ADJUVANT THERAPY GASTRIC CANCER: WHAT IS THE OPTIMAL APPROACH IN A DEVELOPING COUNTRY?

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Background: Gastric cancer confers a poor prognosis even when diagnosed as localized disease. Multimodality therapy improves the cure rate of patients with localized cancer. However, adjunctive therapeutic approaches differ in different regions of the world. A phase III clinical trial has already shown the survival benefits of postoperative chemotherapy in gastric cancer in Asian population. However, there are no published data concerning the African patients. This study aims to investigate the use of adjuvant chemotherapy for gastric cancer after D2 gastrectomy among Moroccan population and identify its impact on survival.

Methods: We retrospectively reviewed all patients who had undergone D2 gastrectomy with non-metastatic gastric cancer in a single institution between January 2010 and December 2011. We analyzed the predictors and survival benefits of adjuvant chemotherapy use.

Results: Twenty patients Median of cycles was 5 (4-6cycles). Age, tumor location, lymph node involvement and tumor invasion were associated with the receipt of adjuvant chemotherapy. All patients received 5FluoroUracil based chemotherapy. Adjuvant chemotherapy improved the overall survival and the disease free survival.

Conclusion: This study suggests the survival benefits of adjuvant fluoropyrimidine-based chemotherapy among Moroccan patients with non-metastatic gastric cancer after D2 gastrectomy. However, due to the limitations of this study, further well-designed prospective studies with large populations are needed to confirm these findings and identify the patients that can tolerate and benefit from adjuvant chemotherapy.