

EARLY GASTRIC CÂNCER: DIAGNOSIS AND SURGICAL TREATMENT.

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Introduction

Gastric cancer is the fifth most common cancer worldwide and the third leading cause of cancer death. Successful detection of Early Gastric Cancer could significantly improve survival up to 90%.

Purpose

To find out the importance of diagnosis of EGC to increase the life span of the patient with the best Possible treatment.

Keywords

Early Gastric cancer(EGC), endoscopic examination.

Results

High definition endoscopy is good modality for early diagnosis of gastric cancer, but still misses 20-25% accuracy(fig. 3). Magnifying endoscopy combined with narrow band imaging (NBI) allows for very high accuracy, with sensitivity and specificity of over 95% (fig. 1). Endoscopic resection is an effective treatment of choice in early gastric cancer. If suspected lymph node metastases then gastrectomy is the standard modality of choice.

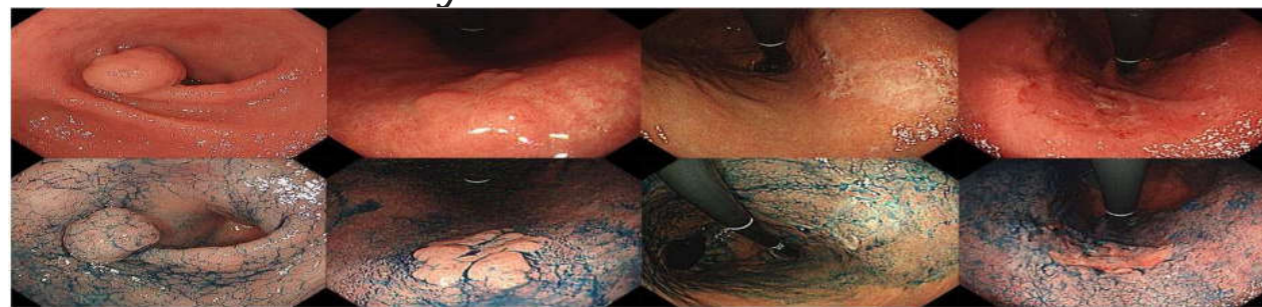


Fig.2 Representative images of the Paris endoscopic classification (upper row: white light only, lower row: same lesions under chromoendoscopy) (Fujiyoshi et al., 2021).

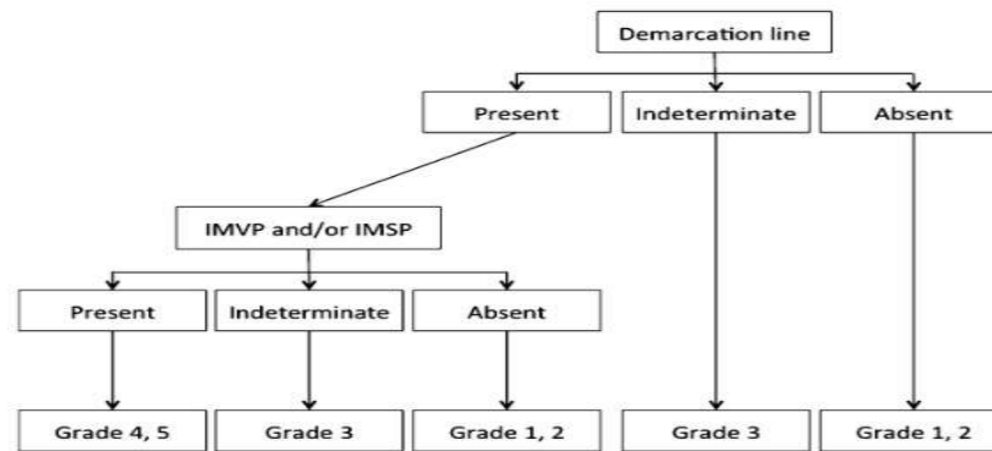


Fig.1 Diagnostic flow diagram demonstrating the correlation between the VS (vessel plus surface) classification and Grades 1-5. IMVP irregular microvascular pattern, IMSP irregular microsurface pattern (Yao et al., 2014).

Characteristics	Description
Demarcation line	Present
Microsurface pattern	Irregular
Microvascular pattern	Irregular
	1. Fine network pattern (mesh formation)
	2. Corkscrew pattern (tortuous pattern with no connections)

Fig.3 VS classification (Fujiyoshi et al., 2021).

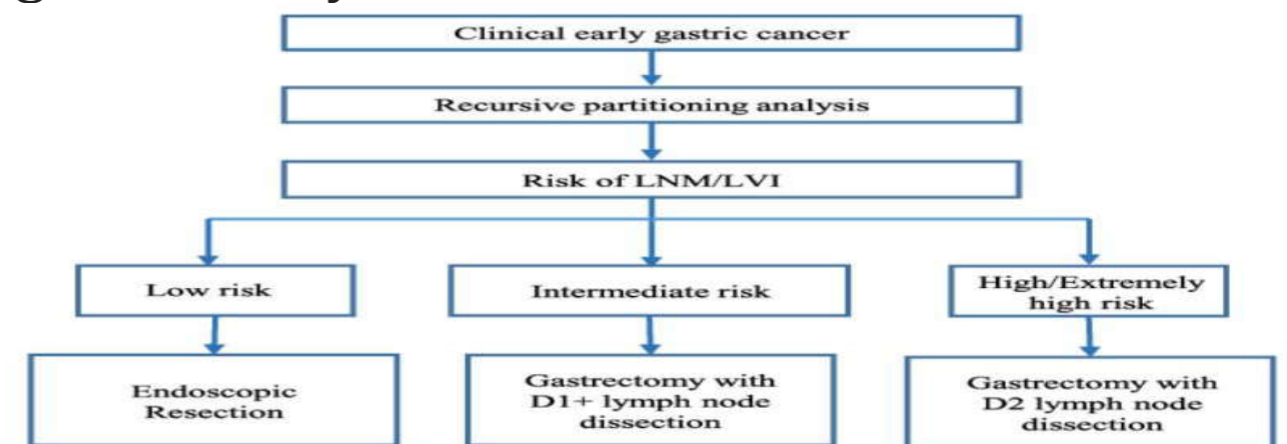


Fig.4 Algorithm for the endoscopic or surgical treatment of early gastric cancer (Wang et al., 2019).

Conclusions

Concluding all methods of diagnosis for early gastric cancer, Endoscopy have advanced to facilitate better assessment(fig. 2). Also with the evaluation of patient illness endoscopic mucosal resection or gastrectomy is the best approach to tackle early gastric cancer(fig. 4).

Material and methods

This research represents a detailed synthesis of bibliographic sources published in scientific databases such as PubMed and Google Scholar in the years 2018-2022.