

Dr. Naveen Padmanabhan, Apollo Hospital, Chennai, India

Host Institution : Kishiwada Tokushukai Hospital, Osaka, Japan

Cytoreductive surgery, Hyperthermic Intraperitoneal chemotherapy, Early Postoperative IntraPeritoneal Chemotherapy and Extensive Intra Peritoneal Lavage

Abstract

India has a rising incidence of stomach cancers and substantial number of patients report to medical care at advanced stages of disease. Most common site of failure after treatment or most common site of spread is peritoneal metastasis (tumor in lining of the abdomen). This tumor doesn't respond well to conventional chemotherapy and the average survival with chemotherapy is only 6 months. Direct instillation of chemotherapy in to the peritoneum is known as Intra-peritoneal chemotherapy and heated infusion of chemotherapy is known as heated intra-peritoneal chemotherapy (HIPEC).

Japan is known for high incidence of stomach cancer due to dietary factors, high prevalence of H.pylori etc. Nevertheless the results of gastric cancer surgeries and survival results of gastric cancer patients have been better than centers in rest of world. Japanese surgeons have developed various modalities of intra-peritoneal chemotherapy and have reported impressive survival results.

India has a very similar pool of patients with advanced gastric cancers but the treatment of IP chemotherapy and NIPS hasn't gained popularity. The visit to Japan to Kishiwada Tokushaki Hospital, Osaka would provide me an opportunity to observe the techniques of gastric cancer surgeries from Japanese surgeons and observe all variants of IP chemotherapy like neo-adjuvant intra-peritoneal and systemic chemotherapy, Minimally invasive Laparoscopic HIPEC, Early Intra-Peritoneal Chemotherapy. All these therapies have been proved efficacious in advanced gastric cancers to reduce the disease burden and improve the cure rates.

These Intra-peritoneal therapies protocols can be learnt and applied in our country patients to improve the gastric cancer outcomes.