanced

NOTE Confidence: 0.631037624545454

 $01:19:05.629 \longrightarrow 01:19:07.920$ tumors rather than doing the half

NOTE Confidence: 0.631037624545454

 $01:19:07.920 \longrightarrow 01:19:09.700$ you know half past reception

NOTE Confidence: 0.80942132

 $01:19:09.700 \longrightarrow 01:19:11.779$ and then doing surgery for recurrent cancer,

NOTE Confidence: 0.80942132

 $01:19:11.780 \longrightarrow 01:19:15.188$ survival drops to 20%.

NOTE Confidence: 0.80942132

01:19:15.190 --> 01:19:17.254 Now recurrent cancer because I mentioned

NOTE Confidence: 0.80942132

01:19:17.254 --> 01:19:19.929 that it's beyond the scope of this lecture,

NOTE Confidence: 0.80942132

 $01:19:19.930 \longrightarrow 01:19:21.840$ but it's very difficult because

01:19:21.840 --> 01:19:23.750 you're in extra mesorectal planes,

NOTE Confidence: 0.80942132

 $01{:}19{:}23.750 \longrightarrow 01{:}19{:}25.185$ which means there's a lot of bleeding,

NOTE Confidence: 0.80942132

 $01:19:25.190 \longrightarrow 01:19:26.660$ and it also goes into the

NOTE Confidence: 0.80942132

 $01:19:26.660 \longrightarrow 01:19:27.150$ lateral compartments,

NOTE Confidence: 0.80942132

 $01{:}19{:}27.150 \longrightarrow 01{:}19{:}29.740$ so you think about things like creator.

NOTE Confidence: 0.80942132

 $01:19:29.740 \longrightarrow 01:19:31.552$ And it's very complicated because one

NOTE Confidence: 0.80942132

01:19:31.552 --> 01:19:33.500 year recurrence you have prior surgery,

NOTE Confidence: 0.80942132

 $01:19:33.500 \longrightarrow 01:19:34.300$ radiation fibrosis.

NOTE Confidence: 0.80942132

 $01:19:34.300 \longrightarrow 01:19:36.700$ So these are usually miserable surgeries,

NOTE Confidence: 0.80942132

01:19:36.700 --> 01:19:37.780 but if done right,

NOTE Confidence: 0.80942132

01:19:37.780 --> 01:19:40.170 they can be life saving for the patient.

NOTE Confidence: 0.80942132

01:19:40.170 --> 01:19:41.082 So in conclusion,

NOTE Confidence: 0.80942132

 $01:19:41.082 \longrightarrow 01:19:42.906$ you know rectal surgery is evolving,

NOTE Confidence: 0.80942132

 $01:19:42.910 \longrightarrow 01:19:44.890$ especially with Tony adjuvant therapy.

NOTE Confidence: 0.80942132

 $01:19:44.890 \longrightarrow 01:19:47.398$ Staples have made our life easier.

 $01:19:47.400 \longrightarrow 01:19:50.440$ Functional outcomes are getting better.

NOTE Confidence: 0.80942132

 $01:19:50.440 \longrightarrow 01:19:52.232$ And the goals of treatment for us from

NOTE Confidence: 0.80942132

 $01:19:52.232 \longrightarrow 01:19:54.089$ a certain perspective is local control.

NOTE Confidence: 0.80942132

 $01:19:54.090 \longrightarrow 01:19:55.242$ Improve the survival.

NOTE Confidence: 0.80942132

01:19:55.242 --> 01:19:57.162 Try to preserve the sphincter

NOTE Confidence: 0.80942132

01:19:57.162 --> 01:19:59.120 bladder and sexual function and

NOTE Confidence: 0.80942132

 $01:19:59.120 \longrightarrow 01:20:00.990$ try to improve their quality.

NOTE Confidence: 0.80942132

 $01:20:00.990 \longrightarrow 01:20:03.438$ So if we start off with,

NOTE Confidence: 0.80942132

 $01{:}20{:}03.440 \dashrightarrow 01{:}20{:}05.204$ there were no good surgeries and patient

NOTE Confidence: 0.80942132

 $01:20:05.204 \longrightarrow 01:20:06.930$ had bought bad outcomes then 1980s.

NOTE Confidence: 0.80942132

 $01{:}20{:}06.930 \dashrightarrow 01{:}20{:}08.178$ We made a lot of improvement.

NOTE Confidence: 0.80942132

 $01:20:08.180 \longrightarrow 01:20:10.470$ We then did minimally invasive

NOTE Confidence: 0.80942132

01:20:10.470 --> 01:20:12.050 surgery and now we're going

NOTE Confidence: 0.80942132

01:20:12.050 --> 01:20:13.730 to going back to no surgery,

NOTE Confidence: 0.80942132

01:20:13.730 --> 01:20:16.148 but we're getting better outcomes thanks

NOTE Confidence: 0.80942132

 $01:20:16.148 \longrightarrow 01:20:19.138$ to Mike and Tim and everyone else.

 $01:20:19.140 \longrightarrow 01:20:20.070$ So any questions?

NOTE Confidence: 0.65558160525

 $01:20:23.870 \longrightarrow 01:20:25.950$ Thanks Vicki, I'll pose one of the questions.

NOTE Confidence: 0.65558160525

 $01:20:25.950 \longrightarrow 01:20:27.355$ I'll leave one of the

NOTE Confidence: 0.65558160525

 $01:20:27.355 \longrightarrow 01:20:28.760$ questions posed in the chat.

NOTE Confidence: 0.65558160525

 $01:20:28.760 \longrightarrow 01:20:32.792$ So for clinical low, low digital rectal

NOTE Confidence: 0.65558160525

 $01:20:32.792 \longrightarrow 01:20:36.588$ cancers that are clinically tied to.

NOTE Confidence: 0.65558160525

01:20:36.590 --> 01:20:38.285 Versus instead of just taking

NOTE Confidence: 0.65558160525

 $01{:}20{:}38.285 \dashrightarrow 01{:}20{:}40.556$ the station straight to TME and

NOTE Confidence: 0.65558160525

 $01{:}20{:}40.556 \dashrightarrow 01{:}20{:}42.095$ considering preoperative RTE

NOTE Confidence: 0.65558160525

01:20:42.095 --> 01:20:44.147 followed by Transcendental Decision,

NOTE Confidence: 0.65558160525

 $01:20:44.150 \longrightarrow 01:20:46.022$ what what kind of sway is you for referring

NOTE Confidence: 0.65558160525

 $01:20:46.022 \longrightarrow 01:20:47.527$ this patient like this over to us?

NOTE Confidence: 0.74970366

 $01{:}20{:}48.710 \dashrightarrow 01{:}20{:}50.846$ So for the I mean my personal preference,

NOTE Confidence: 0.74970366

 $01:20:50.850 \longrightarrow 01:20:52.497$ I like to do crazy and all excision see

NOTE Confidence: 0.74970366

01:20:52.497 --> 01:20:54.168 if they have any high risk features.

 $01:20:54.170 \longrightarrow 01:20:56.708$ Because once you do chemo radiation.

NOTE Confidence: 0.74970366

01:20:56.710 --> 01:20:57.796 You won't know if they have

NOTE Confidence: 0.74970366

01:20:57.796 --> 01:20:59.431 any any any of the high risk

NOTE Confidence: 0.74970366

01:20:59.431 --> 01:21:00.587 features like Lancaster invasion.

NOTE Confidence: 0.74970366

 $01:21:00.590 \longrightarrow 01:21:01.900$ Poor differentiation.

NOTE Confidence: 0.74970366

01:21:01.900 --> 01:21:07.140 So personally I think it's much easier and.

NOTE Confidence: 0.74970366

 $01:21:07.140 \longrightarrow 01:21:09.444$ No, it's better to do training

NOTE Confidence: 0.74970366

 $01:21:09.444 \longrightarrow 01:21:10.980$ decision followed by humiliation.

NOTE Confidence: 0.74970366

 $01{:}21{:}10.980 \dashrightarrow 01{:}21{:}12.948$ But some patients do get chemoradiation,

NOTE Confidence: 0.74970366

 $01:21:12.950 \longrightarrow 01:21:16.104$ then come and see us and we are never

NOTE Confidence: 0.74970366

 $01{:}21{:}16.104 \dashrightarrow 01{:}21{:}18.570$ certain if they had any good features

NOTE Confidence: 0.74970366

 $01:21:18.570 \longrightarrow 01:21:21.324$ because sometimes the tumor is gone.

NOTE Confidence: 0.74970366

 $01:21:21.330 \longrightarrow 01:21:22.818$ But in some patients it is an option.

NOTE Confidence: 0.917380915

 $01:21:26.670 \longrightarrow 01:21:27.330$ Thank you.

NOTE Confidence: 0.856953943636364

 $01:21:29.520 \longrightarrow 01:21:30.703$ I think all those questions have to

NOTE Confidence: 0.856953943636364

 $01:21:30.703 \longrightarrow 01:21:32.848$ go on the chat, so feel free to.

01:21:35.160 --> 01:21:38.400 Answered some of them by text, but.

NOTE Confidence: 0.769620958333333

 $01:21:38.400 \longrightarrow 01:21:41.487$ Feel free to put any questions in

NOTE Confidence: 0.769620958333333

01:21:41.487 --> 01:21:43.546 the chat. I don't think anybody

NOTE Confidence: 0.769620958333333

 $01:21:43.546 \longrightarrow 01:21:45.016$ can voice in that question

NOTE Confidence: 0.812649230304348

01:21:45.690 --> 01:21:47.634 Doctor really. I think one of the great

NOTE Confidence: 0.812649230304348

 $01:21:47.634 \longrightarrow 01:21:49.731$ points you brought up a few times during your

NOTE Confidence: 0.812649230304348

01:21:49.731 --> 01:21:52.015 talk is the question of survivorship, right?

NOTE Confidence: 0.812649230304348

 $01:21:52.015 \longrightarrow 01:21:55.879$ And I don't I can be the first person to say

NOTE Confidence: 0.812649230304348

 $01:21:55.879 \longrightarrow 01:21:59.290$ I'm guilty of not doing the best job in that,

NOTE Confidence: 0.812649230304348

01:21:59.290 --> 01:22:01.926 and should we be looking into, you know,

NOTE Confidence: 0.812649230304348

01:22:01.926 --> 01:22:04.152 building sort of more of a survivorship

NOTE Confidence: 0.812649230304348

 $01:22:04.152 \longrightarrow 01:22:06.118$ program for our rectal cancer patients

NOTE Confidence: 0.812649230304348

01:22:06.118 --> 01:22:07.708 in terms of sexual health,

NOTE Confidence: 0.812649230304348

01:22:07.710 --> 01:22:09.738 rectal symptoms, local symptoms,

NOTE Confidence: 0.812649230304348

 $01:22:09.738 \longrightarrow 01:22:12.068$ because they are struggling and

01:22:12.068 --> 01:22:13.856 they don't know that we provide

NOTE Confidence: 0.812649230304348

 $01:22:13.856 \longrightarrow 01:22:15.668$ them the support that they need?

NOTE Confidence: 0.812649230304348

 $01:22:15.670 \longrightarrow 01:22:17.006$ And they come to me and I say,

NOTE Confidence: 0.812649230304348

 $01:22:17.010 \longrightarrow 01:22:17.850$ go see Doctor Reddy.

NOTE Confidence: 0.812649230304348

 $01:22:17.850 \longrightarrow 01:22:19.500$ But that you know that's not helpful.

NOTE Confidence: 0.885892715

01:22:20.960 --> 01:22:23.120 No, so we actually believe it or not.

NOTE Confidence: 0.885892715

 $01:22:23.120 \longrightarrow 01:22:25.304$ After five years we still follow

NOTE Confidence: 0.885892715

01:22:25.304 --> 01:22:27.209 the patients mainly for all

NOTE Confidence: 0.885892715

 $01:22:27.209 \longrightarrow 01:22:28.950$ their other side effects. So

NOTE Confidence: 0.911900501

01:22:28.960 --> 01:22:30.206 do you feel like you're taking that

NOTE Confidence: 0.911900501

 $01:22:30.206 \longrightarrow 01:22:32.545$ on your plate, or can we do something

NOTE Confidence: 0.911900501

01:22:32.545 --> 01:22:34.926 more institutionally to sort of have

NOTE Confidence: 0.911900501

01:22:34.926 --> 01:22:36.958 a better colorectal survivorship,

NOTE Confidence: 0.911900501

01:22:36.960 --> 01:22:39.506 or even just GI in general, right program?

NOTE Confidence: 0.911900501

01:22:39.506 --> 01:22:41.480 Should we enhance that? I mean,

NOTE Confidence: 0.911900501

 $01:22:41.480 \longrightarrow 01:22:42.900$ I think we do a great job with breast,

 $01:22:42.900 \longrightarrow 01:22:44.628$ but not such a good job with GI.

NOTE Confidence: 0.617488312

 $01:22:45.160 \longrightarrow 01:22:47.040$ So we've started our app.

NOTE Confidence: 0.617488312

 $01:22:47.040 \longrightarrow 01:22:49.400$ Have started doing this more OK.

NOTE Confidence: 0.617488312

01:22:49.400 --> 01:22:52.040 Patient patients are happy about this.

NOTE Confidence: 0.617488312

 $01:22:52.040 \longrightarrow 01:22:53.204$ Before we used to say five

NOTE Confidence: 0.617488312

 $01:22:53.204 \longrightarrow 01:22:54.560$ years ago and see us and they,

NOTE Confidence: 0.617488312

01:22:54.560 --> 01:22:56.496 you know they had all kinds of symptoms

NOTE Confidence: 0.617488312

 $01:22:56.500 \longrightarrow 01:22:57.796$ and they didn't know what was going on.

NOTE Confidence: 0.617488312

 $01{:}22{:}57.800 \dashrightarrow 01{:}22{:}59.300$ They would reach out to everyone.

NOTE Confidence: 0.617488312

 $01:22:59.300 \longrightarrow 01:23:00.637$ Used to go on support groups and

NOTE Confidence: 0.617488312

01:23:00.637 --> 01:23:01.810 they they would just complain,

NOTE Confidence: 0.617488312

 $01:23:01.810 \longrightarrow 01:23:03.907$ but now we have made it a point that

NOTE Confidence: 0.617488312

 $01:23:03.907 \longrightarrow 01:23:06.129$ even after five years we followed them.

NOTE Confidence: 0.617488312

 $01:23:06.130 \longrightarrow 01:23:08.686$ They they come and see us once a year.

NOTE Confidence: 0.617488312

01:23:08.690 --> 01:23:09.714 If they're you know,

01:23:09.714 --> 01:23:11.557 if they see no improvement then they

NOTE Confidence: 0.617488312

01:23:11.557 --> 01:23:13.075 kind of disappear on their own,

NOTE Confidence: 0.617488312

01:23:13.080 --> 01:23:13.809 but they still

NOTE Confidence: 0.763909936

01:23:14.190 --> 01:23:15.978 send them all to you. Is what you're saying.

NOTE Confidence: 0.654143741166667

 $01:23:17.420 \longrightarrow 01:23:19.037$ No, even for the annual cancer anal

NOTE Confidence: 0.654143741166667

01:23:19.037 --> 01:23:20.379 cancer with rectal cancer anyway.

NOTE Confidence: 0.717619804

 $01:23:21.930 \longrightarrow 01:23:24.170$ Of chronic symptoms and incontinence.

NOTE Confidence: 0.717619804

01:23:24.170 --> 01:23:26.790 For years, local symptoms,

NOTE Confidence: 0.717619804

 $01{:}23{:}26.790 \dashrightarrow 01{:}23{:}29.081$ urinary symptoms, and I think

NOTE Confidence: 0.717619804

01:23:29.081 --> 01:23:30.716 they struggle on their own,

NOTE Confidence: 0.717619804

 $01:23:30.720 \longrightarrow 01:23:31.605$ so I think that's something

NOTE Confidence: 0.717619804

 $01:23:31.605 \longrightarrow 01:23:32.870$ we need to focus on more as a

NOTE Confidence: 0.556223566

 $01:23:32.880 \longrightarrow 01:23:34.320$ group. The Sack board is.

NOTE Confidence: 0.556223566

 $01:23:34.320 \longrightarrow 01:23:36.132$ We even have patients with cervical

NOTE Confidence: 0.556223566

 $01:23:36.132 \longrightarrow 01:23:37.340$ cancer and prostate cancer.

NOTE Confidence: 0.556223566

01:23:37.340 --> 01:23:38.730 After radiation that we're managing,

01:23:38.740 --> 01:23:40.908 right, right, right, right.

NOTE Confidence: 0.793861154

 $01:23:40.908 \longrightarrow 01:23:43.354$ OK, well, I'm glad for

NOTE Confidence: 0.793861154

 $01:23:43.354 \longrightarrow 01:23:45.258$ your collaboration on that.

NOTE Confidence: 0.793861154

01:23:45.260 --> 01:23:47.630 Do you routinely?

NOTE Confidence: 0.5710971

01:23:47.630 --> 01:23:50.282 Therapy for like 12 floor physical

NOTE Confidence: 0.5710971

 $01:23:50.282 \longrightarrow 01:23:51.708$ therapy? Uh, that's already.

NOTE Confidence: 0.912942789375

 $01:23:53.110 \longrightarrow 01:23:55.382$ So that's a little bit more difficult because

NOTE Confidence: 0.912942789375

 $01:23:55.382 \longrightarrow 01:23:57.915$ it has to be based on insurance companies.

NOTE Confidence: 0.912942789375

 $01:23:57.920 \longrightarrow 01:23:59.915$ Pelvic floor therapy does help the patients.

NOTE Confidence: 0.6134629682

 $01:24:01.970 \longrightarrow 01:24:03.590$ Sacral nerve modulation helps patients

NOTE Confidence: 0.6134629682

 $01:24:03.590 \longrightarrow 01:24:05.210$ with low interior section syndrome.

NOTE Confidence: 0.6134629682

 $01:24:05.210 \longrightarrow 01:24:06.615$ The problem with that is

NOTE Confidence: 0.6134629682

01:24:06.615 --> 01:24:08.020 that you have to implant.

NOTE Confidence: 0.6134629682

 $01:24:08.020 \longrightarrow 01:24:09.580$ This device and they can't get

NOTE Confidence: 0.6134629682

 $01:24:09.580 \longrightarrow 01:24:11.456$ MRI's after so a lot of patients

 $01:24:11.456 \longrightarrow 01:24:13.016$ don't don't want to go for

NOTE Confidence: 0.6134629682

 $01:24:13.016 \longrightarrow 01:24:14.657$ that at least for five years.

NOTE Confidence: 0.6134629682

 $01:24:14.660 \longrightarrow 01:24:16.250$ We don't want to do it.

NOTE Confidence: 0.6134629682

 $01:24:16.250 \longrightarrow 01:24:17.680$ A lot of times trouble

NOTE Confidence: 0.92935502

01:24:17.690 --> 01:24:21.225 with who does pelvic floor therapy here?

NOTE Confidence: 0.92935502

01:24:21.230 --> 01:24:26.825 We do. OK, I can't figure out how to

NOTE Confidence: 0.92935502

 $01:24:26.825 \longrightarrow 01:24:29.050$ put the referral in. Private world

NOTE Confidence: 0.790497993571429

 $01:24:29.280 \longrightarrow 01:24:32.136$ send them to us so we get manometry

NOTE Confidence: 0.790497993571429

 $01:24:32.136 \longrightarrow 01:24:34.070$ and everything with GI and then

NOTE Confidence: 0.76988206

 $01:24:34.620 \longrightarrow 01:24:35.916$ so they can come to colorectal.

NOTE Confidence: 0.76988206

 $01{:}24{:}35.920 \dashrightarrow 01{:}24{:}37.066$ OK so that's great to know.

NOTE Confidence: 0.782521528761905

01:24:38.500 --> 01:24:40.810 One thing we're trying to do

NOTE Confidence: 0.782521528761905

 $01:24:40.810 \longrightarrow 01:24:43.290$ is actually and and mind you

NOTE Confidence: 0.782521528761905

 $01:24:43.290 \longrightarrow 01:24:45.846$ is trying to advocate for Cdr

NOTE Confidence: 0.782521528761905

 $01:24:45.846 \longrightarrow 01:24:48.432$ diagnosis code for a large so that.

NOTE Confidence: 0.782521528761905

 $01:24:48.432 \longrightarrow 01:24:49.844$ You know there's no

 $01:24:51.160 \longrightarrow 01:24:51.858$ official code.

NOTE Confidence: 0.796467184090909

01:24:51.858 --> 01:24:54.301 But I think that that's more directed

NOTE Confidence: 0.796467184090909

01:24:54.301 --> 01:24:55.996 pelvic floor therapy because there

NOTE Confidence: 0.796467184090909

 $01:24:55.996 \longrightarrow 01:24:58.450$ is someone like in YPB who does it.

NOTE Confidence: 0.796467184090909

 $01:24:58.450 \longrightarrow 01:25:00.410$ But then I send the patients and they

NOTE Confidence: 0.796467184090909

01:25:00.410 --> 01:25:01.721 don't understand the issues, right?

NOTE Confidence: 0.796467184090909

01:25:01.721 --> 01:25:03.347 So patient comes back and they're

NOTE Confidence: 0.796467184090909

 $01:25:03.347 \longrightarrow 01:25:04.470$ like what was that?

NOTE Confidence: 0.796467184090909

01:25:04.470 --> 01:25:05.478 It didn't help me at all,

NOTE Confidence: 0.7579907125

 $01:25:05.810 \longrightarrow 01:25:07.091$ and not only that, some of the

NOTE Confidence: 0.7579907125

 $01:25:07.091 \longrightarrow 01:25:08.429$ problems that they use are very

NOTE Confidence: 0.7579907125

01:25:08.429 --> 01:25:09.176 uncomfortable for patients,

NOTE Confidence: 0.7579907125

 $01:25:09.180 \longrightarrow 01:25:11.500$ especially had radiation treatment.

NOTE Confidence: 0.674535825714286

01:25:11.630 --> 01:25:13.070 That right they don't understand the

NOTE Confidence: 0.674535825714286

 $01{:}25{:}13.070 \dashrightarrow 01{:}25{:}14.340$ concepts? OK, that's great to know.

 $01:25:17.200 \longrightarrow 01:25:18.859$ The one that the one of the

NOTE Confidence: 0.825889595238095

01:25:18.859 --> 01:25:20.481 questions in the chat doctor Reddy

NOTE Confidence: 0.825889595238095

 $01:25:20.481 \longrightarrow 01:25:22.191$ is have you started adopting a

NOTE Confidence: 0.825889595238095

01:25:22.191 --> 01:25:23.681 wait and weight watch approach?

NOTE Confidence: 0.825889595238095

 $01:25:23.681 \longrightarrow 01:25:24.989$ Wasn't waiting approach included

NOTE Confidence: 0.825889595238095

01:25:24.989 --> 01:25:26.930 patients who are surgical candidates?

NOTE Confidence: 0.73660856

01:25:29.070 --> 01:25:32.479 It's a it makes me very nervous, but we have.

NOTE Confidence: 0.82869315

01:25:35.000 --> 01:25:38.200 Sadly, I'm still if if someone who's

NOTE Confidence: 0.82869315

01:25:38.200 --> 01:25:40.996 40 comes in, chances are we don't

NOTE Confidence: 0.82869315

01:25:40.996 --> 01:25:42.916 follow away from watch approach.

NOTE Confidence: 0.82869315

 $01:25:42.920 \longrightarrow 01:25:45.958$ We do advocate for them even a

NOTE Confidence: 0.82869315

 $01:25:45.958 \longrightarrow 01:25:47.491$ couple of times we have gotten burned

NOTE Confidence: 0.82869315

01:25:47.491 --> 01:25:49.078 for some patients who have had

NOTE Confidence: 0.82869315

 $01:25:49.078 \longrightarrow 01:25:50.680$ treatment somewhere else and we have,

NOTE Confidence: 0.82869315

 $01:25:50.680 \longrightarrow 01:25:53.130$ you know they have seen local recurrences.

NOTE Confidence: 0.82869315

 $01:25:53.130 \longrightarrow 01:25:54.285$ And we have taken care of them.

01:25:54.290 --> 01:25:56.404 It's not that they did anything wrong.

NOTE Confidence: 0.82869315

 $01:25:56.410 \longrightarrow 01:25:56.900$ Sometimes patients,

NOTE Confidence: 0.82869315

 $01:25:56.900 \longrightarrow 01:25:58.370$ when they see a local recurrence,

NOTE Confidence: 0.82869315

 $01:25:58.370 \longrightarrow 01:26:00.372$ they kind of get upset with the with

NOTE Confidence: 0.82869315

 $01:26:00.372 \longrightarrow 01:26:01.786$ the people locally because they say oh,

NOTE Confidence: 0.82869315

 $01:26:01.790 \longrightarrow 01:26:03.440$ and that's why we didn't show

NOTE Confidence: 0.82869315

 $01:26:03.440 \longrightarrow 01:26:05.249$ it and you missed the cancer.

NOTE Confidence: 0.82869315

 $01:26:05.250 \longrightarrow 01:26:05.560$ What's

NOTE Confidence: 0.854355522

01:26:05.570 --> 01:26:07.170 been your experience with salvage?

NOTE Confidence: 0.854355522

 $01:26:07.170 \longrightarrow 01:26:08.290$ For those patients with?

NOTE Confidence: 0.774360371892857

01:26:09.280 --> 01:26:12.214 So if you get them in time so it's

NOTE Confidence: 0.774360371892857

 $01:26:12.214 \longrightarrow 01:26:14.392$ interesting to patients who have had

NOTE Confidence: 0.774360371892857

 $01{:}26{:}14.392 \dashrightarrow 01{:}26{:}16.602$ endoscopy and the and the pathology

NOTE Confidence: 0.774360371892857

01:26:16.602 --> 01:26:19.143 has shown no tumor in the wall,

NOTE Confidence: 0.774360371892857

01:26:19.150 --> 01:26:20.715 those patients are more reticent

 $01:26:20.715 \longrightarrow 01:26:22.830$ to go for a radical surgery.

NOTE Confidence: 0.774360371892857

 $01:26:22.830 \longrightarrow 01:26:25.042$ So even if the MRI shows something

NOTE Confidence: 0.774360371892857

 $01:26:25.042 \longrightarrow 01:26:26.950$ because the MRI will always say

NOTE Confidence: 0.774360371892857

01:26:26.950 --> 01:26:29.029 it can't rule out tumor or they

NOTE Confidence: 0.774360371892857

01:26:29.098 --> 01:26:31.246 you know they're kind of nebulous,

NOTE Confidence: 0.774360371892857

01:26:31.250 --> 01:26:33.110 patients don't go for surgery,

NOTE Confidence: 0.774360371892857

 $01:26:33.110 \longrightarrow 01:26:35.360$ especially if it's an APR.

NOTE Confidence: 0.774360371892857

01:26:35.360 --> 01:26:36.510 But those patients,

NOTE Confidence: 0.774360371892857

 $01:26:36.510 \longrightarrow 01:26:38.390$ unfortunately they come with

NOTE Confidence: 0.774360371892857

01:26:38.390 --> 01:26:39.800 locally advanced disease,

NOTE Confidence: 0.774360371892857

 $01:26:39.800 \longrightarrow 01:26:40.952$ like they're circumferential

NOTE Confidence: 0.774360371892857

 $01:26:40.952 \longrightarrow 01:26:41.720$ resection margins.

NOTE Confidence: 0.774360371892857

01:26:41.720 --> 01:26:43.760 I mean, we had someone who had a

NOTE Confidence: 0.774360371892857

01:26:43.760 --> 01:26:45.300 complete who done it memorial,

NOTE Confidence: 0.774360371892857

 $01:26:45.300 \longrightarrow 01:26:48.667$ who almost had a near complete response.

NOTE Confidence: 0.774360371892857

 $01:26:48.670 \longrightarrow 01:26:51.470$ After about a year started having symptoms.

01:26:51.470 --> 01:26:53.350 Endoscopy biopsy didn't show anything.

NOTE Confidence: 0.774360371892857

 $01:26:53.350 \longrightarrow 01:26:55.020$ One of our endoscopies actually

NOTE Confidence: 0.774360371892857

 $01:26:55.020 \longrightarrow 01:26:56.690$ did a deeper biopsy because

NOTE Confidence: 0.774360371892857

01:26:56.752 --> 01:26:58.337 I couldn't convince the guy.

NOTE Confidence: 0.774360371892857

01:26:58.340 --> 01:26:58.980 Found cancer,

NOTE Confidence: 0.774360371892857

 $01:26:58.980 \longrightarrow 01:27:00.900$ he had a 10 centimeter lesion

NOTE Confidence: 0.774360371892857

 $01:27:00.900 \longrightarrow 01:27:02.424$ with all circumferential resection

NOTE Confidence: 0.774360371892857

 $01:27:02.424 \longrightarrow 01:27:04.866$ margins positive and he did not

NOTE Confidence: 0.774360371892857

 $01:27:04.866 \longrightarrow 01:27:07.040$ want the public's information.

NOTE Confidence: 0.774360371892857

01:27:07.040 --> 01:27:08.864 It was positive on the prostate

NOTE Confidence: 0.774360371892857

01:27:08.864 --> 01:27:10.744 so you know this this survival

NOTE Confidence: 0.774360371892857

 $01:27:10.744 \longrightarrow 01:27:11.928$ is going to be

NOTE Confidence: 0.777209975

 $01:27:12.840 \longrightarrow 01:27:13.980$ and what I found too is,

NOTE Confidence: 0.777209975

 $01{:}27{:}13.980 \longrightarrow 01{:}27{:}16.542$ I think promising a patient the

NOTE Confidence: 0.777209975

01:27:16.542 --> 01:27:18.757 option of watchful waiting up

 $01:27:18.757 \longrightarrow 01:27:20.516$ front is challenging because they

NOTE Confidence: 0.777209975

 $01{:}27{:}20.516 \dashrightarrow 01{:}27{:}22.460$ say this was proposed to me as an

NOTE Confidence: 0.777209975

 $01{:}27{:}22.520 \dashrightarrow 01{:}27{:}24.464$ option or read about it and I always

NOTE Confidence: 0.777209975

 $01:27:24.464 \longrightarrow 01:27:26.407$ tell them we need to wait to see

NOTE Confidence: 0.777209975

 $01:27:26.407 \longrightarrow 01:27:28.004$ what your response is to the rapy.

NOTE Confidence: 0.777209975

 $01:27:28.004 \longrightarrow 01:27:29.664$ We cannot commit to this.

NOTE Confidence: 0.777209975

01:27:29.670 --> 01:27:30.591 Day one, right?

NOTE Confidence: 0.777209975

 $01:27:30.591 \longrightarrow 01:27:32.740$ So I think that needs to be

NOTE Confidence: 0.777209975

 $01:27:32.816 \longrightarrow 01:27:34.460$ made clear to patients.

NOTE Confidence: 0.711509165

01:27:35.190 --> 01:27:36.720 And all of that, I mean, how many pay?

NOTE Confidence: 0.711509165

 $01{:}27{:}36.720 \dashrightarrow 01{:}27{:}38.396$ I mean, we have patients who.

NOTE Confidence: 0.711509165

 $01:27:38.396 \longrightarrow 01:27:40.639$ I mean you know this because they

NOTE Confidence: 0.711509165

 $01{:}27{:}40.639 \dashrightarrow 01{:}27{:}42.662$ all complain to you because I do

NOTE Confidence: 0.711509165

 $01:27:42.662 \longrightarrow 01:27:44.628$ a rectal exam after radiation.

NOTE Confidence: 0.711509165

01:27:44.630 --> 01:27:45.830 And they're like, oh,

NOTE Confidence: 0.711509165

 $01:27:45.830 \longrightarrow 01:27:47.030$ I can't tolerate this.

01:27:47.030 --> 01:27:50.326 And if you can't do a rectal exam,

NOTE Confidence: 0.711509165

 $01{:}27{:}50.330 \dashrightarrow 01{:}27{:}51.662$ I think watching weight is out

NOTE Confidence: 0.711509165

 $01:27:51.662 \longrightarrow 01:27:53.480$ of the out of the. It's not

NOTE Confidence: 0.757273777142857

 $01:27:53.490 \longrightarrow 01:27:55.090$ right? It's clear that there's

NOTE Confidence: 0.757273777142857

01:27:55.090 --> 01:27:56.180 residual disease, right?

NOTE Confidence: 0.77708846

 $01:27:56.250 \longrightarrow 01:27:58.038$ No even if there is not

NOTE Confidence: 0.77708846

 $01:27:58.038 \longrightarrow 01:27:59.500$ residual disease, it's

NOTE Confidence: 0.7433399104

01:28:00.370 --> 01:28:01.585 that they're not that you're

NOTE Confidence: 0.7433399104

 $01:28:01.585 \longrightarrow 01:28:02.800$ not able to surveil them.

NOTE Confidence: 0.7433399104

 $01:28:02.800 \longrightarrow 01:28:04.250$ Is what you're saying right?

NOTE Confidence: 0.7433399104

01:28:04.250 --> 01:28:05.218 Yeah, I got that.

NOTE Confidence: 0.74954887176

 $01{:}28{:}06.360 \dashrightarrow 01{:}28{:}09.249$ Yeah, I think you know my view is we'll

NOTE Confidence: 0.74954887176

 $01:28:09.249 \longrightarrow 01:28:11.877$ we'll see the final results from the

NOTE Confidence: 0.74954887176

 $01{:}28{:}11.877 \dashrightarrow 01{:}28{:}15.071$ Oprah trial and offer trial and get

NOTE Confidence: 0.74954887176

 $01:28:15.071 \longrightarrow 01:28:17.550$ different pronunciations before before.

 $01:28:17.550 \longrightarrow 01:28:21.720$ I think this gets more mainstream.

NOTE Confidence: 0.62238383

 $01{:}28{:}23.040 \to 01{:}28{:}24.790$ Moving our program forward right?

NOTE Confidence: 0.62238383

 $01:28:24.790 \longrightarrow 01:28:26.986$ We should probably start to consider

NOTE Confidence: 0.62238383

 $01:28:26.986 \longrightarrow 01:28:29.100$ this more for select patients.

NOTE Confidence: 0.818789692857143

 $01:28:30.450 \longrightarrow 01:28:32.280$ And now I mean we're seeing

NOTE Confidence: 0.818789692857143

 $01:28:32.280 \longrightarrow 01:28:33.816$ complete response rates of close

NOTE Confidence: 0.818789692857143

01:28:33.816 --> 01:28:35.586 to like 30\%, right, right?

NOTE Confidence: 0.818789692857143

 $01:28:35.586 \longrightarrow 01:28:38.406$ I mean, compared to 10 to 15%?

NOTE Confidence: 0.818789692857143

01:28:38.410 --> 01:28:40.420 I mean, back then I used to only feel bad

NOTE Confidence: 0.818789692857143

 $01:28:40.477 \longrightarrow 01:28:44.048$ 10 to 15% of the time that I did an APR.

NOTE Confidence: 0.818789692857143

 $01:28:44.050 \longrightarrow 01:28:45.338$ And there's no cancer.

NOTE Confidence: 0.818789692857143

 $01:28:45.338 \longrightarrow 01:28:47.948$ Now I gotta feel worse 30% of the time.

NOTE Confidence: 0.818789692857143

01:28:47.948 --> 01:28:48.980 I feel worse, right?

NOTE Confidence: 0.915972428

 $01:28:54.380 \longrightarrow 01:28:56.170$ Other questions from the group.

NOTE Confidence: 0.637048735

01:28:58.520 --> 01:29:00.836 Got 21, you're still holding on.

NOTE Confidence: 0.703625002818182

01:29:03.020 --> 01:29:06.480 Oh, that we we did set this to go until 8:30,

 $01:29:06.480 \longrightarrow 01:29:08.640$ but I think the goal was about 30 minutes

NOTE Confidence: 0.703625002818182

 $01{:}29{:}08.640 \dashrightarrow 01{:}29{:}10.597$ per presentation with questions so.

NOTE Confidence: 0.703625002818182

 $01:29:10.600 \longrightarrow 01:29:13.855$ So we are at around 8:00 o'clock.

NOTE Confidence: 0.703625002818182

01:29:13.860 --> 01:29:16.698 If anyone has any burning questions,

NOTE Confidence: 0.703625002818182

 $01:29:16.700 \longrightarrow 01:29:17.932$ you can either put it in the

NOTE Confidence: 0.703625002818182

01:29:17.932 --> 01:29:19.139 chat before I finish talking,

NOTE Confidence: 0.703625002818182

01:29:19.140 --> 01:29:20.019 really finish talking,

NOTE Confidence: 0.703625002818182

 $01:29:20.019 \longrightarrow 01:29:21.777$ or you can email us directly.

NOTE Confidence: 0.703625002818182

 $01:29:21.780 \longrightarrow 01:29:25.400$ Of course our emails are

NOTE Confidence: 0.703625002818182

 $01{:}29{:}25.400 \dashrightarrow 01{:}29{:}25.691$ ourfirstname.lastname@yale.edu

NOTE Confidence: 0.703625002818182

 $01:29:25.691 \longrightarrow 01:29:27.146$ and on on the website.

NOTE Confidence: 0.84685911

01:29:28.430 --> 01:29:31.960 Happy to communicate. Parting words,

NOTE Confidence: 0.84685911

 $01{:}29{:}31.960 \dashrightarrow 01{:}29{:}33.560$ thank you for organizing this.

NOTE Confidence: 0.84685911

 $01:29:33.560 \longrightarrow 01:29:34.400$ I think it was great.

NOTE Confidence: 0.921940603333333

 $01:29:35.830 \longrightarrow 01:29:36.340$ Thank you Mike.

01:29:40.170 --> 01:29:42.375 Thank you all. Have a great night.

NOTE Confidence: 0.884959166666667

01:29:44.860 --> 01:29:49.000 See you soon. Alright, take care bye bye.