Surgery of the Stomach

## 1 Stomach Cancer Surgery Goals

Staging refers to the tests to determine

* Remove the tumor
* Remove lymph nodes (depends upon tumor type)
* Preserve stomach function
* Reconstruct GI tract

**Treatment options depend upon the cancer stage**

## 2 Distal Cancers

Distal cancers are those in the lower part of the stomach

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## 3 Partial Gastrectomy

- Removes the tumor - Does not remove lymph nodes - Best suited for: - Small adenocarcinoma - GI Stromal Tumors

Locally-advanced cancers are those that have grown through the wall of the stomach

## 4 Partial Gastrectomy

Locally-advanced cancers are those that have grown through the wall of the stomach

## 5 Distal Gastrectomy

* Removes bottom half of the stomach
* Does not remove all lymph nodes
* Suitable for small tumors or GIST

Locally-advanced cancers are those that have grown through the wall of the stomach

## 6 Distal Gastrectomy

Locally-advanced cancers are those that have grown through the wall of the stomach

## 7 Body Cancers

Some cancers are found in the body of the stomach

Body is the mid-portion of the stomach

## 8 Subtotal Gastrectomy

- Removes bottom 2/3 of stomach - Removes nearby lymph nodes - Reconstruction with small intestine

Locally-advanced cancers are those that have grown through the wall of the stomach

## 9 Subtotal Gastrectomy

Locally-advanced cancers are those that have grown through the wall of the stomach

## 10 Proximal Tumors

- Located near the top of the stomach - Challenging area for surgery

If the lymph nodes contain enough cancer cells, they can be seen on CT scans or PET scans

## 11 Total Gastrectomy

- Removes all of the stomach - Reconstruction with small intestine - Needed for those with CDH1 mutations

If the lymph nodes contain enough cancer cells, they can be seen on CT scans or PET scans

## 12 Total Gastrectomy

If the lymph nodes contain enough cancer cells, they can be seen on CT scans or PET scans

## 13 Dual Tract Gastrectomy

Alternative surgical approach for small tumors near the top of the stomach

* Preserves the bottom of the stomach as a reservoir

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## 14 Dual Tract Gastrectomy

If the lymph nodes contain enough cancer cells, they can be seen on CT scans or PET scans

## 15 Risks of Surgery

* Leak where bowel is joined together (anastomosis)
* Bleeding requiring reoperation
* Delayed stomach function
* Infection in the abdomen

## 16 Laparoscopy

* Some esophageal cancers can spread inside the abdomen
* Areas of spread can be very small (grain of rice)
* Laparoscopy can detect spread inside the abdomen

Not all patients with esophageal cancer need a laparoscopy.

In general, laparoscopy is considered for cancers that invade from the esophagus into the stomach.

## 17 Laparoscopy

A laparoscopy is performed under a general anesthetic.

* Several incisions 1/4” long
* A telescope is inserted to look inside the abdominal cavity.
* Biopsies can be performed.

## 18 Other Presentations

[Nutrition Slideshow](lci_nutrition.htm)

[Gastrectomy Slideshow](lci_gsurgery.htm)