

LONG-TERM PROGNOSIS OF MIXED HISTOLOGICAL-TYPE GASTRIC CANCERS CURED BY ENDOSCOPIC RESECTION: A MULTICENTER PROSPECTIVE COHORT STUDY (J-WEB/EGC)

Naohiro Yoshida

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Poster

Oesophagus

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A prospective Japanese cohort of 6,595 patients with early gastric cancer treated by curative endoscopic resection found that mixed histological-type tumors had significantly lower disease-specific survival than pure histological-type tumors, particularly in the subgroup with ulceration.

KEY POINTS

- Among 6,595 patients (6,434 pure histological type, 161 mixed histological type) followed for 5 years after curative endoscopic resection, overall survival did not differ between groups (92.5% vs 90.5%, $p=0.415$).
- Primary disease-specific survival was significantly lower in mixed histological-type gastric cancers compared to pure histological-type (99.4% vs 99.96%, $p=0.003$).
- In the eCura A-2 subgroup (differentiated-type with ulceration), mixed histological-type tumors had markedly lower disease-specific survival than pure histological-type (94.4% vs 100%, $p<0.001$).
- The authors suggest that mixed histological-type gastric cancers with ulcers might need careful surveillance despite meeting curative resection criteria.
- This material is relevant for gastroenterologists and oncologists managing early gastric cancer after endoscopic resection.

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