

EFFICACY OF ANTRECTOMY FOR PATIENTS WITH MULTIPLE TYPE I GASTRIC NEUROENDOCRINE TUMORS

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Poster

Oesophagus

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Antrectomy in seven patients with multiple type I gastric neuroendocrine tumors led to normalization of gastrin levels and tumor disappearance in six patients without recurrence over a median 48-month follow-up.

KEY POINTS

- Seven patients with multiple type I gastric neuroendocrine tumors underwent antrectomy, either as initial treatment (three patients) or after endoscopic submucosal dissection (four patients).
- Median gastrin levels decreased significantly from 3900 pg/mL preoperatively to 73 pg/mL after antrectomy.
- Residual tumors disappeared in six patients and regressed in one patient, with a median time to disappearance of 20 months.
- No recurrence or cause-specific death occurred during a median follow-up of 48 months.
- The authors conclude that antrectomy may control local disease, prevent recurrence, and allow avoidance of total gastrectomy in patients with multiple type I gastric neuroendocrine tumors.

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