



Video of the month

First gastroduodenal artery approach for gastric cancer lymphadenectomy in situations of anatomical variations



Abordaje primario de la arteria gastroduodenal para la linfadenectomía del cáncer gástrico en situaciones de anomalías anatómicas

Alberto García Picazo, Ana Pérez Zapata,* Elías Rodríguez Cuéllar, Eduardo Ferrero Herrero

Servicio de Cirugía General, del Aparato Digestivo y de Trasplantes de Órganos Abdominales, Hospital Universitario 12 de Octubre, Universidad Complutense de Madrid, Madrid, Spain

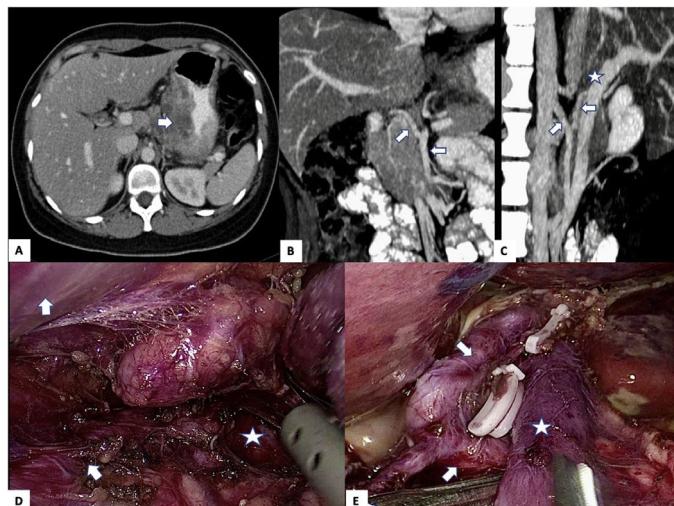


Fig. 1

Case report

A 31-year-old woman presented with a 7-cm lesion in the lesser curvature of the stomach with possible invasion of the

pancreas and retroportal right hepatic artery of the superior mesenteric artery. After neoadjuvant treatment, total gastrectomy with laparoscopic distal splenopancreatectomy (histology: signet ring cell adenocarcinoma, T4N3M0) was performed using a primary approach of the gastroduodenal

* Corresponding author.

E-mail address: apzapata@salud.madrid.org (A. Pérez Zapata).
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artery for lymphadenectomy (groups 8 and 9). The postoperative evolution was favorable, and the patient continued to be disease-free 6 months later (*Fig. 1*).

The primary approach of the gastroduodenal artery in lymphadenectomy for gastric cancer guarantees optimal visualization of the structures and possible vascular anomalies, thereby avoiding injuries and ensuring oncological results.

Conflict of interests

The authors have no conflict of interests to declare.

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Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi:<https://doi.org/10.1016/j.ciresp.2022.06.020>.