The role for systemic treatment in gastric cancer has become more evident over the past years. Perioperative chemotherapy increases the cure rates in localized stages. At the same time, palliative chemotherapy has shown to prolong survival and maintain the patients’ quality of life in advanced disease. Our comprehension of prognostic and predictive molecular factors in stomach cancer is growing continuously. In parallel, we are making progress in understanding potential targets and pathways for designing molecular therapies against gastric cancer. First promising results have been reported from phase I and phase II studies investigating biologically targeted therapies in advanced gastric cancer. Currently, large randomized trials investigating inhibitors directed against the epidermal growth factor (EGFR) receptor and Her2-neu, against the epithelial cell adhesion molecule (EpCAM) and against vascular endothelial growth factor (VEGF) are being carried out. However, results from these comparative large scale studies are needed before biologically targeted drugs can be used in the clinical routine.
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