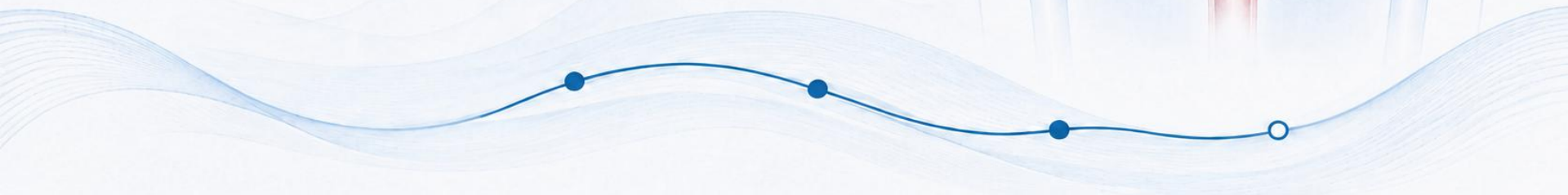
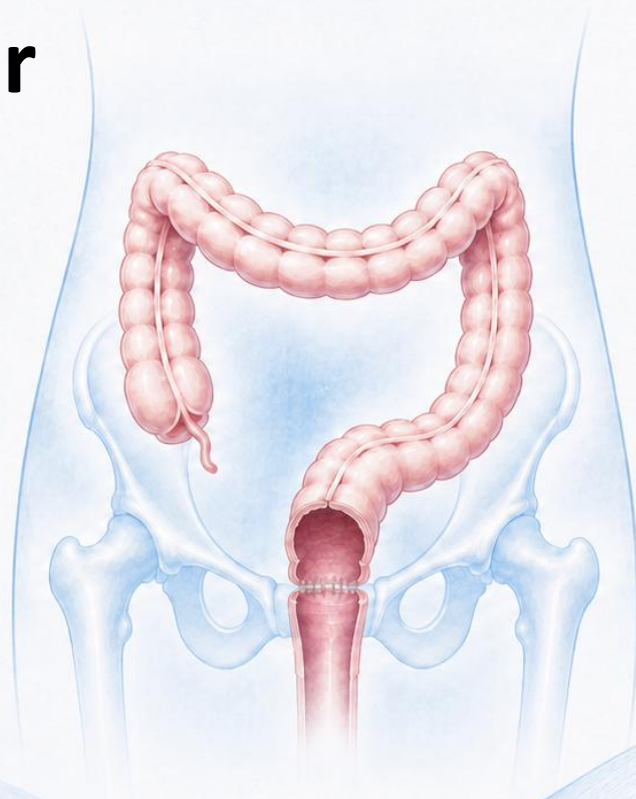


Trajectories of Low Anterior Resection Syndrome After Rectal Cancer Surgery

A Three-Year Prospective Follow-Up Study

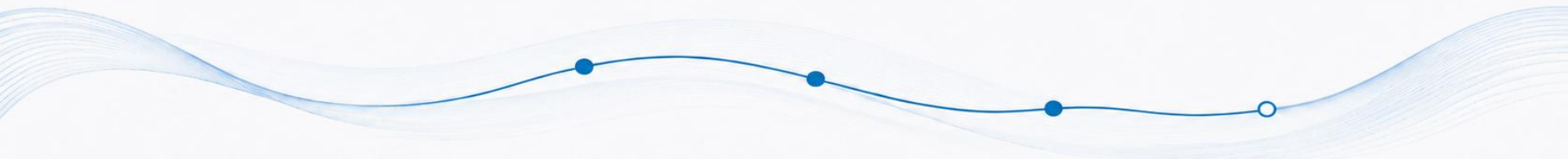
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LARS - a common late sequela after rectal cancer surgery



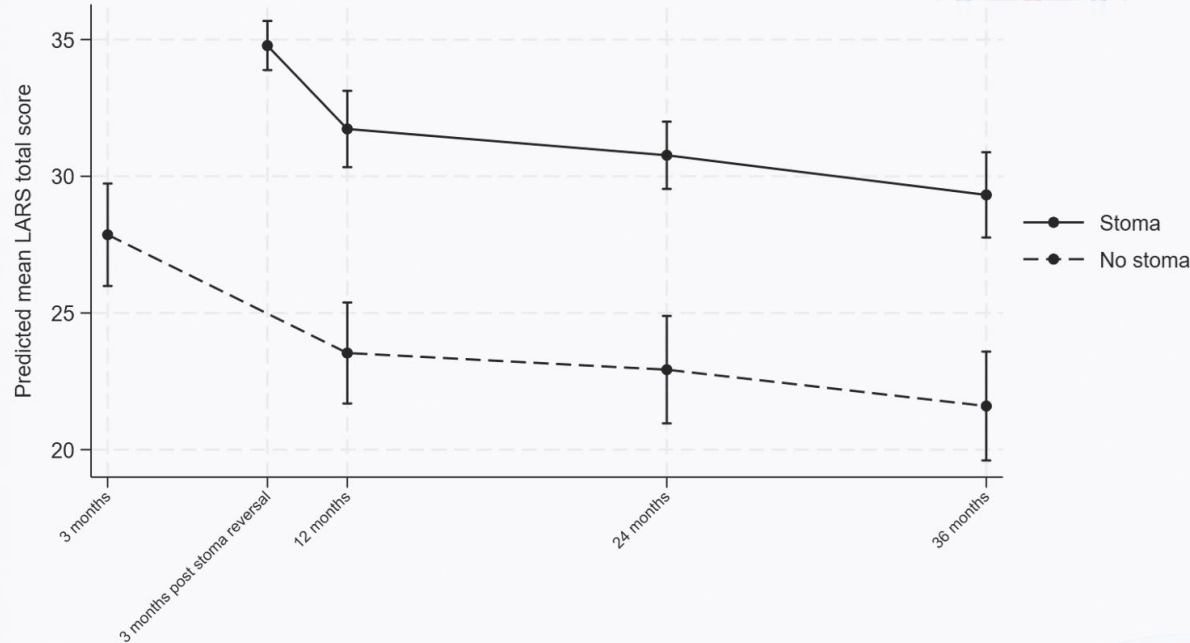
- Advances in rectal cancer treatment have improved survival. However, many patients experience long-term bowel dysfunction - Low Anterior Resection Syndrome (LARS)
- LARS: Urgency, frequency, fragmentation, incontinence and emptying difficulties
- LARS affects quality of life, but symptom trajectories beyond the first postoperative year remain poorly described



Three-year trajectories of LARS after rectal cancer surgery



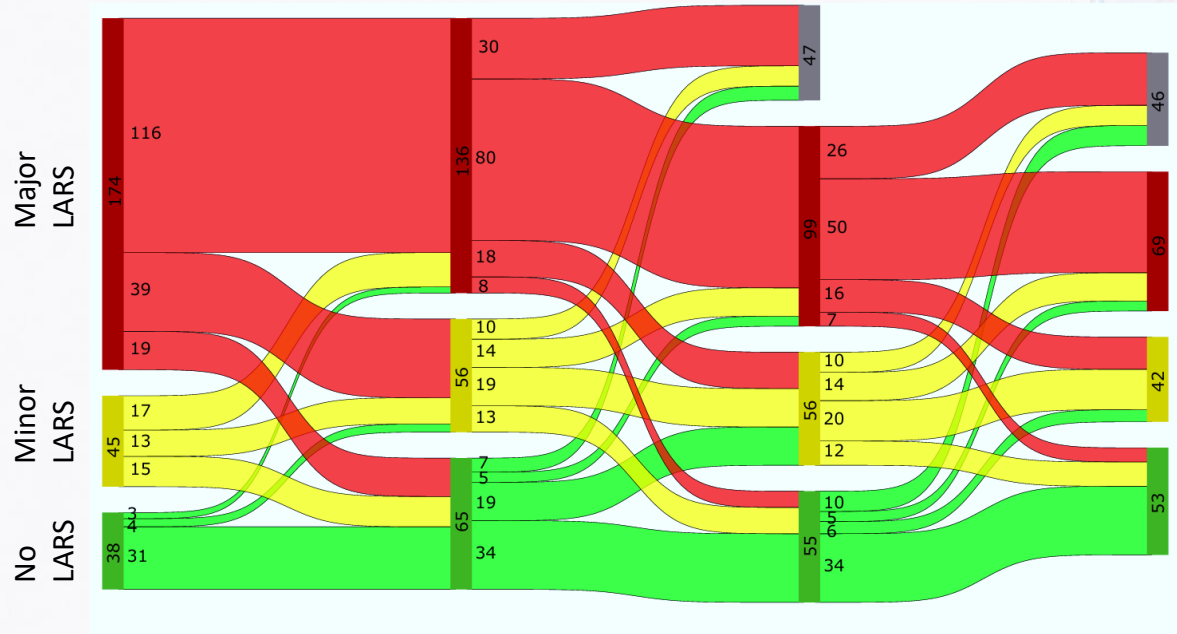
- 327 patients | prospective cohort | 3-year follow-up
- LARS score improved throughout the 3-year follow-up. Mean LARS decreased by **2.3 points/year**
- Patients who had a diverting stoma had persistently higher LARS scores



Individual LARS trajectories over time



- Mean improvement masks individual variation
- Patients moved in both directions between LARS severity categories
- Individual recovery was neither uniform nor linear



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