

Literatur zum Artikel

Resektions- und Anastomosentechniken bei Morbus Crohn

1. Peyrin-Biroulet L, Loftus EV Jr, Colombel JF, Sandborn WJ (2010) The natural history of adult Crohn's disease in population-based cohorts. *Am J Gastroenterol* 105: 289–297
2. Kienle P (2018) Impact of modern drug therapy on surgery: Crohn's disease. *Visc Med* 34: 422–425
3. Preiß JC, Bokemeyer B, Buhr HJ, et al (2014) Aktualisierte S3-Leitlinie – „Diagnostik und Therapie des Morbus Crohn“ 2014. AWMF-Registriernummer: 021–004. *Z Gastroenterol* 52: 1431–1484
4. Fazio VW, Marchetti F, Church M, et al (1996) Effect of resection margins on the recurrence of Crohn's disease in the small bowel. A randomized controlled trial. *Ann Surg* 224: 563–571
5. Tekkis PP, Purkayastha S, Lanitis S, et al (2006) A comparison of segmental vs subtotal/total colectomy for colonic Crohn's disease: a meta-analysis. *Colorectal Dis* 8: 82–90
6. Coffey CJ, Kiernan MG, Sahebally SM, et al (2018) Inclusion of the mesentery in ileocolic resection for Crohn's disease is associated with reduced surgical recurrence. *J Crohns Colitis* 12: 1139–1150
7. Bemelman WA, Warusavitarne J, Sampietro GM, et al (2018) ECCO-ESCP consensus on surgery for Crohn's disease. *J Crohns Colitis* 12: 1–16
8. Campbell L, Ambe R, Weaver J, et al (2012) Comparison of conventional and nonconventional strictureplasties in Crohn's disease: a systematic review and meta-analysis. *Dis Colon Rectum* 55: 714–726
9. McLeod RS, Wolff BG, Ross S, et al (2009) Recurrence of Crohn's disease after ileocolic resection is not affected by anastomotic type: results of a multicenter, randomized, controlled trial. *Dis Colon Rectum* 52: 919–927
10. Choy PY, Bissett IP, Docherty JG, et al (2011) Stapled versus handsewn methods for ileocolic anastomoses. *Cochrane Database Syst Rev* 7 (9)
11. Simillis C, Purkayastha S, Yamamoto T, et al () Meta-analysis comparing conventional end-to-end anastomosis vs. other anastomotic configurations after resection in Crohn's disease. *Dis Colon Rectum* 50: 1674–1687
12. Kono T, Fichera A, Maeda K, et al (2016) Kono-S anastomosis for surgical prophylaxis of anastomotic recurrence in Crohn's disease: an international multicenter study. *J Gastrointest Surg* 20: 783–790
13. Seyfried S, Post S, Kienle P, Galata CL (2018) Die Kono-S-Anastomose in der Chirurgie des Morbus Crohn. Erste Ergebnisse einer neuen, funktionellen End-zu-End-Anastomosentechnik nach intestinaler Resektion bei Patienten mit Morbus Crohn in Deutschland. *Chirurg* 90: 131–136