Laparotomy with a curative intent in patients with suspected locally recurrent gastric cancer

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ABSTRACT

Aims and background. Most recurrent gastric tumors are unsuitable for further resection or palliative surgery. The aim of the present study was to evaluate the role of re-resection in patients with local-regional recurrences of gastric cancer.

Methods and study design. Between 1998 and 2007, 26 patients underwent laparotomy for local-regional gastric cancer recurrence. Length of time to recurrence, recurrence patterns, operative procedures, morbidity, mortality and survival after re-resection were evaluated.

Results. Re-resection was possible in 13 patients (50%). Among patients with resectable tumors, survival times were markedly longer, with 2 patients reaching 60 months of survival and 2 other patients reaching 48 and 28 months, respectively. Among patients with early recurrence, peritoneal carcinomatosis was more common. After re-resection, morbidity and mortality were seen, each in one patient.

Conclusions. Most of the re-resected recurrences were intraluminal. In patients with early recurrences of gastric cancer, peritoneal carcinomatosis was encountered most frequently. Re-resection was beneficial and long-term survival was achieved after re-resection.

Key words: gastric cancer, local-regional recurrence, resection, survival.

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