LETTER TO THE EDITOR

Reply to “Totally Laparoscopic Gastrectomy: A Reality for USA and Europe?” (ASO-2009-04-0501.R1)

TO THE EDITORS:

We would like to thank Dr. Hottenrott and colleagues for their strongly supportive comments regarding our recent publication “Laparoscopic versus Open Subtotal Gastrectomy for Adenocarcinoma: a Case–Control Study.” We concur with the authors that, once the basic oncologic principles of clear margins and complete lymphadenectomy have been achieved, outcome is largely determined by the biology of disease rather than surgical technique. Our study confirms that, although technically demanding compared with open gastrectomy, the minimally invasive approach offers additional short-term advantages of improved quality of life and decreased complications.

While we have no reason to believe that the comparable short-term survival rates will diverge, we continue to follow these patients long-term to confirm this assumption.

One of the challenges to be overcome prior to laparoscopic gastrectomy becoming the standard approach is that its efficacy has been demonstrated only in high-volume centers with specialized skills. The minimally invasive approach is not appropriate for all patients, and we continue to refine appropriate selection criteria with the priority being complete and safe oncologic resection. This analysis of our initial experience should help to provide the foundation for further studies defining the role of minimally invasive gastrectomy in managing patients with gastric adenocarcinoma.

**Vivian E. Strong, MD, Peter J. Allen, MD,
Murray F. Brennan, MD, and Daniel G. Coit, MD**
Department of Surgery, Memorial Sloan-Kettering Cancer
Center, New York, NY
e-mail: strongv@mskcc.org

Published Online: 19 June 2009
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