

## Safety and Efficacy of Laparoscopic D2 Gastrectomy for Advanced Gastric Cancers Single Unit Experience

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**Abstract :** Background: Laparoscopic D2 Gastrectomy for non metastatic advanced Gastric cancer (AGC) has become a controversial topic as there are confronting ideas from experts in the field. Lack of consensus are mainly due to non feasibility of the dissection and safety and efficacy. Method: Data from all D2 Gastrectomies performed (both Subtotal and Total Gastrectomies) in our unit from 2009 December to 2013 December were retrospectively analysed. Computer database was prospectively maintained. Pathological stage two A (iiA) and above considered advanced Gastric cancers, who underwent curative intent D2 Gastrectomy were included for analysis(n=46). Four patients excluded from the study as peritoneal fluid cytology came positive for cancer cells and one patient exempted as microscopic resection margin positive(R1) after curative resection. Thirty day morbidity and mortality, operative time, lymph nodes harvest and survival (disease free and overall) analyzed. Results: Complete curative resection achieved in 40 patients. Mean age of the study population was 62.2 (32-88) and male to female ratio was 23: 17. Thirty day mortality (1/40) and morbidity (6/40). Average operative time 203.7 minutes (185-400) and average lymphnodes harvest was 40.5 (18-91). Disease free survival of the AGC in this study population was 16.75 months (1-49). Average hospital stay was 6.8 days (3-31). Conclusion: Laparoscopic dissection is effective feasible and safe in AGC.

**Keywords :** laparoscopy, advanced gastric cancer, safety, efficacy

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