	Dissection		
	D1	D2	P Value
	(n=35)	(n=41)	
Type of gastrectomy			p= 0.031
Total	33% (11p)	56% (23p)	
Partial	67% (24p)	44% (18p)	
Other organ resection			p= 0.001
spleen	8.5% (3p)	29% (12p)	
spleen+ tail pancreas		15% (6p)	
Morbidity	32% (11p)	41% (17p)	ns
Hospital stay (days)	11d (SD: 5.1)	16d (SD: 10)	p= 0.012
Hospital mortality	8.5% (3p)	9.7% (4p)	ns

tions have been found when the resection of other organs has been necessary. It has been considered, until today, the need of pancreas tail and the spleen resection to carry on a correct D2 limphadenectomy in tumors localized at upper third and middle third[8], but nowadays the preservation of that organs is not incompatible with a correct limphadenectomy[9], and they must be only ressecated if there are a direct invasion or adenomegalies impossible to resect without take out the organ[10]. Morbi-mortality and average hospital stay in our trial is similar of the other studies[5,6]. Our results do not support the routine resection of the spleen or the tail of the pancreas for the upper and middle third gastric cancer, and therefore getting a better morbidity and mortality, and lower post-operative stay.

References

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