

Costs, effectiveness of laparoscopic, open gastrectomy similar

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After one-year follow-up, differences in the total costs and effectiveness



of laparoscopic and open gastrectomy are minimal, according to a study published online Dec. 28 in *JAMA Surgery*.

Arjen van der Veen, M.D., Ph.D., from the University Medical Center Utrecht in the Netherlands, and colleagues examined the cost-effectiveness of laparoscopic versus open gastrectomy in a multicenter randomized clinical trial of <u>patients</u> undergoing total or distal gastrectomy for resectable gastric adenocarcinoma. Data were included for 227 patients between 2015 and 2018.

The researchers found that the unit costs for initial surgery were calculated as $\in 8,124$, $\in 7,353$, $\in 6,584$, and $\in 5,893$ for laparoscopic total gastrectomy, laparoscopic distal gastrectomy, open total gastrectomy, and open distal gastrectomy, respectively. After one-year follow-up, the mean total costs were $\in 26,084$ and $\in 25,332$ in the laparoscopic and open groups, respectively (difference, $\in 752$). During one year, the mean quality-adjusted life year contributions were 0.665 and 0.686 in the laparoscopic and open groups, respectively. Compared with the uncertainty of the analysis, bootstrapping showed that the differences between the groups were relatively small.

"The comparable <u>cost-effectiveness</u> between treatment groups in the current study supports centers' choosing, based on their own preference, whether to (de)implement laparoscopic gastrectomy as an alternative to open gastrectomy," the authors write.

Several authors disclosed financial ties to the medical device industry.

More information: Arjen van der Veen et al, Cost-effectiveness of Laparoscopic vs Open Gastrectomy for Gastric Cancer, *JAMA Surgery* (2022). DOI: 10.1001/jamasurg.2022.6337

Caitlin A. McIntyre et al, Assessing Cost-effectiveness From the



LOGICA Trial—Is Laparoscopic Gastrectomy Worth the Cost?, *JAMA Surgery* (2022). DOI: 10.1001/jamasurg.2022.6353

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