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Stomach cancer: epidemiological, diagnostic and therapeutic aspects at the Kara Teaching Hospital, Togo

Objective: To report our experience in the management of gastric cancers at the Kara University Hospital (Togo). Materials and methods: This was a retrospective and prospective study which was conducted from January 1, 2018, to July 31, 2021, in the general surgery and hepato-gastroenterology department of the Kara University Hospital (Togo). This study involved all patients treated for gastric cancer during the study period at CHU Kara (Togo). Results: We recorded 32 gastric cancers out of the 218 cases of cancer diagnosed during the study period. We had 20 men and 12 women with a sex ratio (M/F = 1.7). The average age was 58 years with the extremes ranging from 17 to 85 years. The pattern of the consultation was dominated by epigastralgia (100%) and deterioration in general condition (100%). Upper digestive endoscopy with biopsies was performed in all our patients. The antral localization was the most found in 62.5% of cases. The most common macroscopic appearance was ulcers-budding (90.6%) and the dominant histological type was moderately differentiated adenocarcinoma (87.5%). The extension assessment found liver metastasis in 10 cases, multiple regional lymphadenopathies of the hepatic pedicle and celiac trunk in 26 cases, ascites related to peritoneal carcinomatosis in 26 cases. Therapeutically, a 4/5 gastrectomy with D1 dissection was performed in 6 cases; gastrojejunal anastomosis in one case and palliative treatment in 25 cases. Survival at 1 year is 50% (3 patients) among operated patients. All the other patients (78.1%) who received palliative treatment all died within 3 months.

Conclusion: Improving the prognosis of stomach cancer like other cancers requires early diagnosis to perform a gastrectomy, the only guarantee of long survival.