

NCCN Clinical Practice Guidelines in Oncology (NCCN Gui

Gastric Cancer

Version 3.2016

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NCCN Guidelines Version 3.2016 Updates Gastric Cancer

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Updates in Version 3.2016 of the NCCN Guidelines for Gastric Cancer from Version 2.2016 include: • The Discussion text has been updated to reflect the changes in the algorithm. (<u>MS-1</u>)

Updates in Version 2.2016 of the NCCN Guidelines for Gastric Cancer from Version 1.2016 include: GAST-6

Follow-up/Surveillance: Third bullet revised, "Radiologic imaging Chest/Abdominal CT with contrast or upper G
indicated."

<u>GAST-F</u>--Principles of Systemic Therapy

• Heading revised: "Systemic Therapy for Metastatic or Locally Advanced Cancer..." changed to "Systemic Thera Advanced, Recurrent or Metastatic Disease..."

GAST-H--Principles of Palliative/Best Supportive Care

• This section was extensively revised.

Updates in Version 1.2016 of the NCCN Guidelines for Gastric Cancer from Version 3.2015 include:

Global Changes

 Notations for clinical (c), surgical (yp), and pathological (p) staging were added to the tumor classification as ap guidelines.

GAST-1

• Workup:

- > Seventh bullet revised: "Endoscopic resection (ER) may contribute to accurate staging of early-stage cancers
- > Twelfth bullet revised: "Smoking cessation advice, counseling, and pharmacotherapy as indicated."
- Locoregional pathway: "Medically fit, unresectable" changed to "Surgically unresectable."
- Additional Evaluation: Revised recommendation "Consider laparoscopy with cytology."
- Footnote "f" revised: "Smoking cessation guidelines are available from the U.S. Public Health Service at: <u>http://</u>clinicians-providers/guidelines-recommendations/tobacco/clinicians/update/treating_tobacco_use08.pdf</u>. <u>See N</u>
 <u>Cessation</u>."
- Footnote "i" revised: "Medically able to tolerate major abdominal surgery."
- Footnote "j" revised: "Medically unfit patients Medically unable to tolerate major surgery or medically fit patient
- Footnote "k" revised: "Laparoscopy with cytology is performed to evaluate for peritoneal spread when consider surgery. Laparoscopy with cytology is not indicated if a palliative resection is planned. Laparoscopy with cytology stage T1b or higher."

GAST-2

- Under the new column heading "Conclusions of Multidisciplinary Review" revised pathways, "Laparoscopic fin disease (cM0)" and "Laparoscopic findings of Metastatic disease (cM1)."
- Primary treatment for cT2 or higher, Any N: Revised, "Preoperative Perioperative chemotherapy (category 1)."

GAST-3



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