

Meeting abstract

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The primary gastric stump cancer in geriatric patients

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Background

The pathophysiology of gastric stump cancer is due to the synergic action between multiple factors including the duodenogastric biliary reflux and bacterial colonization of the stump. The histological features of this cancer are not different from cancer that arises in normal stomach.

In this study we present our experience in order to analyze the importance of early treatment of gastric stump cancer in geriatric patients.

Methods

The authors present 7 cases of primary gastric stump cancer surgically treated in our department during the period 1999–2002. The age of patients was between 61 and 79 years. The average time between primary gastric resection and diagnosis of carcinoma of gastric stump was 19 years (6–32 years). All patients considered operable underwent total gastrectomy and restoration of intestinal transit according to Roux's technique.

Results

Four patients (57.14%) were resectable, including 3 aged over 70 years. In all cases total gastrectomy with systematic D2 lymphadenectomy was performed. In the remaining patients who did not undergo gastrectomy, 2 patients were treated with exploratory laparotomy because of very advanced and unresectable gastric cancer, and 1 patient was not suitable for surgical treatment as his general con-

ditions were poor. The 5-year survival rate in patients resected was 50%.

Conclusion

Our series of 7 cases of carcinoma of the gastric stump highlights the importance of endoscopic investigations during the follow-up of patients with gastric resection, especially after 15 years, and of radical surgery (total gastrectomy with D2 lymph node dissection) in geriatric patients.