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Summary

EPSTEIN-BARR VIRUS AND CLINICO-ENDOSCOPIC CHARACTERISTICS OF GASTRIC REMNANT CANCERS AND PROXIMAL NON-REMANT CANCERS

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In a Western population-based cohort from Central Norway, gastric remnant cancers showed a high EBV-positivity rate of 18.7%, though not significantly different from proximal gastric cancers, and presented more often with anaemia and less often with ulceration.

KEY POINTS

- Among 78 gastric remnant cancers identified in 1217 gastric adenocarcinoma patients between 2001-2016, 18.7% were EBV-positive compared to 10.9% of proximal non-remnant cancers, a difference that was not statistically significant (p=0.23)
- The median latency from initial distal gastrectomy to gastric remnant cancer diagnosis was 37.6 years, with 97.4% of patients having had benign disease as the indication for the original surgery
- Gastric remnant cancer patients presented more frequently with anaemia (32.1% vs 16.1%, p=0.036) and less frequently with upper abdominal pain (12.8% vs 35.7%, p=0.002) compared to proximal non-remnant cancers
- Ulceration at endoscopy was significantly less common in gastric remnant cancers than proximal non-remnant cancers (17.9% vs 57.1%, p<0.001)
- This study provides Western population data on EBV prevalence and clinical presentation patterns in gastric remnant cancers versus other proximal gastric adenocarcinomas

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