Background: A rectum cancer for younger patients (<30 years) is rare (<0.5%). The anatomy and clinical characteristics and evolution are ill known. The aim of this work is to make a descriptive and prognostic retrospective study for all patients who have a rectum cancer less than 30 years of age follow in department of medical oncology anticancer center of Blida in Algeria between 2003 and 2011.

Methods: Thirty (30) younger patients from 259 rectum cancer were including. The personnel’s and family antecedents of cancer, the clinically and anatomy-pathologic variables, the characteristics of treatments given and a tumoral evolution were investigated.

Results: Median age was 22.2 years (15-29 years). The reason of consultation was a rectorragie in 38%, rectorragie with diarrhea in 31%. The delay of consultation was < 6 months in 83%. 02 patients have a family antecedent of cancer. Adenocarcinoma highly differentiated was found in 61.5% and Stage IV represents 61% at diagnosis. A neoadjuvante radiotherapy was given to 04 patients, associated with chemotherapy for 16 patients. 14 patients have a curative chirurgical resection (R0) for the rectal tumor. The tumoral stage after resection was T0/T2/T3/Tx in 7.7/15/23/7.7% of cases. A nodal metastasis was present in 53.3% of cases. Amid 19 patients with metastasis, a curative chirurgical resection (R0) was making for 02 patients. The median of survival was 13 months.

Conclusion: In our experience, the majority of cases have a delay of consultation < 6 months with a rectorragie as reason of consultation. The greatest percentage of histologic type was adenocarcinoma highly differentiated, but the prognosis was bad for this population because the stage of diagnostic is stage IV in the majority of cases.