TÍTULO: Extent of Lymphadenectomy in Gastric Cancer at our Institution

OBJECTIVO/
INTRODUÇÃO: D2 lymphadenectomy has been accepted in Far East as the standard treatment for advanced gastric cancer (AGC) for many decades. Fifteen years after its conclusion, the Dutch trial could report a significant decrease of recurrence after D2 procedure. Recently the long term survival analysis of the Italian Randomised Controlled Trial (RCT) could demonstrate a benefit for patients with positive nodes treated with D2 gastrectomy without splenopancreatectomy. As nowadays, also in western countries, D2 procedure can be done safely with pancreas preserving technique and without preventive splenectomy, it has been suggested in several national guidelines as the recommended procedure for patients with AGC. The aim of this study was to evaluate the correct extent of the D2 lymphadenectomy being done at our institution.

MATERIAL E MÉTODOS: A retrospective review of the database of gastric cancer patients was performed to determine the extent of the D2 lymphadenectomy. A total of 261 patients with gastric cancer underwent resection between January 2010 and December 2014.

RESULTADOS: Of the selected patients, 195 (75%) underwent D2 lymphadenectomy with a mean resection of 31.8 nodes, of
which 5.6 were positive. The mean positive lymph node ratio (LNR) was 17.6%.

DISCUSSÃO: The level of resected nodes is well above the minimum of 15 established by the NCCN and ESMO guidelines and above the 25 or more node resection recommended by the scientific literature.

HOSPITAL: Centro Hospitalar de Setúbal
SERVIÇO: Serviço Cirurgia Geral
AUTORES: José Baptista, Margarida Correia, Isa Santos, Rita Baia, Joana Almeida, Rui Garcia, Aurora Pinto, Luis Cortez
CONTACTO: Jose Vieira Baptista
EMAIL: ze.baptista@gmail.com