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D2 gastrectomy: A single institution experience

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Background: Recent single institutional randomized and non randomized studies showed that D2 gastrectomy can still be performed with acceptable morbidity and mortality in experienced centers with a survival benefit.

Aim of the Work: A retrospective study evaluating the long term survival data for patients subjected to D2 gastrectomy treated in the National Cancer Institute, Cairo University.

Patients & Methods: 50 cases of potentially curable gastric cancer were subjected to D2 gastrectomy between. The median follow up period was 48.5 months. Patients' files were retrieved; clinicopathological and follow up data were documented. Survival analysis (disease free and overall) was done in addition to univariate and multivariate analyses of prognostic variables.

Results: The operative mortality and morbidity was 4% and 12.7% respectively. The mean number of retrieved nodes was 19 (range: 9-45). Overall cumulative survival was 51% at 5 and 10 years with a plateau reached at 48 months. Multivariate analyses showed that the T stage was the single independent prognostic variable. Results compared favorably to historical data of 97 cases subjected to non D2 gastrectomy where overall and disease free survivals were around 27% with a mortality and morbidity around 14%.

Conclusion: D2 gastrectomy can be performed with acceptable morbidity and mortality in specialized large centers with a survival advantage for selected cases.

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