

## Clinical Image

# Fecal Carcinogenesis

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Looking at the incidence of colorectal carcinoma in various parts of the lower gastrointestinal tract, one notes that the area's most affected are the rectum, sigmoid colon and cecum with decreasing frequency [1]. Would it not be logical to attribute the higher incidence in the dependent parts of the lower gastrointestinal tract to the probable carcinogenic effect of feces? Simply put, the longer feces stagnate in the system, the higher the incidence of carcinoma. Could this not at least partially explain the higher incidence of colorectal carcinoma in developed countries where constipation is not an uncommon phenomenon [2,3] at least in part due to a low-roughage diet.

## References

1. Mella J, Biffin A, Radcliffe A, Stamatakis J, Steele R. Population-based audit of colorectal cancer management in two UK health regions. *Br J Surg*. 1997; 84: 1731-1736.
2. Center MM, Jemal A, Smith RA, Ward E. Worldwide variations in colorectal cancer. *CA: a cancer journal for clinicians*. 2009; 59: 366-378.
3. Jones R, Britten N, Culpepper L, Gass D, Mant D, Grol R. *Oxford textbook of primary medical care*. Springer; 2005.