Clinico-epidemiological and therapeutic profile of gastric adenocarcinoma

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Introduction: The incidence of gastric cancer varies widely by country and population. The gastric cancer is the fourth most frequently occurring malignancy and the most common cause of death from cancer worldwide. 80-90% of patients are ultimately diagnosed at an advanced stage. Surgical resection of the local disease is the gold standard therapy; chemotherapy and radiotherapy have improved loco-regional control rates and distance. The prognosis is poor with a survival rate at 5 years not exceeding 15% for all stages combined. The aim of our study was to analyze the clinic-epidemiological and therapeutic characteristics of patients diagnosed with gastric adenocarcinoma in a 3-year period.

Methods: We retrospectively analyzed 62 patients with gastric carcinoma admitted at our department between January 2012 and December 2014.

Results: All of our patients were from the west Algeria. The mean age was 56 years (range 28-87 years), 43 male and 19 female, the performance status was score 1 (30 patients), score 2 (24 patients), score 3 (8 patients). Risk factors: tobacco (41,86%), alcohol - tobacco (9,3%) gastric ulcer (2,32%), 50% localized in antrum, 19% fundus, 6,5% cardia. The histological diagnosis was confirmed in all cases with 95% of adenocarcinoma from endoscopy. HER2: 3+ found in 6,45%. According to TNM classification, the majority of patients were in stage III (55%), stage IV (42%), only 3% were in stage I. 64,5% of patients received chemotherapy, neo-adjuvant chemotherapy in 5%, adjuvant in 47,5%, palliative in 47,5%. 58,06% of patients received one line, 4,83% received 2 lines, 1,61% received 3 lines. The response was stability in 18%, CR in 1,61%, progression 45%.

Conclusion: The majority of patients were diagnosed at late stages, which explains the poor prognosis of this cancer. A greater understanding of molecular changes associated with gastric cancer is needed to guide surgical and medical therapy. The strategy in the multidisciplinary management can improve the prognosis.