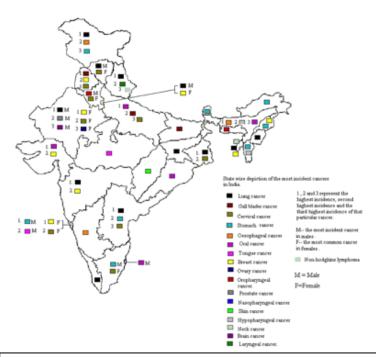
CANCER OF THE STOMACH

Cancer of the Stomach is the **fifth** most common cancer among males and **seventh** most common cancer among females in India. While relatively uncommon in most parts of India,

the prevalence is high in the Southern and North-eastern states of India where the incidence is as high as most cancer stomach countries of the world.

The worrying trend is that in most countries the incidence of cancer of the stomach is in decline, a **trend that is not reported in India**. It is thought that the high continuing usage of tobacco and alcohol contribute to India not following the world-wide trend.



Statewise depiction of the most incident cancers in India [Koul, 2010; ICMR, 2001; Somdatta, 2008; Das, 2005; Sharma, 2009; Gaur, 2006; Prasad, 2005; Malothu, 2010; Sumathi, 2009;

SO WHAT ARE THE FACTORS THAT MAY CAUSE CANCER OF THE STOMACH?

The following are known to be associated with cancer of the stomach:-

- DIETARY FACTORS (Excessive indulgence of)
 - High salt diet and
 - High nitrates in diet(nitrates are present in most food and water. Nitrates in the presence of protein, particularly meat protein form cancer causing products. Vitamin C containing foods prevent this conversion).
 - o Poor drinking water (well water).
 - Smoked or Salt-cured food.
- CIGARETTE SMOKING
- ALCOHOL INTAKE
- OCCUPATIONAL
 - Rubber workers
 - Coal workers

In one study concentrating on Gangetic West Bengal, the commonest symptom was abdominal pain followed by indigestion, weight loss and loss of appetite, traditionally to animal protein. Therefore. any person who has persisting symptoms despite adequate and full treatment must be investigated.

WHAT DO I DO IF I HAVE THESE SYMPTOMS?

If these symptoms persist or recur after treatment, you must ask your doctor to refer you to a gastroenterologist. The gastroenterologist will in all probability advise an endoscopy.

WHAT IS AN ENDOSCOPY?

The Gastroenterologist will put a tube down the patient's intestine with camera system at the end. This will allow him to see the inside of the stomach and the duodenum. This procedure is safe in trained hands and is usually done after ensuring that the sensitive throat area is anaesthetised. Some may even require a mild sedative to enable the doctor to see inside without causing discomfort.



If the doctor thinks that there is a problem in the stomach, he will carry out a biopsy. Sometimes the biopsy is negative. However, if the impression is that of a cancer, you may be subjected to a repeat endoscopy and biopsy. Some cancers of the stomach are negative on repeated biopsies. Here, if the condition does not improve despite optimum treatment and the lack of improvement documented on repeated endoscopies, an operation may still be advised.

WHAT ARE THE OTHER TESTS ADVISED?

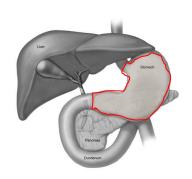
The doctor will want to find out whether the disease has spread and will advise for a chest x-ray, and either an ultrasound scan or a ct scan of the whole abdomen. The doctor may also ask for some tests to establish your suitability for undergoing an operation.

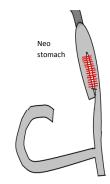
The patient may be asked to undergo a full blood test as some are quite anaemic from loss of blood and under nutrition. In addition to these tests you may well have to undergo a full cardiac evaluation. It is likely that the patient may also be asked to start some breathing exercises prior to the operation.

TREATMENT

The treatment of a stomach cancer is a multi-disciplinary exercise and the patient may be visited by an oncologist (medical and or radiation). The operation preferred nowadays is a near complete or complete removal of the stomach and a bypass to the small intestine.

We prefer creating a new stomach by fashioning a pouch from the small intestine. We do this because in India we are used to a cereal-based bulky diet. The pouch is created to ensure that our patients do not develop malnutrition in the long term as a result of a very small stomach. It has been our experience that the pouch made





becomes as large as the original stomach over a period of time.







The patient may be asked to undergo further treatment with medicines (chemotherapy) and radiation depending on the final pathological report.