



Global trends in the surgical management of gastric cancer

Gastric adenocarcinoma (GC) poses a formidable global cancer care challenge highlighted by geographical heterogeneity of the disease and differing treatment patterns worldwide. For the past three decades, exciting controversies in the timing and type of perioperative therapies, heated debates on the importance of the number and extent of lymphadenectomy, and pioneering adoption of disruptive surgical technology have energized the field of GC surgery. The robust results of randomized clinical trials and high quality prospective studies addressing these key controversies have had direct positive impact on GC patient outcomes. Substantial progress made in GC patient care have resulted from the improved understanding of nodal significance, the standardization of D2 lymphadenectomy, the pioneering innovation in minimally invasive surgery (MIS), molecular characterizations of GC, discovery of novel targeted therapies such as monoclonal antibodies and immune check point inhibitors and efforts towards optimization of multimodality management. Within this context, the role of surgery in gastric cancer care has become ever more complex.

In clinical practice, patient-specific decisions regarding surgery for GC demand a comprehensive adoption of the evidence-based recommendations to offer each GC patient an optimal cancer-free survival and quality of life. Which patient should undergo D2 lymphadenectomy and why? What are the advantages and disadvantages of MIS, either laparoscopic or robotic approaches? Can we standardize our procedures and perioperative patient management to optimize postoperative outcomes? What are some key technical considerations during MIS procedures? Who should receive neoadjuvant or postoperative therapy and what agents should we use? Answers to these questions and the importance of surgical decision making in the timing of surgery, the extent of lymphadenectomy and selection of operative approach are highlighted by nation-specific guidelines and international consensus statements on the optimal management of GC patients.

Today, the GC surgeon operates at the intersection between translation of scientific discoveries and adoption of surgical innovation with the goals of optimizing cancer-free survival and quality of life of our patients. In this special issue, Global Trends in the Surgical Management of Gastric Cancer, we present original articles, reviews of literature and expert opinions by international experts covering a spectrum of key topics from changing guidelines in multimodality management, update on D2 lymphadenectomy, utility of enhanced recovery after surgery, technical considerations in robotic gastrectomy, and clinical trial outcomes. In sum, they provide insight into the concepts that are setting the global trends in GC care worldwide toward optimization of GC patient outcomes.

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Footnote

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Yanghee Woo



Taeil Son



Kazutaka Obama

Yanghee Woo

*Division of Surgical Oncology, Department of Surgery, City of Hope Comprehensive Cancer Center, Duarte, CA, USA;
(Email: ywoo@cob.org)*

Taeil Son

*Department of Surgery, Yonsei University College of Medicine, Seoul, South Korea;
(Email: TISON@yuhs.ac)*

Kazutaka Obama

*Department of Surgery, Graduate School of Medicine, Kyoto University, Kyoto, Japan.
(Email: kobama@kuhp.kyoto-u.ac.jp)*

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