Compliance with the adjuvant chemotherapy according to the extent of gastrectomy in patients with gastric cancer

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Introduction: Adjuvant chemotherapy is recommended after curative surgery in patients with stage II and III gastric cancer. We assessed the impact of total gastrectomy on the patient’s compliance with adjuvant chemotherapy in comparison with that of subtotal gastrectomy.

Methods: We collected the data of the patients who treated with adjuvant chemotherapy after curative gastrectomy for gastric cancer at Kyungpook National University Medical Center between January 2011 and December 2013. There were 104 men and 56 women (mean age: 58.4 ± 11.9). The patients were divided into two groups; who underwent total gastrectomy (TG group) and distal subtotal gastrectomy (DG group). Eight cycles were regarded complete chemotherapy in both TS-1 regimen and XELOX regimen.

Results: There were 74 patients in TG group and 86 patients in DG group. Fifty-five patients (74.3%) in TG group and 76 patients (88.4%) in DG group completed scheduled adjuvant chemotherapy (P = 0.021). Among patients treated with XELOX regimen, 9 patients (69.2%) completed treatment in TG group and 12 (100%) in DG group (P = 0.036). Although there was a trend toward inferior compliance in patients treated with TS-1 regimen after total gastrectomy, this difference was not statistically significant. Common reasons for stopping scheduled adjuvant chemotherapy were abdominal pain, diarrhea, and weakness. Dose modification was needed in 18 patients (24.3%) of TG group and 13 patients (15.1%) of DG group (P = 0.142).

Conclusion: Further research should develop the support system to increase the compliance with adjuvant chemotherapy, especially after total gastrectomy.