

Classification of remnant stomach shape after distal gastrectomy with billroth-I reconstruction and a comparison of the postoperative outcomes

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Abstrak

ABSTRACT

Purpose

To classify the shape of the remnant stomach after Billroth-I (B-I) reconstruction and evaluate the relationship between the shape of the remnant stomach and the postoperative clinical outcomes.

Methods

One hundred and ninety-five consecutive patients with gastric cancer underwent distal gastrectomy with B-I reconstruction between May 2006 and October 2014. We retrospectively reviewed their medical records and radiological findings. Finally, the shapes of the remnant stomach of 150 patients were classified as either straight type (type A) or stagnant type (type B). The clinical outcomes were compared with respect to the types of remnant stomach.

Results

The incidence of anastomotic leakage was significantly higher in the type A group than in the type B group (9.4 vs. 1.5%, $p=0.044$). The body weight change ratio after surgery was significantly lower in the type B group than in the type A group [$p=0.0068$, two-way repeated measures analysis of variance (ANOVA)], while the serum albumin levels showed marginally significant improvement in the type B group compared with the type A group ($p=0.0542$, two-way repeated measures ANOVA).

Conclusion

The shape of the remnant stomach after distal gastrectomy with B-I reconstruction might influence the degree of anastomotic leakage and long-term nutritional status.