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LETTER TO THE EDITOR

# Is endoscopic stent insertion a good choice?

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To the Editor

We have read with interest the article published by Haga Yoshio et al. [1]. Although we believe it is a very interesting topic and plays an important role in guiding us to treat for gastric outlet obstruction, we would like to offer the following points for your consideration.

First, patients in both groups did not receive preoperative nutritional status scores, such as Nutrition Risk Screening-2002 (NRS-2002), because patients with poor nutritional status had higher complications and longer hospital stay than those with good nutritional status [2].

Second, Haga Yoshio et al.'s [1] research shows that endoscopic stent insertion has the advantages of better efficacy and faster recovery than gastrojejunostomy. However, the disadvantages of endoscopic stent insertion include stent displacement, tumor growth along the stent, and easy obstruction again [3]. Jang Seung Hyeon et al.'s [4] study found that the incidence of re-obstruction in endoscopic stent insertion is much higher than gastrojejunostomy.

In conclusion, both gastrojejunostomy and endoscopic stent insertion can effectively solve pyloric obstruction. Endoscopic stent insertion has the advantages of fast recovery and short hospital stay, but the rate of re-obstruction is high, so it needs to be intervened again; the duration of patency is longer after surgical removal of obstruction. Therefore, endoscopic stent insertion should be selected for patients with poor physical condition, while gastrojejunostomy should be selected for patients with good physical condition and long life expectancy to prevent obstruction again.

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## Compliance with ethical standards

**Conflict of interest** The authors declare that they have no conflict of interest associated with this manuscript.

## References

1. Yoshio H, Naoki H, Takahiro K, Toshiyasu O, Yoshihiro N, Shirou K, et al. Treatment option of endoscopic stent insertion or gastrojejunostomy for gastric outlet obstruction due to gastric cancer: a propensity score-matched analysis. Gastric Cancer. 2020. https://doi.org/10.1007/s10120-020-01040-0.
2. Alfred A, Pavel S, Arved W, Lobo DN. The impact of preoperative immune modulating nutrition on outcomes in patients undergoing surgery for gastrointestinal cancer: a systematic review and meta-analysis. Ann Surg. 2019;270:247–56.
3. Khashab M, Alawad AS, Shin EJ, Kim K, Bourdel N, Singh VK, et al. Enteral stenting versus gastrojejunostomy for palliation of malignant gastric outlet obstruction. Surg Endosc. 2013;27:2068–75.
4. Jang SH, Lee H, Min BH, Kim SM, Kim HS, Carriere KC, et al. Palliative gastrojejunostomy versus endoscopic stent placement for gastric outlet obstruction in patients with unresectable gastric cancer: a propensity score-matched analysis. Surg Endosc. 2017;31:4217–23.



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