## Meeting abstract

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# **Gastric cancer in the elderly: what surgical approach?** L Finocchi<sup>\*</sup>, A Petrina, C Cini, M Badolato, C Boselli, F Rondelli and G Noya

Address: Department of Surgical Oncology, University of Perugia, Italy \* Corresponding author

from XXI Annual Meeting of The Italian Society of Geriatric Surgery Terni, Italy. 4–6 December 2008

Published: | April 2009

BMC Geriatrics 2009, 9(Suppl 1):A81 doi:10.1186/1471-2318-9-S1-A81

This abstract is available from: http://www.biomedcentral.com/1471-2318/9/S1/A81

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#### **Purpose**

We retrospectively reviewed our experience with gastric cancer and compared patients younger than 75 years old to elderly ones to see if there are any differences in clinico-pathological features and early-term outcomes between the two groups.

#### Materials and methods

All cases of gastric cancer at Department of Surgical Oncology, University of Perugia, from January 2005 to May 2008 were reviewed.

Seventy patients with gastric cancer underwent gastric resection at our center in this period. Among these, 38 (54.3%) were 75 years old or older and 32 (45.7%) were aged 74 years or younger.

A retrospective study was done on these two groups of patients. The age of 75 years was used as the cutoff based on previous literature on outcome analysis in elderly patients (Table 1).

Of the 70 patients undergoing surgery (M = 37, F = 33), 56 (80%) had radical intervention purposes, while 14 (20%) underwent palliative surgery.

In the younger group 17 (70.8%) patients had a total gastrectomy with D2 lymphectomy and a subtotal gastrectomy with lymphectomy D2 in 7 patients (29.2%).

In the second group we had 12 total gastrectomy-D2 (37.5%) and 20 subtotal-D2 gastrectomy (62.5%). The

perioperative mortality was 0 (0%) in the first group, 2 (6.2%) in the second.

We had 3 postoperative complications in the first group (12.5%), 1 of which (33.3%) required a reintervention; in the second group 5 patients (15.6%) had complications and in one case (20%) was requested a reintervention.

### Conclusion

Our findings support the conclusion that: 1) gastric cancer in older patients warrants surgical resection because the benefit to these patients is the same as for younger patients in terms of early outcomes; 2) elderly patients did not present with more aggressive and advanced gastric carcinoma; and 3) age alone should not preclude gastric resection in elderly patients.

	Elderly (≥75 aa)	Younger (<75 aa)
Patient number	38	32
Age	Min 75 – max 92 (md 83.1 aa)	Min 40-max 74 (md 61.4 aa)
Gender M/F	20/18	17/15
Location: Sup/md/inf/whole	13/7/21/0	9/8/16/2
Histological type		
Carcinoma/lymphoma	38/0	29/3
Differentited/undiff.	32/6	19/10
Low/high grade	0/0	0/3
Depth of invasion: T1/pT2/pT3/pT4	6/5/19/8	7/7/10/4 (excluding 3 lymphomas)
Lymph node involment: pN0/pN1/pN2/pN3	14/11/11/2	10/7/7/4 (excluding 3 lymphomas)
Stage: IA/IB/II/IIIA/IIIB/IV	5/1/10/7/2/13	7/2/4/3/2/10 (excluding 3 lymphomas)
Type of resection: R0/R1-R2	32/6	24/8
Extent of lymphadenectomy: DI/D2/D3	22/9/1	12/13/2
N° lymph nodes removed	629	630
N° lymph nodes positive (%)	125 (19.9%)	187 (29.7%)

Table 1: Characteristics of patients older and younger than 75 years undergoing surgery

