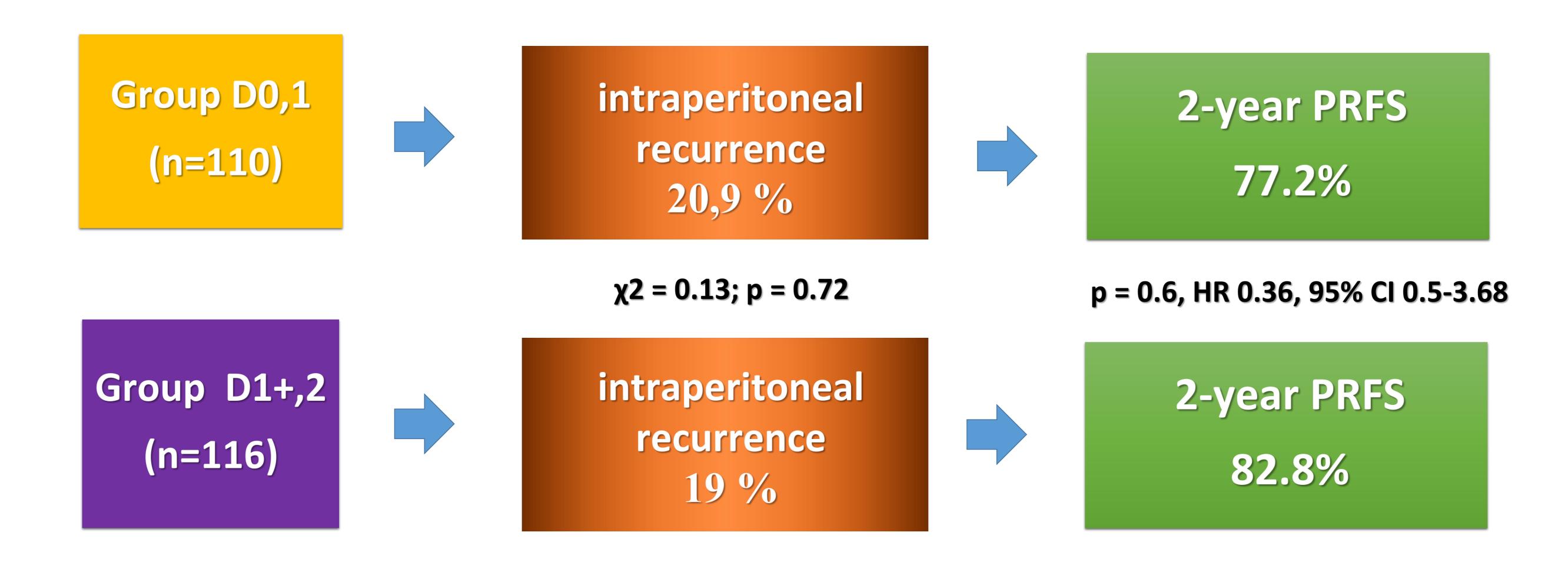
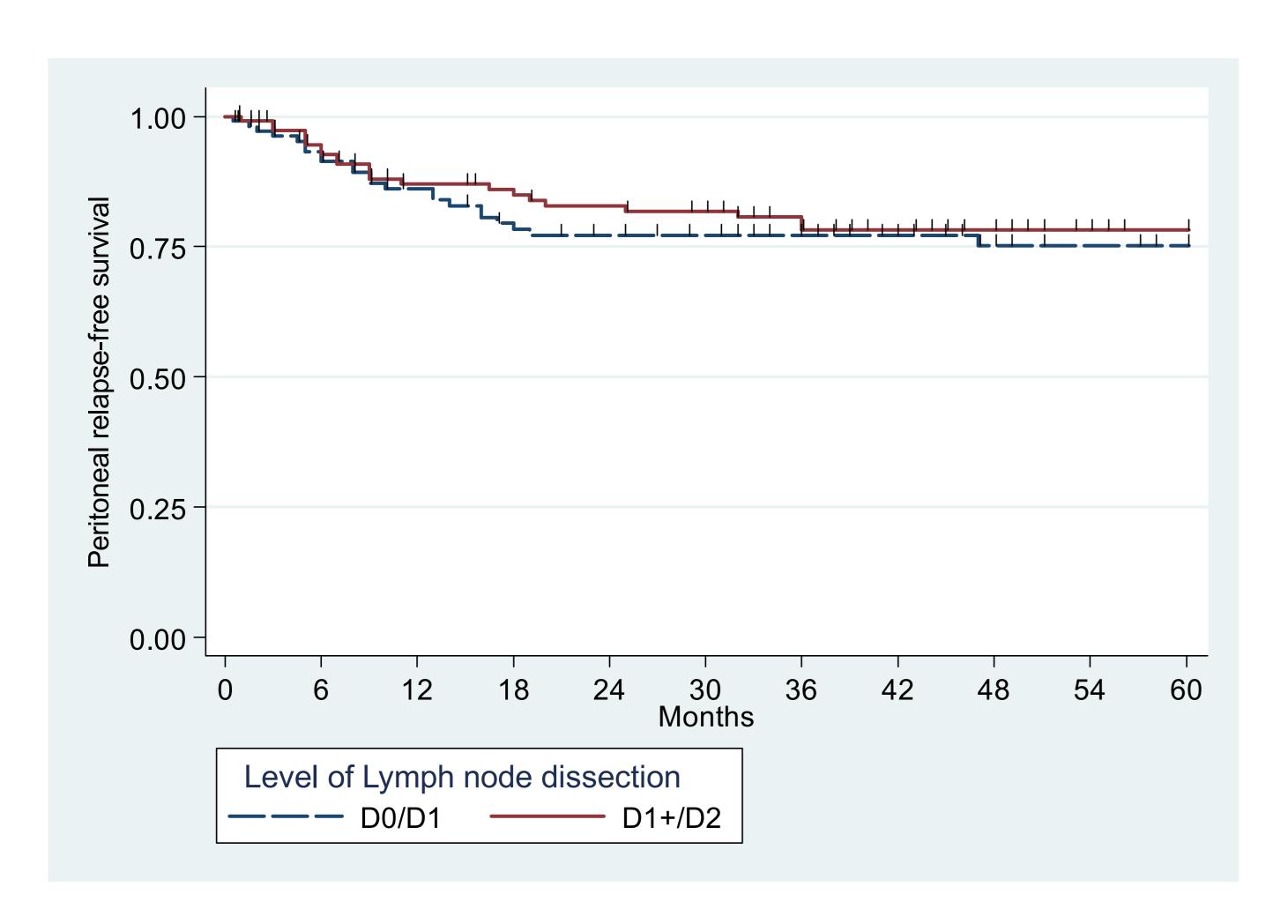
## DOES D2 LYMPH NODE DISSECTION INCREASE THE RISK OF INTRAPERITONEAL RECURRENCE OF GASTRIC CANCER AFTER RADICAL SURGERY?

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The level of intraperitoneal recurrence and peritoneal recurrence free survival (PRFS) in 226 patients with localized and locally advanced GC after radical surgery with different levels of lymph node dissection were analyzed.





Significant increase of 5-year overall survival of patients with diffuse/mixed GC type with D1+,2 lymph node dissection was found (p = 0.048), and loss of efficacy of this level of lymph node dissection in cases of gastric serous membrane area lesion > 5 cm2.

## Conclusions

- •Carrying out D1+,2 lymph node dissection during surgical treatment of GC does not increase the risk of intraperitoneal recurrence in the long term.
- •The effect of D1+,2 lymph node dissection on overall survival is offset by intraperitoneal relapse in patients with diffuse/mixed type of GC and serous membrane lesion area > 5 cm2.