**ABSTRACT ID: EG2839017**

**TÍTULO:** Immunohistochemically detected micrometastases in node-negative patients with gastric carcinoma.

**OBJECTIVO/MATERIAL E MÉTODOS:**

The presence of lymph nodes (LN) metastasis is one of the most important prognostic indicators in gastric cancer (GC). Despite curative resection, some patients with histologically node-negative (pN0) GC still have local or distant tumor recurrence, and occult lymph node micrometastasis (LNmi) has been suspected to be a key causative factor. Their identification is limited by standard methodology.

**MÉTODOS:**

Forty patients (T1-T4N0) undergoing curative gastrectomy with D2-lymphadenectomy between 2009 and 2014 were retrospectively evaluated. The LN from pN0 cases were re-analyzed by immunohistochemical (IHC) using antibodies against human CK AE1/AE3. The results were also associated with clinicopathological characteristics.

**RESULTADOS:**

A total of 1439 LN were obtained (mean of 35 LN per patient). Tumor cells in LN were detected by IHC in 24 LN from 12 patients (30%). Two patients were pT2, 5 pT3 and 5 pT4. Micrometastasis were detected in 3 nodes from 2 pT2 patients (5%). Two patients were upstaged from stage IB to stage IIA. Four of the 28 CK-negative patients (14.3%) and three among 12 CK-positive patients (25.5%) had recurrence (p=0.4).

**DISCUSSÃO:**

The CK-immunostaining is an effective method for detecting occult tumor cells in LN and can be recommended to precisely determine pathological staging in GC. It may be useful as supplement to H

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