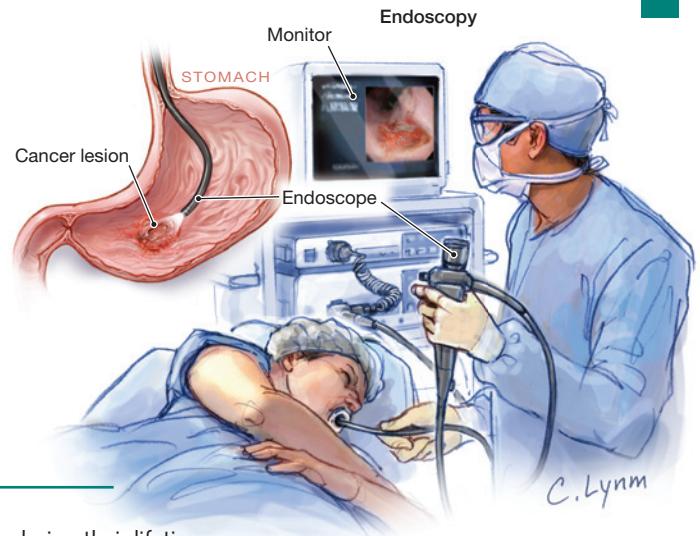


# Stomach Cancer

Cancer of the stomach, also known as **gastric cancer**, often goes unnoticed until the cancer has reached a late stage. For many individuals, stomach cancer has already **metastasized** (spread to other body organs) before it is discovered. For these reasons, stomach cancer has a lower survival rate than many other types of cancers. However, during the last decade, the **incidence** (number of new cases) of stomach cancer has decreased for most population groups, and a person's chance of dying from stomach cancer has also declined. The May 5, 2010, issue of *JAMA* contains several articles about stomach cancer.



## RISK FACTORS

- Men are about twice as likely as women to have stomach cancer during their lifetime.
- Most persons who develop stomach cancer are older than 65 years.
- Asian individuals have a higher rate of stomach cancer than persons of other races.
- High-salt diets contribute to a much higher risk of stomach cancer.
- Cigarette smoking increases the risk of stomach cancer. Persons who quit smoking can bring their chances of having stomach cancer down to the risk level of a nonsmoker.
- The bacterium responsible for many stomach ulcers, *Helicobacter pylori*, has been shown to increase a person's chance of having stomach cancer. These bacteria can be treated with antibiotics. This infection is less common now than in the past, which may explain some of the decrease in gastric cancer.

## SIGNS AND SYMPTOMS

- Abdominal pain
- Nausea, vomiting, vomiting blood
- Indigestion or feeling full after small meals
- Loss of appetite, weight loss

## DIAGNOSIS AND TREATMENT

To look for stomach cancer, blood tests, x-rays and **computed tomography** (CT scan), and **endoscopy** may be used. Endoscopy uses a special lighted tube that is inserted from the mouth into the esophagus and then into the stomach, allowing the doctor to look at the lining of the stomach and take **biopsies** (tissue samples of suspicious areas). For patients who have early-stage stomach cancer, surgery to remove the affected part of the stomach is offered. **Chemotherapy** (using powerful medications to kill the cancer cells) and **radiation therapy** (focused x-ray beams directed to the cancerous areas) may also be used to treat the cancer or to relieve effects from the cancer's spread. **Palliative care**, treating pain and easing other symptoms at the end of life, is often offered to persons who have late-stage or metastatic stomach cancer, since chemotherapy, radiation, and surgery may not be helpful at that point.

## FOR MORE INFORMATION

- American Cancer Society  
[www.cancer.org](http://www.cancer.org)
- National Cancer Institute  
[www.cancer.gov](http://www.cancer.gov)
- National Comprehensive Cancer Network  
[www.nccn.org](http://www.nccn.org)

## INFORM YOURSELF

To find this and previous JAMA Patient Pages, go to the Patient Page Index on JAMA's Web site at [www.jama.com](http://www.jama.com). Many are available in English and Spanish. A Patient Page on cancer: the basics was published in the March 17, 2010, issue; one on cancer clinical trials was published in the June 4, 2004, issue; one on cancer chemotherapy was published in the June 11, 2008, issue; and one on *Helicobacter pylori* was published in the September 17, 2008, issue.

Sources: American Cancer Society, National Cancer Institute, National Comprehensive Cancer Network, World Health Organization, American Gastroenterological Association

Janet M. Torpy, MD, Writer

Cassio Lynn, MA, Illustrator

Richard M. Glass, MD, Editor

The JAMA Patient Page is a public service of JAMA. The information and recommendations appearing on this page are appropriate in most instances, but they are not a substitute for medical diagnosis. For specific information concerning your personal medical condition, JAMA suggests that you consult your physician. This page may be photocopied noncommercially by physicians and other health care professionals to share with patients. To purchase bulk reprints, call 312/464-0776.

