

Editorial

Benign Disease of the Stomach

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The *Journal of Gastric Cancer* aims to publish informative and interesting articles about stomach cancer, on topics ranging from the pathophysiology of stomach cancer to the postoperative quality of life of patients with gastric cancer. However, the editors realized that the scope of the *Journal of Gastric Cancer* needed to be widened to include articles about gastric benign diseases associated with premalignant lesions as well as other rare gastric conditions that may or may not be caused by gastric cancer.

The current issue of the Journal of Gastric Cancer includes two articles about benign diseases of the stomach. A "How I Do It" article describes a case of partial fundoplication performed in a patient with esophageal dysmotility and gastroesophageal reflux. Gastroesophageal reflux disease (GERD) is known to cause some of esophagogastric junctional adenocarcinoma and esophageal adenocarcinoma, and this has been discussed in a review article in a previous issue of the Journal of Gastric Cancer.¹ In recent times, the incidence of GERD in Far East Asian countries, including Korea, has grown rapidly.² Barrett's esophagus, which is a consequence of long-term gastroesophageal acid reflux, is a premalignant lesion, and many reports indicate that antireflux surgery is a viable treatment option for preventing the development of Barrett's esophagus and esophageal adenocarcinoma in patients.3-5 However, as mentioned in a review article in the 2013 issue of the Journal of Gastric Cancer, antireflux surgery is rarely performed in Korea. Therefore,

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to encourage the use of antireflux surgery in Far East Asian countries, including Korea, and explain the operative technique to our readers, the editors decided to print the "How I Do It" article in the current issue of the *Journal of Gastric Cancer*.

Another article, "Case Report," describes gastric volvulus in a patient with no predisposing factors, which was treated by a laparoscopic approach. Wandering spleen, diaphragmatic hernia, and gastric cancer are causes of gastric volvulus.⁶⁻⁸ The present case is uncommon because of the absence of a definite cause for the development of gastric volvulus and the fact that it was treated by laparoscopic gastropexy. Given that the present case was very rare, the editors decided to publish this article even though it describes a benign disease of the stomach that is not associated with gastric malignancy.

The editors think that these two special articles in the current issue of the *Journal of Gastric Cancer* will be informative for upper gastrointestinal surgeons who are the target audience for our journal. Hereafter, we will gladly consider articles on benign diseases of the stomach for publication in our journal.

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