Introduction

The enhance recovery after elective colorectal surgery (ERAS) protocol is used to achieve fast return to normal physiological status. Adherent to this protocol is not
common in Sri Lankan practice. We have continued modified ERAS which have shown safe in the initial experience. This study is to evaluate success in each component of ERAS protocol.

Materials and Methods
Retrospective study data was collected from 52 patients who had undergone elective colorectal resection in our unit during 2009-2015. Each component of ERAS protocol was analyzed using a structured proforma.

Results
There were 31 males and 21 females with mean age of 56.83 years. 14 patients underwent for neo-adjuvant radiotherapy. Twenty seven (51.9%) patients underwent laparoscopic (including one 3D) surgery. Commonest surgery was anterior resection (50%) while other include; 10 abdominal perineal resection, 13 colectomies and 3 Hartmann reversal. Mobilization within 3 days was achieved in 44 (84.6%) patients while 67.3% were started on oral feeding same day of the operation. Hospital less than 5 days was seen in 26 patients (laparoscopic surgery 16). The post-operative complications noted were; 2 chest infection, 7 surgical site infections (clevian dindo class 2). When compared with calculated (CR-POSSUM) average mortality of 6.26 (range 0.68 - 20.02) the 30 day mortality with ERAS protocol was Zero

Conclusions
ERAS protocol in colorectal surgery is feasible and successful to our local settings.