

Professor Sang-Uk Han: current status and future of laparoscopic gastrectomy

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Professor Sang-Uk Han (*Figure 1*) from Department of Surgery, School of Medicine, Ajou University, Suwon, Korea, has performed more than 300 gastric cancer surgeries in a year, including laparoscopic gastrectomy, robotic gastrectomy, and open gastrectomy, with bariatric surgery and anti-reflux surgery in selected patients. Prof. Han has been participating in several clinical trials. He works as a PI of KCLASS-02 trial (feasibility of laparoscopic gastrectomy with D2 dissection).

Prof. Han made an excellent speech on the topic “Laparoscopic Gastrectomy for Advanced Gastric Cancer” on the 12th Asia-Pacific Congress of Endoscopic and Laparoscopic Surgery (ELSA 2015) in Daegu, Korea. The *TGC* editor is honored to meet and invite Prof. Han for an interview to share his profound consideration and future expectation on laparoscopic gastrectomy.

TGC: Could you briefly introduce your presentation laparoscopic gastrectomy for advanced gastric cancer?

Prof. Han: Today I presented about laparoscopic gastrectomy for advanced gastric cancer. My talk is divided into three parts. The first part is about the evidence. Still we do not have enough evidence, so I searched the journals on the long-term results of laparoscopic gastrectomy for gastric cancer and analyzed them by myself. The second part is talking about the total gastrectomy. In this part, I present that the total gastrectomy is commonly performed, but doing laparoscopic total gastrectomy is somehow of difficulties. The third part is about far-advanced gastric cancer on which operating laparoscopic surgery is very difficult. About the evidence, until now we do not have sufficient evidence to prove whether laparoscopic gastrectomy has more benefits for patients. There are many small studies with some perspectives, but the meta-analysis shows that there are many benefits of laparoscopic surgery. Comparing it with open surgery, laparoscopic surgery has better short term outcome even though it lacks of long term outcome. We are now waiting for more important trials from Korea, China and Japan. So maybe in the near future, we can share the answer. As for the total gastrectomy, the



Figure 1 Professor Sang-Uk Han.

technique of this surgery is difficult to operate. However, before my presentation, many surgeons have already showed the excellent operative skills on splenic hilar lymph nodes dissection. Until now, there are many trials for distal gastrectomy, but from now on I think more trials will be focused on total gastrectomy. Still there are many experiences over laparoscopic combined resection such as cholecystectomy, splenectomy, distal pancreatectomy, segmental colectomy and far-advanced cases referred extensive lymph node dissection, and I have also showed other surgeons' as well as my experiences on far-advanced cases. My conclusion is that a surgeon can do laparoscopic gastrectomy in all stages, but we should wait for the research with concrete evidences before persuading the patients to receive the laparoscopic surgery.

TGC: Although laparoscopic gastrectomy has widely used applied in gastric cancer surgery, there are still many controversies on the safety and effectiveness. So what do you think are the most complicate in the surgery?

Prof. Han: As I mentioned above, several studies show

laparoscopic surgery is safe and effective. That means when we compare the laparoscopic surgery to open surgery, laparoscopic surgery is much safer and more effective. Although these results came just from small studies, meta-analysis also agrees that laparoscopic surgery is better for its short term outcome. However, we lack for evidence of long term outcome, so many trials are ongoing. And I believe that the long-term outcome will be the same or even better in laparoscopic surgery because of its few complications and less injuries to lymph node during dissection. At present, laparoscopic surgery is still showing a few kinds of complications, we should admit these acceptable complications. But every surgeon tries to figure out a little complication. That is the reason why laparoscopic surgery is studied to reduce the syndrome.

TGC: *According to your experience, how can we avoid the complication?*

Prof. Han: A surgeon's experience is very important. We should learn from expert, participate in many educational forums like today's seminars, and we should share the techniques. These are the ways to avoid the complications. A surgeon's experiences will have great effect on the outcome of the surgeries he performs. I also published many kinds of surgeons' learning curve. If the surgeon becomes expert and experienced, that he will reduce the

complications. So a surgeon's experience or learning curve is very important.

TGC: *What do you expect in the future development of Laparoscopic Gastrectomy for Advanced Gastric Cancer?*

Prof. Han: Just like I mentioned in my talk, I expect that the future development of laparoscopic gastrectomy for advanced gastric cancer will be more radical and less invasive and by the help of the development of technology.

TGC: *That's all for the interview. Thank you again for sharing your thoughts!*

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Footnote

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