

Reply to comment by Karlitz and Provenzale: Results from an American Society of Colon and Rectal Surgeons survey on the management of young-onset colorectal cancer

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We thank Drs. Karlitz and Provenzale for their thoughtful and insightful comments [1]. Our suspicion in performing the study [2] was that there would be great variability among surgeons in their treatment of young patients with colorectal cancer. Indeed, the data support the need for further education for surgeons, and possibly, this should be extended to gastroenterologists as well. A multidisciplinary approach is important in the diagnostics and treatment of colorectal cancer, and early involvement of genetic counselors or referral to familial cancer clinics should be sought where appropriate.

It is difficult to know why surgeons do not test. In our experience, this is multifactorial.

We hope that the current study will lay the basis for future work focused on evaluating reasons for non-

compliance with National Comprehensive Cancer Network guidelines, as well as facilitate measures to improve the management of these patients.

Conflict of interest None.

References

1. Karlitz J, Provenzale D (2013) Invited comment on Warriar et al.: hereditary colorectal cancer screening and management practices by colorectal surgeons. *Tech Coloproctol*. doi:[10.1007/s10151-013-1080-1](https://doi.org/10.1007/s10151-013-1080-1)
2. Warriar SK, Kalady MF, Kiran RP, Church JM (2013) Results from an American society of colon and rectal surgeons survey on the management of young-onset colorectal cancer. *Tech Coloproctol*. doi:[10.1007/s10151-013-1052-5](https://doi.org/10.1007/s10151-013-1052-5)

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