

Transanal total mesorectal excision for rectal cancer

Information for the public

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This procedure can only be done as part of a research study. This is because there is not enough evidence to be sure how safe it is.

Your healthcare professional should talk to you about the research.

Rectal cancer affects the end part of the bowel (rectum). In this procedure, the whole rectum is removed (total mesorectal excision). This is done using instruments introduced through the anus (transanal) and by keyhole surgery through the abdomen. The aim is to remove all the cancer.

The [NHS website](#) may have information on your condition and treatment options.

Is this procedure right for me?

You should be included in [making decisions about your care](#).

Your healthcare professionals should explain the risks and benefits of this procedure and how it is done. They should discuss your options and listen carefully to your views and concerns. They should offer you more information about the procedure. Your family or carers can be involved if you want or need them to be.

You will be asked to decide whether you agree (consent) to have the procedure. Find out more about [giving consent to treatment on the NHS website](#).

Some questions to think about

- How many appointments will I need?
- What are the possible benefits? How likely am I to get them?
- What are the risks or side effects? How likely are they?
- Will I have to stay in hospital?
- What happens if it does not work or something goes wrong?
- What happens if I do not want the procedure?
- Are other treatments available?

More information

- [NICE's information on HealthTech guidance](#) explains what HealthTech is and how we assess it.
- [NICE's information on HealthTech recommendations](#) explains what only in research means.

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