

Special Issue on
Endoscopic and Surgical Treatment in Gastric Cancer

CALL FOR PAPERS

Gastric cancer remains one of the most serious cancers worldwide and currently ranks fourth in the incidence of cancer and cancer-related deaths. Management of gastric cancers is complex and, therefore, necessary for prompt conversions. The strategy for treatment does not reach a consensus, particularly between Asian and Western studies. Recently, the tumor (T), the extent of spread to the lymph nodes (N), and the presence of metastasis (M) classification system for gastric cancer were developed and the extent of gastric resection and/or lymphadenectomy were revised. There is currently an increased number of patients with early stage gastric cancer than before, which is due to familiar GI fiber technology.

The development of new endoscopic techniques has a potential to improve the result of diagnosis, staging, and resection in gastric cancer. Endoscopic treatments of Endoscopic Mucosal Resection (EMR) and Endoscopic Submucosal Dissection (ESD) have been widely accepted and used for the treatment of early stage gastric cancers. Minimally Invasive Surgery (MIS) progressively developed, firstly with the advent of laparoscopy and more recently with the spread of robotic surgery. MIS for gastric cancer has rapidly progressed with the development of surgical instruments and techniques, especially in Eastern countries.

In locally advanced gastric cancer, the therapeutic strategy has shifted within the last few years with an increased emphasis from adjuvant therapy to neoadjuvant or perioperative chemotherapy with surgery due to results of many clinical trials. The prognosis of initially metastatic and unresectable cancers is still unsatisfactory. Palliative chemotherapy remains the most current treatment strategy for stage IV patients. Recent studies showed that patients who demonstrated a response to chemotherapy could be reconsidered for the so-called conversion surgery to get survival benefit.

The issue aims to provide an update on gastric cancer treatment, highlighting current individualized strategies and future perspectives. We welcome review and original manuscripts covering diagnosis, surgical treatment, chemotherapy, and molecular targeted therapy.

Potential topics include but are not limited to the following:

- ▶ Endoscopic evaluation of early gastric cancer
- ▶ Endoscopic ultrasound in gastric cancer staging
- ▶ Endoscopic resection including ESD and EMR
- ▶ Minimally invasive surgery including laparoscopic and robotic surgery
- ▶ Conversion surgery for unresectable advanced gastric cancer
- ▶ Chemotherapy including neoadjuvant and palliative therapy plus surgery

Authors can submit their manuscripts through the Manuscript Tracking System at <https://mts.hindawi.com/submit/journals/cjgh/gastroenterology/ugct/>.

Papers are published upon acceptance, regardless of the Special Issue publication date.

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