

Cases Of Rectum Cancer Patients Based On Characteristics (Literature Study)

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Article Info	ABSTRACT
Keywords: characteristics, rectal cancer	Colorectal or rectal cancer is cancer that grows and develops in the rectum or what is better known among the public as the large intestine or rectum. Studies conducted so far have provided evidence that rectal cancer sufferers are increasing every year. However, although there has been several studies on rectal cancer in Indonesia, including in the Makassar region, there are still significant knowledge gaps that need to be filled. Quantitative research method with a literature review approach. The results and conclusions of research found from 20 journals or articles show that the characteristics of rectal cancer patients can be categorized as age, gender, lifestyle and management.
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INTRODUCTION

Cancer is a disease that poses a serious threat to sufferers. The lack of public knowledge about various aspects of cancer, such as risk factors, symptoms, early detection methods, and treatment options that must be made makes cancer one of the diseases with the death rate and sufferers always increasing every year. Rectal cancer is an intestinal disease that has an increasing number of sufferers from year to year. Even though current advances are increasingly innovating with various treatments and medical procedures, individual awareness is needed in preventing and understanding the characteristics of someone suffering from this disease.

Rectal cancer is cancer that grows and develops in the rectum or what is better known among the public as the large intestine or rectum, depending on the origin of the tumor. Colon cancer and rectal cancer are often grouped together because they have many similarities in their characteristics (Team, 2020). Rectal cancer is a clinical entity that poses a significant burden to global society and has been the subject of intensive research by researchers and practitioners in the health sector. Epidemiologically, according to Lotfollahzadeh et al., 2023, rectal cancer is the second most common colon cancer with a percentage of 28% after proximal colon cancer which has a percentage of 48%.

Colorectal or rectal cancer itself is the third most common type of cancer in men and the second most common type of cancer in women. In the United States, colorectal cancer is also the third leading cause of cancer deaths, with an estimated number of deaths of 50,260

per year (Fazeli & Keramati, 2015). Then it was found that the highest incidence rate was not only in the United States, people in Australia and New Zealand also suffered from this disease, namely, 448.8 cases of rectal cancer out of 100,000 population in men and 32.2 cases per 100,000 of the population occurs in women. The lowest incidence rates were reported in West Africa, namely 4.5 and 3.8 cases per 100,000 population in men and women, respectively (Araghi et al., 2019). In 2020, according to GLOBOCAN (Global Cancer Observatory) of the World Health Organization (WHO), the incidence of rectal cancer in Indonesia is estimated to be as high as 16,059 cases or 4% of all cancers and in the same year cancer deaths amounted to 8.34, accounting for 3.6% of all cancer deaths. This shows that the incidence rate is higher in industrialized countries than in developing countries.

Based on these incidence figures, the public is expected to have accurate knowledge about healthy lifestyles that can reduce the risk of developing cancer, such as maintaining a balanced diet, exercising regularly, avoiding smoking, and reducing alcohol consumption. Apart from that, ideal conditions also include high awareness of the importance of cancer screening, both through routine medical tests and participation in screening programs provided by the government or health institutions. The public is expected to have adequate knowledge about the early signs and symptoms of cancer. Because there should be no age limit for someone who gets cancer. According to Siegel et al (2020), the most common age of rectal cancer sufferers is less than 65 years old and in people over 65 years old, the rectum has a proportion of 23% of all colorectal cancer locations. In Indonesia, most people with colorectal cancer are under 50 years old namely, around 51% of all patients under 40 years old reaching 28.17% (Lubis et al., 2015).

The initial symptoms for someone suffering from colorectal cancer begin with a lump or adenoma polyp, and along with an irregular lifestyle and eating pattern, the lump then enlarges into a tumor (Indonesian Cancer Foundation, 2018). Adenoma polyps, the most common type, arise from glandular cells and produce mucus to lubricate the colon and rectum. Without proper treatment, the risk of adenoma turning into cancer. Cancer that grows from the inner wall of the colorectum is known as adenocarcinoma, these cancer cells have the ability to spread into blood vessels, lymphatic glands and other tissues (American Cancer Society, 2019). In general, the development of colorectal cancer is the result of interactions between environmental factors and genetic factors. Factors that cannot be changed include a history of colorectal cancer or adenoma polyps in the person and family, as well as a history of chronic inflammatory bowel disease (National Cancer Prevention Committee, 2018).

The Makassar region, as the center of urbanization in South Sulawesi, has an important role as a medical referral center for Eastern Indonesia. Among the three general hospital referral centers, DR Hospital. Wahidin Sudirohusodo recorded medical records of patients with colorectal cancer during the 2013-2015 period. In 2013, there were 124 cases of patients undergoing hospitalization, but this figure decreased to 113 cases in 2014, then increased again to 240 cases in 2015. Meanwhile, based on the medical records of Hasanuddin University Teaching Hospital, 19 cases were recorded. patients undergoing inpatient treatment in 2014, while outpatient and chemotherapy cases reached 26 cases. In

2015, there were 19 cases of patients undergoing outpatient chemotherapy during a six month period.

Studies conducted so far have provided evidence that rectal cancer sufferers are increasing every year. However, although there has been several studies on rectal cancer in Indonesia, including in the Makassar region, there are still significant knowledge gaps that need to be filled. Analysis of recent epidemiological data shows a substantial increase in the number of rectal cancer cases in urban areas. However, detailed information about the characteristics of rectal cancer sufferers. Therefore, the author is interested in writing a literature review article with the title "Characteristics of Rectal Cancer Patients". Health in treating rectal cancer, as well as being the basis for developing more effective prevention, diagnosis and treatment strategies. Apart from that, the findings from this research can also be the basis for improving health policies related to the prevention and management of rectal cancer at the local and national level.

METHODS

The research used a literature review which is a description of theories, findings and other research articles obtained from reference materials to serve as a research basis (O'Connor, A., Sargeant, J. and Wood, 2017). The steps in creating a literature review are (1) selecting the topic to be reviewed, (2) tracking and selecting appropriate/relevant articles, (3) conducting literature analysis and synthesis and (4) organizing the writing of the review. The data sources used in the research are secondary data taken from several articles in accredited international and national journals, based on databases from various references, such as: full text research results and research journal articles in the last 10 years.

RESULTS

Table 1. Results of literature research

Author	Tittle	Method	Result
Wahyuni Syukuriah Tatuhey, Helfi Nikijuluw, Josepina Mainase (2014)	Characteristics of Colorectal Cancer at RSUD Dr. M Haulussy Ambon Period January 2012–June 2013	Retrospective descriptive	Colorectal cancer increased to 29 cases compared to the 2010–2011 period which only had 10 cases. The lowest proportion based on age is under 40 years old (13.8%) and the highest proportion is aged 40–50 years (34.5%). The highest proportion by gender is female (69%). Proportion Based on tumor location, the most common is the rectum (69%)
Shiyam Kumar, Ikram A Burney, Khawaja Farhan Zahid, Philomena	Colorectal Cancer Patient Characteristics, Treatment and Survival in Oman - a Single Center Study	Retrospective descriptive	162 patients were diagnosed with colorectal cancer and the majority were men, 95 or 58.6% of the patients, while the average age range was 51-60 years with 45 or

Author	Tittle	Method	Result
Charlotte D Souza, dkk (2015)			27.8% of the patients. Treatment or care given was according to the stage but median recurrence-free survival was 22 months, median overall survival for all patients was 43 months and overall survival (OS) of 5 years was observed for stages I, II and III are 100%, 60% and 60% respectively.
Jiao Yang, Xiang Lin Du, Biyuan Wang, Yin Ying Wu Yang, dkk (2016)	Characteristics of Differently Located Colorectal Cancers Support Proximal and Distal Classification: A Population-Based Study of 57,847 Patients	Cox proportional hazards regression	The study included 57,847 patients: 43.5% with RCC, 37.7% with LCC, and 18.8% with ReC. Compared with LCC and ReC, RCC is more likely to affect elderly patients and women who are at an advanced stage, poorly differentiated or undifferentiated, and mucinous. Patients with LCC or ReC had better DSS than patients with RCC in subgroups including stage III or IV disease, age 70 years and non-mucinous adenocarcinoma. In contrast, patients with LCC or ReC had worse DSS than patients with RCC in subgroups including age >70 years and mucinous adenocarcinoma.
Nata Pratama Hardjo Lugito, Leni Lukman, andree Kurniawan, dkk (2016)	Clinical Characteristics of Young Indonesian Colorectal Cancer Patients: A Preliminary Study	Cross sectional	There were 5 (35.7%) CRC cases under 40 years of age and 9 (64.3%) over 40 years. The most frequent symptom was constipation, followed by bloody diarrhea at 57.1% and 42.9%. Bloody diarrhea and constipation occurred in 2 and 6, as well as 3 and 3 young and old patients. There were 2 (14.2%) young patients with a history of internal cancer family, while the elderly patient was absent. Tumor location in 4 (28.5%)
Author	Tittle	Method	Result
			in the ascending colon in 2 and 2

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			young and old patients, 3 (21.7%) in the descending colon in 2 and 1 in young and old patients, 8 (57.1%) in the rectum in 2 and 6 young and old patients. One young patient had diabetes, and another young patient was Clostridium difficile positive antigens and toxins.
Akiko Tamakoshia, Koshi Nakamura, Shigezekj Ukawa, Erniko Okada, dkk (2017)	Characteristics and prognosis of Japanese colorectal cancer patients: The BioBank Japan Project	Survei	Colorectal cancer sufferers registered with BioBank Japan (BBJ) from 2003 - 2008 were 2165 women and 3,699 men. More than 95% of the histological types are adenocarcinoma in both colon and rectal cancer. Patients with rectal cancer tend to consume more meat and fewer green leafy vegetables compared with colon cancer patients. The 5-year cumulative survival rate for colon cancer was 73.0% with a 95% confidence interval between 70.1% to 75.7%, while for rectal cancer it was 73.3% with a 95% confidence interval between 69.1% up to 77.0%. The 5-year relative survival rate for both was 80.6% for colon cancer large and 80.9% for rectal cancer
Jerhi Wahyu Fernanda, Pebrianty, Endah Retnani Wisnaningsih (2018)	Prediction of Survival of Colorectal Cancer Patients Using Artificial Neural Networks (Artificial Neural Networks)	Observational analytic and retrospective cohorts	The research results showed that around 45.7% of colorectal cancer patients survived for 3 years after diagnosis, with a median survival of 5-6 months. This means that half of these patients died in the 5th to 6th month.
Mutiara Rahma Dianty, Ismet	Neural Networks)	Descriptive	The results of research carried out regarding colorectal cancer sufferers in the Anatomy Pathology Section of Al-Islam

Author	Tittle	Method	Result
M. Nur, Widayanti Dianty, dkk (2018)			Hospital Bandung for the period January 2012-December 2017 found that there were 61 cases, the most cases of which occurred in 2014 and the least in 2017. In colorectal cancer at the hospital Al-Islam Bandung states that there are more women than men and the age range is 51-60 years. The majority of colorectal cancer patients in the Anatomy Pathology Department of Al-Islam Hospital Bandung have a histopathological picture of well differentiated mucinous adenocarcinoma and the most common predilection location in Adenocarcinoma colorectal cancer patients occurs in the rectum

Author	Tittle	Method	Result
Kevin Putra Pratama dan Albertus Ari Adrianto (2019)	Factors that Influence the Incidence of Stage III Colorectal Cancer at DR Kariadi General Hospital, Semarang	Descriptive analytics	During the 2012-2017 period, there were 60 subjects who met the research inclusion criteria. The results of the analysis showed that age, gender, tumor location, histopathological examination, chemotherapy, and blood transfusion did not have a significant correlation. However, the stage of the primary tumor, lymph node enlargement, and levels of Carcinoembryonic Antigen (CEA) in serum showed a significant relationship. The results of the logistic regression test confirm that Primary tumor stage has a significant relationship

Author	Title	Method	Result
Nuridah, Ariyanti Saleh, dan Cahyono Kaelan Nuridah (2019)	Depression is Associated with the Quality of Life of Colorectal Cancer Patients in Makassar City Hospital.	Pre experimental correlation descriptive and cross sectional study	The results of the study showed that there was a relationship between fatigue and depression and the quality of life of colorectal cancer sufferers ($p < 0.05$). Apart from that, there are differences in marital status which are also related to the quality of life of colorectal cancer sufferers ($p < 0.05$). Through a linear regression test, it was found that depression is factors most associated with quality of life in colorectal cancer sufferers ($p < 0.05$)
Nebert Lulabuka, Nazima Dharsee, Crispin Kahase, Oscar Kivike (2019)	Clinical-Pathological Characteristics of Colorectal Carcinoma and Factors Influence 2-Years Survival among Patients Attending Ocean Road Cancer Institute Dar es Salaam Tanzania	Cross-sectional	Of the 100 patients, 63% were men and 37% were women. About 21% of them are under 40 years old. Tumors on the left side of the intestine were found in 46% of cases. The majority of patients experienced symptoms such as abdominal pain (72%), rectal bleeding (68%), and constipation (55%). As many as 80% of these cancers are moderately differentiated adenocarcinomas. The majority of patients presented at stages III (37%) and IV (56%). Colostomy is the most common surgical procedure, and chemotherapy is the most common. Often used are folinic acid, Fluorouracil, and Oxaliplatin. Median survival was only 9.4

Author	Title	Method	Result
Angelika Copija, Ewa Nowakowska, Karolina Janiom, dan Katarzyna Walkiewicz (2020)	Clinical Characteristics of Colorectal Cancer Patients in terms of Selected Platelet Indices	Retrospective observational	months The study involved 247 stage II-IV colon cancer patients, with 104 men and 143 women, aged 39-87 years. The results showed that the patients were older and had a higher patient BMI. There was no clear relationship between blood parameters and gender or tumor severity. Patients older than 65 years tend to have a higher MPV/PC ratio, and overweight patients also have a higher MPV/PC ratio. higher
Husin Thamrin, Khafidhotul Ilmiah,	Colorectal Tumor Profile in	Retrospective descriptive	The peak incidence is in the 51-60 year group, but in the 31-40 year age group the incidence of colorectal tumors continues to increase.
Author	Title	Method	Result
Ni Wajan Tirthaningsih (2020)	Internal Medicine, Dr Soetomo Hospital, Surabaya		The youngest patient was 17 years old. And tumors are more likely to develop in distal areas, especially in the rectum
Ni Kadek Ariesta Dwijayanthi, Ni Nyoman Ayu Dewi, I Made Mahayasa, I Wayan Surudarma (2020)	Characteristics of Colorectal Cancer Patients at Sanglah Central General Hospital (RSUP) Based on Demographic Data, Clinical Findings and Lifestyle	Descriptive observational and cross sectional methods	Colorectal cancer most often occurs in women (92.3%) and people aged 50 years and over (92.3%). Symptoms frequently experienced include lower abdominal pain (84.6%), stools mixed with blood (69.2%), symptoms of anemia (69.2%), and decreased appetite (69.2%). Most patients also had other diseases (76.9%), late stage cancer (46.2%), and abnormal laboratory test results

Author	Title	Method	Result
			(92.3%). However, most patients do not have a history of regular exercise, smoking, or drinking alcohol
Michelle Anne Anthony, Luh Putu lin Indrayani Maker, I Made Gotra, Herman Saputra (2020)	Prevalence of colorectal carcinoma based on microscopic type, sex, age and anatomical location in Sanglah General Hospital	Retrospective descriptive	This study showed that the highest prevalence of colorectal carcinoma was in the age group <50 years with 86 samples (31.3%) and in men with 163 samples (59.3%). Adenocarcinoma has the highest prevalence of colorectal carcinoma, namely 270 samples. The rectum is the most frequently found tumor location, namely 170 samples. In adenocarcinoma, the age group with the highest prevalence of CRC is <50 years, 85. The highest prevalence of CRC is based on The anatomical location and age group were <50 years in the rectum of 57 samples
Xiang Gao, Md, Mph, Amanda R. Kahl, Mph, Paolo Goffredo, Md, Albert Y. Lin, Md, Mph (2020)	Treatment of Stage IV Colon Cancer in the United States: A Patterns-of-Care Analysis	Multinomial Logistic Regression	In the United States, PTR is frequently used in the treatment of stage IV colon cancer despite its low metastasis rate. The number of cases is 3,336. 17% of patients received PTR only, 23% received chemotherapy only, 41% received PTR 1 chemotherapy, and 17% received no treatment. In multivariable analysis, compared with chemotherapy alone, PTR 1 chemotherapy was associated with being married (odds ratio [OR], 1.9), having a bowel obstruction

Author	Tittle	Method	Result
			(OR, 2.55), and having a perforation (OR 2.29), whereas age being older (OR, 5.95), Medicaid coverage (OR, 2.46), higher T stage (OR, 3.51), and higher N stage (OR, 6.77) were only associated with PTR. Patients who did not receive treatment had no comorbidities or more severe disease burden but more tended to be older (OR, 3.91) and non-Hispanic African Americans (OR, 2.92; all P<0.05). Home care less non-academic pain was associated with PTR (6 chemotherapy).

Author	Tittle	Method	Result
	Indonesian National Referral Hospital		Histology, pT3, pN0, insufficient dissected lymph nodes (LN), LN ratio <0.05, no distant metastasis, early stage cancer, no lymphovascular invasion, and no perineural invasion (PNI). Distinctive characteristics between young and old patients were found in histological subtype, number of dissected LNs, and tumor PNI. From these results it is concluded that epidemiological trends and analysis of estimates of CRC cases in patients in Indonesia show a very large increase in colon cancer in young patients, a very worrying trend. In addition, young patients exhibit certain clinicopathologic characteristics that contribute to severity

Author	Tittle	Method	Result
Mulyati Sri Rahayu, Muhammad Sayuti, Muhammad Raihan (2023)	The Relationship Between Age and Gender Factors and the Incidence of Colorectal Cancer at Cut Meutia General Hospital in 2020	Analytical observational and cross sectional	disease In 2020, there were 30 colorectal cancer patients. Where the female gender is 12 or 40% of the patients less than the male gender is 18 or 60% of the patients and the age range for colorectal cancer patients is above 60 years. The results of the relationship between X1 and y show a p value (Sig. (2-tailed) of $0.290 > 0.05$, which means there is no significant relationship between age and the incidence of colorectal cancer and the results of the relationship between From these results it can be concluded that gender is related while age is not relationship with the incidence of colorectal cancer
I Wayan Budhi Sanjaya, Asri Lestarani, Made Dwi Yoga Bharata (2023)	Clinical Characteristics of Colorectal Cancer Patients Undergoing Colonoscopy at Sanjiwani Hospital, Gianyar, 2019-2020	Descriptive cross sectional	Colorectal cancer patients who underwent colonoscopy at Sanjiwani Gianyar Regional Hospital in 2019-2020 were 9.5%. The age group dominated by the category greater than or equal to 50 years was 72.4%. The majority of the subjects in this study were male, 52.6%. 96.1% of the subjects in this study had no family history. Complaints of bloody stools are the most common complaint with a percentage of 22.4%. Adenocarcinoma was the most common histopathological feature found at 47.4%. 64.5% of the subjects in this study did not experience anemia. The rectum is the most common location for

Author	Tittle	Method	Result
			cancer found with a percentage of 72.4%. Stage III is the most common stage found, namely by 44.7%

Discussion

Characteristics of Rectal Cancer Patients Based on Age

The literature review shows that there is a correlation between age and the incidence of rectal cancer. There were 14 articles that found that the highest proportion of rectal cancer sufferers were in the 40-60 year age range. This is consistent with previous findings showing that the risk of rectal cancer increases with age, with a peak occurring in middle age. There are several factors that may explain why rectal cancer is more common in this age group. First, the aging process can cause changes in colon cells, increasing the risk of genetic mutations that lead to the development of cancer. In addition, unhealthy lifestyles, such as diets that are low in fiber and high in fat, and smoking habits, are generally more common in this age group, which can increase the risk of rectal cancer.

However, the findings of one article reporting a case of rectal cancer in a 17 year old suggest that the disease may also affect younger populations. This emphasizes the importance of awareness of the symptoms of rectal cancer even at a younger age and the importance of early screening in at-risk populations. In the management of rectal cancer, knowledge of these age characteristics is important in determining diagnosis, treatment and prevention strategies. For example, in younger patients, there needs to be extra vigilance for symptoms that may be overlooked or considered unusual for that age. In older patients, special care may be needed in weighing the risks and benefits of aggressive treatment. Although Sri Rahayu et al (2023) stated that there is no relationship between age and the incidence of colorectal cancer, it is important to note that research results can vary and sometimes conflict. Several other studies have shown that age plays an important role in the risk of developing colorectal cancer.

Characteristics of Rectal Cancer Patients Based on Gender

The results of the literature review show that there are differences in the incidence of rectal cancer based on gender. Of the 10 articles analyzed, the majority (7 articles) found that men had a higher incidence ratio than women. This is consistent with previous findings showing that men have a higher risk of developing rectal cancer. Factors that can explain this difference include differences in anatomical structure and hormones, as well as behavioral factors such as diet, smoking habits, and physical activity. Men tend to have less healthy diets and smoke more often than women, which can increase the risk of rectal cancer.

Nevertheless, 3 articles found that women had a higher incidence rate. This may be caused by certain factors such as unhealthy eating patterns, a family history of rectal cancer, or certain medical conditions that increase the risk of rectal cancer in women in the study sample. Differences in the incidence of rectal cancer between men and women have

important implications for the management and prevention of this disease. There needs to be a gender-specific approach to screening, diagnosis, and treatment.

For example, women may require different prevention strategies or higher screening intensity if significant risk factors are present. Overall, the results of the literature review indicate that gender plays an important role in the characteristics of rectal cancer, with a higher tendency in men, although it should be acknowledged that there are some exceptions where the incidence is higher in women.

Characteristics of Rectal Cancer Patients Based on Lifestyle

From the results of a literature review of 5 articles, it can be concluded that lifestyle plays an important role as a risk factor that contributes to the risk of being diagnosed with rectal cancer. Some of the lifestyle risk factors identified include smoking, alcohol consumption, lack of exercise, diet, diabetes and depression.

Smoking and Alcohol Consumption, there are articles supporting the finding that smoking and alcohol consumption can increase the risk of rectal cancer. Smoking is linked to carcinogenic substances that can damage cells in the intestine and trigger the development of cancer. Alcohol consumption can also cause irritation of the intestinal walls and increase the risk of cancer. However, Bouk et al (2021) noted that in their research there was no significant relationship between smoking and alcohol consumption and the risk of rectal cancer. This indicates differences in results between the studies conducted, perhaps due to factors such as sample size, study design, or different analysis methods. Then, the article's diet also shows that a diet that is low in fiber, high in fat, and consumption of red and processed meat can increase the risk of rectal cancer. Fiber in food helps maintain gut health and prevents the development of cancer, while fat and red meat can increase inflammation in the gut. Diabetes has been identified as a potential risk factor for rectal cancer. Research shows that high blood sugar levels can damage cells in the colon, increasing the risk of cancer. Depression articles also highlight the link between depression and rectal cancer risk. Depression can affect a person's lifestyle, such as diet and physical activity, which in turn can increase the risk of cancer. Additionally, chronic stress associated with depression can also affect the immune system and inflammatory processes in the body, potentially triggering the development of cancer.

However, there is a different view from Sanjaya et al (2023) who state that there are no genetic factors that play a role in rectal cancer. This contradicts previous evidence showing that genetic factors, such as a family history of rectal cancer, can increase a person's risk of developing this disease. However, this opinion may need to be studied further with broader and in-depth research. Although there are differences of opinion among the articles analyzed, lifestyle habits such as smoking, alcohol consumption, unhealthy diet, diabetes and depression can increase the risk of rectal cancer. The differences in research results show the complexity of the relationship between these factors and rectal cancer, so that further research is needed to understand more deeply the mechanisms and impacts.

Characteristics of Rectal Cancer Patients Based on Management

Management of rectal cancer is greatly influenced by patient characteristics which

include disease stage, age, health condition, patient abilities, as well as genetic and molecular factors of the tumor. The stage of the disease is the main determinant in the choice of treatment. Patients with early stages (stage I or II) will generally undergo surgery to remove the tumor with the possibility of additional radiotherapy or chemotherapy reduces the risk of relapse. Meanwhile, patients with advanced stages (stage III or IV) require a more aggressive therapeutic approach, including a combination of surgery, chemotherapy and radiotherapy.

This is in line with research by Kumar et al (2015) which states that treatment or care is given according to the stage but the median recurrence-free survival is 22 months, median overall survival for all patients is 43 months and overall survival (OS) is 5 years. observed for stages I, II and III were 100%, 60% and 60% respectively. Overall health condition is also an important consideration. Patients in generally good health will be better able to tolerate aggressive therapy, while patients in compromised health may require a more cautious and individualized approach to treatment.

The patient's ability to undergo therapy must also be considered, including social support and accessibility of medical care. Patients with strong social support and the ability to access medical care regularly tend to have better outcomes in the management of rectal cancer. Genetic and molecular factors of the tumor also influence the choice of therapy. A tumor's genetic profile can provide insight into a tumor's response to certain therapies, such as targeted therapy or immunotherapy, which may influence the choice of therapy. In clinical practice, the approach to treating rectal cancer must be adapted to the individual characteristics of each patient. This requires collaboration between various oncology specialists and the health care team to design a treatment plan that is most effective and appropriate to the patient's needs and preferences.

CONCLUSION

The characteristics of rectal cancer sufferers can be seen from various aspects. Based on age, rectal cancer sufferers are most often in the age range of 40-60 years. In terms of gender, the highest incidence occurs in men. Lifestyle also plays an important role in the characteristics of rectal cancer sufferers, with some risk factors including smoking, alcohol consumption, lack of exercise, poor diet, diabetes, and depression. In terms of management, surgery, chemotherapy and radiotherapy are the most effective treatments. This underscores the importance of a multimodal approach in the management of rectal cancer, which often involves a combination of surgery, chemotherapy, and/or radiotherapy to achieve optimal outcomes.

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