

■ 4-EN Introduction of NEWS with sentinel node basin dissection for early gastric cancer

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Non-exposed endoscopic wall-inversion surgery (NEWS) is a useful technique of endoscopic full-thickness resection without transluminal access for early gastric cancer (EGC) or GIST with ulceration. Here, we report the introduction of NEWS with sentinel node basin dissection (SNBD) for EGC in our institute.

Case1. A 75-year-old male patient with EGC (U, Post, 0-IIc, 30mm, tub2, cT1a(M), N0, M0, StageIA). The SNB was the area of left gastric artery and no metastasis had occurred. The final pathological diagnosis was pT1b(SM2), Ly1a, V1a, pN0(0/16).

Case2. A 68-year-old female patient with EGC (M, Ant, 0-IIc, 25mm, por, cT1a(M), N0, M0, StageIA). The SNB was the area of left gastric artery and no metastasis had occurred. The final pathological diagnosis was pTa(M), Ly0, V0, pN0(0/50).

The both patients were uneventfully discharged 9 or 10 days after the procedure, respectively.

This surgical concept is expected to become a promising, minimally invasive, function-preserving surgery to cure cases of EGC that are possibly node-positive.

■ 4-JP 早期胃癌に対するセンチネルリンパ流域切除を併施した NEWS の導入経験

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非穿孔式内視鏡的胃壁内反切除術（NEWS）は非開放型 LECS による胃壁全層切除術であり，期胃癌や delle を有する GIST などにより適応となる．早期胃癌に対するセンチネルリンパ（SN）流域切除と NEWS の併施による治療の有用性が報告されているが，当施設における本治療法の導入経験について報告する．

症例 1. 75 歳，男性．術前診断は，U, Post, 0-IIc, 30mm, cT1a(M), NO, MO, StageIA で ESD 拡大適応病変の早期胃癌であった．SN 流域は左胃動脈領域で，SN はすべて陰性であった．切除検体の病理診断結果は，pT1b(SM2), Ly1a, V1a, NO(0/16) であった．

症例 2. 68 歳，女性．術前診断は，M, Ant, 0-IIc, 25mm, por, cT1a(M), NO, MO, StageIA で ESD 適応外病変の早期胃癌であった．SN 流域は左胃動脈領域で，SN はすべて陰性であった．切除検体の病理診断結果は，pT1a(M), Ly0, V0, NO(0/50) であった．

ともに合併症なく，術後経過は良好でそれぞれ術後 9 病日，10 病日に退院された．

SNBD と NEWS の併施は，リンパ節転移の可能性のある早期胃癌に対する低侵襲機能温存術式として期待される．