

## UOA MS

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### Patient Name:

### Special Instructions:

### Follow Up:

# Total Gastrectomy

A total gastrectomy is the surgical removal of the entire stomach. It is typically done to treat cancer of the stomach. It may also be performed to treat severe ulcers, obstruction, or injury ( *trauma*).

## LET YOUR CAREGIVER KNOW ABOUT:

- Allergies to food or medicine.
- Medicines taken, including vitamins, herbs, eyedrops, over-the-counter medicines, and creams.
- Use of steroids (by mouth or creams).
- Previous problems with anesthetics or numbing medicines.
- History of bleeding problems or blood clots.
- Previous surgery.
- Other health problems, including diabetes and kidney problems.
- Possibility of pregnancy, if this applies.

## RISKS AND COMPLICATIONS

You will be monitored closely for complications during surgery and recovery. Many complications can be treated. Complications may include:

- Bleeding.
- Infection.
- Reaction to anesthesia.
- Damage to other organs or tissue.
- Swelling ( *hernia*).
- Blood clot.

## BEFORE THE PROCEDURE

It is important to follow your caregiver's instructions prior to your procedure to avoid complications. Before your procedure, you may have:

- A physical exam, blood tests, stool test, X-rays, and other procedures.
- Chemotherapy or radiation therapy.
- Your caregiver review with you the procedure, the anesthesia being used, and what to expect

after the procedure.

You may be asked to:

- Stop taking certain medicines for several days prior to your procedure, such as blood thinners (including aspirin).
- Take certain medicines, such as antibiotics or stool softeners.
- Follow a special diet for several days prior to the procedure.
- Avoid eating and drinking after midnight the night before the procedure. This will help you to avoid complications from the anesthesia.
- Take an antibacterial shower the night before and/or the morning of the procedure.

Arrange for a ride home after surgery and to ask someone to help you with activities during recovery.

## PROCEDURE

This procedure is performed after you are given medicine to make you sleep (*general anesthesia*). It takes a few to several hours to complete. You will be asleep and you will not feel any pain. You will need to stay in the hospital for 7 to 10 days or longer, depending on your condition.

Total gastrectomy can be performed as an open procedure or a laparoscopic procedure. During an open procedure, the surgeon will make a 5 to 8 inch cut (*incision*) in the abdominal wall to access the stomach. During a laparoscopic procedure, 1 inch incisions are made in the abdominal wall. Small, lighted tubes (*laparoscopes*) with instruments are inserted into the surgical site. Sometimes, a combination procedure is performed using both of these techniques.

The surgeon will remove the entire stomach and connect the digestive tube (*esophagus*) to the small intestine. Depending on your condition, other parts (spleen, pancreas, lymph nodes) may be removed during surgery as well.

## AFTER THE PROCEDURE

- You will be monitored closely in a recovery room.
- You will get nutrition through an intravenous (IV) access tube.
- You might have a tube that runs through your nose into the esophagus to remove fluids. Once the intestines are working again, the tube in the nose will be removed. This usually happens in 2 to 3 days.
- You will be given medicine for pain.

Document Released: 03/14/2011 Document Revised: 08/29/2012 Document Reviewed: 03/14/2011

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