

# Other treatment modalities

## Other treatment modalities

Because of the failure of radical surgery to cure advanced gastric cancer, there has been an interest in the use of radio therapy and chemotherapy . Palliative radiotherapy The routine use of radiotherapy is controversial as the results of clinical trials are inconclusive. There are a number of radiosensitive tissues in the region of the gastric bed, which limits the dose that can be given. Radiotherapy has a role in the palliative treatment of painful bony metastases. - Palliative chemotherapy There are a number of regimes, but the best results are currently obtained using either platinum-containing triplet combina - tions or FLOT . Second-line treatment using combinations that

Middle Cardia Cardia and oesophagus N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N1 N2 N2 N1 N2 N2 N1 N2 N1 N2 N2 Figure 67.31 Oesophagojejunostomy Roux-en-Y .

for advanced disease is palliative. Newer biological agents such as trastuzumab (Herceptin) o ff er potential advantages to survival in the minority of patients (<20%) with HER2 -positive gastric cancer. However, the absolute survival advantages are small (~4 months) and the cost of treatment is high. Never theless trastuzumab has been approved for use in metastatic HER2 - positive gastric cancer in the UK and European Union.

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