

PROBLEMATIK DES MAGENERSATZES

—Changing Trends in Gastrectomy—

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Tody "gastrectomie de principe" is replaced by "gastrectomie de nécessité". Gastrectomy is accompanied by a high operative mortality, a high postoperative morbidity and a low 5-years survival rate. Therefore gastrectomies should be performed only if there is no alternative operation.

The most important features for gastrectomy are: simplicity and security in performing the operation, avoidance of reflux, construction of a sufficient reservoir, maintaining duodenal passage and slacking down the transit-time of the foods.

Continuity of the intestinal tract by gastrectomy on principle is restored in two ways:

1. in maintaining the passage of duodenum with or without interposition of a small bowel segment
2. without maintaining the passage of duodenum with or without construction of a sufficient reservoir

Some of the more than 50 possibilities to restore the continuity of the intestinal tract will be demonstrated.

There are 3 methods which widely fulfill the prementioned criteria: the operation according to Schloffer, Longmire-Gütgemann and Lawrence-Rodino.

The superiority of one of these methods only can be tested by controlled clinical trials which we shall start in this year after having evaluated retrospectively the results of several surgical techniques over a period of 5 years.
