GLOSSARY

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- Chemotherapy (ChT): Treatment based on drugs administered orally or parenterally in order to cure or prolong survival from cancer.
- Radiotherapy (RT): Treatment based on high doses of radiation to kill cancer cells and shrink tumors.
- Chemoradiotherapy (CRT): Association of chemotherapy drugs with RT in order to increase the sensitivity of tissues to radiation treatment.
- Adjuvant: Treatment associated with surgery, carried out after it, in order to improve the results by eliminating tumor cells that may remain.
- Adjuvant chemotherapy: Adjuvant treatment based on drugs administered orally or parenterally.
- Adjuvant radiotherapy: Adjuvant treatment based on high doses of re-activation.
- Neoadjuvant treatment: Treatment associated with surgery in order to improve its results, but indicated prior to surgery.
- Concurrent chemotherapy (radiosensitizing):
 Neoadjuvant treatment based on drugs administered
 orally or parenterally in conjunction with long-course
 RT.
- Induction chemotherapy: Neoadjuvant treatment based on drugs administered orally or parenterally prior to RT, in any of its regimens (long-course CRT or short-course RT).
- Consolidation chemotherapy: Neoadjuvant treatment based on drugs administered orally or parenterally after RT, in any of its regimens (long-course CRT or short-course RT).
- **Downsizing:** Decrease in tumor size, which does not mean change in T factor.
- **Downshifting:** Decrease in factor T or N, without change in stage.
- Downstaging: Decrease in stage.
- Complete clinical response: Absence of clinical or imaging evidence of tumor tissue after neoadjuvant treatment.
- Complete pathologic response: Absence of tumor cells in the histopathological study of the surgical specimen after neoadjuvant treatment.

Abbreviations

- **RT:** Radiotherapy
- **ChT:** Chemotherapy

- **CRT:** Chemoradiotherapy
- FOLFOX: 5-FU + oxaliplatin
- **CAPOX:** Capecitabine + oxaliplatin
- FOLFIRINOX: 5-FU + irinotecan + oxaliplatin
- FOLFIRI: 5-FU + irinotecan
- **NOT:** Non-operative treatment
- W&W: Watch and Wait
- TNT: Total neoadjuvant therapy
- LLN: Lateral lymph node
- LPLA: Lateral pelvic lymphadenectomy
- **IDT:** Interdisciplinary team
- cCR: Clinical complete response
- pCR: Pathologic complete response
- APR: Abdominoperineal resection
- TME: Total mesorectal excision
- DFS: Disease-free survival
- OS: Overall survival
- R1: Surgical resection with microscopic margin involvement
- **R0:** Surgical resection without residual tumor
- **R2:** Surgical resection with macroscopic margin involvement
- EORTC: European Organization for Research and Treatment of Cancer
- NSABP: National Surgical Adjuvant Breast and Bowel Project
- MSKCC: Memorial Sloan Kettering Cancer Center
- ESMO: European Society of Medical Oncology
- NCCN: National Cancer Center Network
- ASCRS: American Society of Colorectal Surgeons
- ACPGBI: Association of Coloproctology of Great Britain and Ireland
- 5-FU: 5 fluorouracil
- LV: Leucovorin
- **CT:** Computed tomography
- ERUS: Endorectal ultrasound
- TAE: Transanal local excision
- TEM: Transanal endoscopic microsurgery
- taTME: Transanal total mesorectal excision
- TAMIS: Transanal minimally invasive surgery
- EMVI: Extramural vascular invasion
- c: Clinical staging
- y: Post-neoadjuvant treatment staging
- p: Pathologic staging
- mr: Magnetic resonance imaging staging