

Surgical outcomes after gastrectomy in very elderly patients with gastric cancer

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Abstrak

ABSTRACT

Purpose: Whether or not gastrectomy is feasible for very elderly gastric cancer patients is unclear. This study aimed to clarify the feasibility and safety of surgical treatment for patients in this age group.

Method: The study included 55 very elderly patients with resectable gastric cancer who underwent gastrectomy (≥85 years of age; very-E group). The surgical outcomes were compared with those of 611 elderly patients (75-84 years old; E group).

Results: Female sex, a poor physical and performance status, and a low serum albumin level patients were more frequent in the very-E group than in the E group. Lymphadenectomy was less aggressive in the very-E group than in the E group ($P < 0.001$). The overall postoperative complication rate was not significantly different between the groups (46 vs 33%; $P = 0.073$). A multivariate analysis to predict the overall survival identified male sex (hazard ratio 1.75, 95% confidence interval 1.30-2.36), low body mass index (2.19, 1.52-3.16), poor performance status (2.14, 1.60-2.86), low serum albumin level (1.84, 1.37-2.48), and advanced tumor stage (1.71, 1.29-2.27) but not age (1.31, 0.84-2.03) as independent prognostic factors.

Conclusion: Chronological age alone is not a contraindicative factor for gastrectomy in very elderly patients.