

Gastric partitioning for the treatment of malignant gastric outlet obstruction



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The **gastric partitioning** gastrojejunostomy for **treatment** of **gastric outlet obstruction** in unresectable advanced **gastric** cancer is a safe technique, allowing a more complete diet with lower morbidity and improved survival.

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Malignant Gastric Outlet Obstruction - Cancer Therapy Advisor

<https://www.cancertherapyadvisor.com/.../malignant-gastric-outlet-obstruction> ▾

May 25, 2015 - GOO occurs when there is a mechanical obstruction impeding gastric emptying. GOO has both benign and malignant etiologies, however the history and physical exam findings are similar.

Author: C. Andrew Kistler, MD, Pharmd

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The median survival was superior in the gastric partitioning gastrojejunostomy, achieving an overall survival of 6.5 months. CONCLUSIONS: The gastric partitioning gastrojejunostomy for treatment of gastric outlet obstruction in unresectable advanced gastric cancer is a safe technique, allowing a more complete diet with lower morbidity and improved survival.

Stomach-Partitioning Gastrojejunostomy for Gastroduodenal ...

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Jul 01, 2007 · For patients with gastroduodenal outlet obstruction (GOO) due to unresectable advanced malignant disease in the upper gastrointestinal tract, several treatments are available (ie, bypass surgery, enteral stenting, jejunostomy, or intravenous hyperalimentation).

Cited by: 12

Author: Keisuke Kubota, Junko Kuroda, Nobuto ...

Publish Year: 2007

Author: Keisuke Kubota, MD, PhD

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Gastric partitioning for the treatment of malignant gastric outlet obstruction

Marcus FKP Ramos, Leandro C Barchi, Rodrigo J Oliveira, Marina A Pereira, Donato R Mucerino, Ulysses Ribeiro Jr, Bruno Zilberstein, Ivan Cecconello

ABSTRACT

BACKGROUND

Gastric outlet obstruction (GOO) is one of the main complications in stage IV gastric cancer patients. This condition is usually managed by gastrojejunostomy (GJ). However, gastric partitioning (GP) has been described as an alternative to overcome possible drawbacks of GJ, such as delayed gastric emptying and tumor bleeding.

AIM

To compare the outcomes of patients who underwent GP and GJ for malignant GOO.

METHODS

We retrospectively analyzed 60 patients who underwent palliative gastric bypass for unresectable distal gastric cancer with GOO from 2009 to 2018. Baseline clinicopathological characteristics including age, nutritional status, body mass index and performance status were evaluated. Obstructive symptoms were graded according to the Gastric Outlet Obstruction Score (GOOS). Surgical outcomes evaluated included duration of the procedure, surgical complications, mortality and length of hospital stay. Acceptance of oral diet after the procedure, weight gain and overall survival (OS) were long term outcomes evaluated.

RESULTS

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作者 : JKJ Gaidos - 2009 - 被引用次数 : 80 - 相关文章

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作者 : A El-Shabrawi - 2006 - 被引用次数 : 6 - 相关文章

Summary. BACKGROUND: Palliative gastroenteric bypass surgery, the mainstay in the treatment of gastric outlet obstruction, has several disadvantages, ...