



Advanced Gastric Cancer

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Message from the Guest Editors

Dear Colleagues,

In Western countries, the majority of gastric cancers (GC) is diagnosed in advanced stages reporting a 5-year survival rate of only 20–25%. In order to improve treatment strategy, a most accurate staging process should be completed. Availability of high-quality imaging and access to diagnostic laparoscopy with lavage cytology should be part of the diagnostic pathway for gastric cancer patients. Treatment of nonmetastatic, resectable, locally advanced gastric cancer is based on a combination of surgery and perioperative chemotherapy. In selected groups of patients with high risk of locoregional recurrence, (neo)adjuvant chemoradiotherapy should be considered. New epidemiological trends of GC in the Western countries include an upward shift in the location of the primary tumor and a relative increase of advanced and diffuse type tumors.

These unsolved problems dictate the modification of multidisciplinary management towards a more individualized approach for the treatment of advanced GC.

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Message from the Editor-in-Chief

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