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# **Surgical Management of Gastric Cancer**

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## Message from the Guest Editors

Gastrectomy is the cornerstone of curative treatment for with gastric cancer. Minimally patients invasive gastrectomy may improve the surgical outcome; however, it remains unclear to which extent it is superior to open techniques. Furthermore, the role of robotics and sentinel node biopsy needs to be established. For gastroesophageal junction tumors, the optimal surgical approach is less clear and may consist of a gastrectomy or esophagectomy.

The treatment of patients with oligometastatic disease or peritoneal metastases is changing rapidly. Enhanced recovery programs have been introduced to quicken postoperative recovery by early mobilisation and feeding. The use of jejunostomy tube feeding is under debate. Evidence regarding the optimal staging of gastric cancer and timing of treatment is lacking, and the same applies to the follow-up regimen.

This Special Issue aims to give insight into the mentioned aspects of surgical gastric cancer treatment, which emphasis on the new developments of multimodality treatment and fast recovery programs leading to increased survival with improved quality of life.









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