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Laparoscopic uncut Roux-en-Y anastomosis in the distant gastrectomy for gastric cancer: A report of 92 patients

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Objective: The aim of this study was to investigate the safety and feasibility of laparoscopic uncut Roux-en-Y anastomosis in the distant gastrectomy for gastric cancer.

Methods: The clinical data of 92 patients performed laparoscopic uncut Roux-en-Y anastomosis in the Department of Gastric Surgery, the First Affiliated Hospital of Nanjing Medical University from June 2014 to June 2016 were analyzed retrospectively.

Results: The operations were performed successfully for all patients. The mean operation duration, anastomosis time, blood loss and the number of lymph nodes dissection during the surgery were (178.67±29.12) min, (30.84±7.41) min, (48.78±35.64) ml and 34.43±9.84 respectively. The time spent before gastrointestinal motility, liquid-diet intake, out-of-bed ambulation and the average hospitalization days after operation were (76.40±21.47) hours, (5.30±1.25) days, (48.14±20.25) hours and (9.19±3.09) days respectively. Postoperatively, 6 patients experienced complications, including gastrointestinal bleeding (2 patients), duodenal stump fistula (1 patient), Chylorrhea (1 patient), Roux-Y stasis syndrome after gastrectomy (2 patients), all of the complications were cured conservatively. None of the other complications occurred, such as anastomotic fistula, anastomotic stenosis, infection of incision, etc.

Conclusion: The laparoscopic uncut Roux-en-Y anastomosis is safe and feasible in the distant gastrectomy with D2 dissection for gastric cancer, with advantages of less trauma, faster recovery and so on.

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Standardization of an isolation protocol of group a rotaviruses among neonatal diarrheic calves, Morocco

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Group A rotaviruses (RVA) are the main cause of neonatal calve diarrhea (NCD) in Morocco. Until now, no reports are available regarding isolation and cultivation of RVA in clinical samples from Moroccan domestic animals or children with acute gastroenteritis (AGE) and burden due to this infection in animals remain unknown. Hence, this study aims to isolate RVA strains from NCD clinical samples in order to support RVA disease control in Morocco. This isolation process constitutes a first step toward vaccine development. Thirteen fecal samples were obtained from calves with a single episode of neonate calf diarrhea at three different dairies and two samples were collected from field during a severe NCD outbreak. Diagnosis of RVA infection was based on fecal immune-chromatographic rapid test and further evaluated for their hemagglutination (HA) activity. RVA isolation was carried out on MA104 cells after inoculates were treated with different concentrations of trypsin TPCK. All RVA isolates were confirmed by LSI VetMAX™ Triplex Ruminant Rotavirus and Coronavirus Real-Time PCR kit. RVA isolation was achieved for nine clinical samples following one or two passages (60%) and was properly depended on HA activity and trypsin treatment of inoculates. The first sign of CPE detected consisted of increased cell granularity, obscure cell boundaries, cell rounding, and eventual degeneration and detachment of cells. These results constitute a crucial and a necessary step allowing preventive and veterinary medicine to support RVA disease controls in the country.

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