Table 2. Characteristics of included studies – Minimaal invasieve chirurgie

Study	Participants	Comparison	Follow-up	Outcome measures	Comments	Risk of bias (per outcome measure)*
Included in systematic review Jiang, 2022						
Class-01	N at baseline Intervention:519 Control: 520 Age (mean, SD) Intervention: 56.5 ± 10.4 Control: 55.8 ± 11.1 Sex (male, %) Intervention: 380 (73.2%) Control: 346 (66.5%)	Intervention: Laparoscopy (minimal invasive surgery) Control: Open surgery	60 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval	NA	LOW
Klass-02	N at baseline Intervention: 492 Control: 482 Age (mean, SD) Intervention: 59.8 ± 11.0 Control: 59.4 ± 11.5 Sex (male, %) Intervention: 351 (71.3%) Control: 335 (69.5%)	Intervention: Laparoscopy (minimal invasive surgery) Control: Open surgery	36 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval - R0-resection	NA	LOW
LOGICA	N at baseline Intervention: 115 Control: 112 Age (mean, SD) Intervention: 67 ± 11.5 Control: 59.4 ± 11.5	Intervention: Laparoscopic Gastrectomy (minimal invasive surgery) Control: Open Gastrectomy	12 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval - Quality of life - Pain - R0-resection	NA	Some concerns

	Sex (male, %) Intervention: 68 (51.1%) Control: 72 (64.3%)					
Luo, 2017	N at baseline Intervention: 62 Control: 62 Age (mean, SD) Intervention: 64.02 ± 15.25 Control: 63.98 ± 15.37 Sex (male, %) Intervention: 42 (67.74%) Control: 43 (69.35%)	Intervention: Hand-assisted laparoscopy (minimal invasive surgery) Control: Open surgery	12 – 36 months	- Survival - Complications - Lymph node retrieval	NA	High
Li, 2019	N at baseline Intervention: 47 Control: 48 Age (median, IQR) Intervention: 59 (52-65) Control: 61 (55-64) Sex (male, %) Intervention: 33 (70%) Control: 33 (69%)	Intervention: Laparoscopic distal gastrectomy (minimal invasive surgery) Control: Open distal gastrectomy	36 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval - R0-resection	NA	LOW
Shi, 2019	N at baseline Intervention:161 Control: 156 Age (mean, SD) Intervention: 55.2 ± 11.0 Control: 54.8 ± 10.8	Intervention: Laparoscopy-assisted gastrectomy (minimal invasive surgery) Control: Open gastrectomy	60 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval	NA	Some concerns

Table 2. Characteristics of included studies – Minimaal invasieve chirurgie
Richtlijn Maagcarcinoom 2025

	Sex (male, %) Intervention: 120 (74.5%) Control: 101 (64.7%)					
Wang, 2018	N at baseline Intervention: 222 Control: 220 Age (mean, SD) Intervention: 59.4 ± 12.4 Control: 23.1 ± 3.1 Sex (male, %) Intervention: 144 (64.9%) Control: 133 (60.5%)	Intervention: Laparoscopy-assisted distal gastrectomy (minimal invasive surgery) Control: Open distal gastrectomy	36 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval	NA	LOW
Guo, 2018	N at baseline Intervention: 114 Control: 108 Age (mean, SD) Intervention: 56.1 ± 10.2 Control: 58.4 ± 10.9 Sex (male, %) Intervention: 80 (70.2%) Control: 69 (63.9%)	Intervention: Laparoscopic spleen-preserving splenic hilar lymphadenectomy (minimal invasive surgery) Control: Open spleen-preserving splenic hilar lymphadenectomy	60 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval	NA	High
COACT-1001	N at baseline Intervention: 100 Control: 96 Age (mean, range) Intervention: 58.6 (26.7-80.2) Control: 60.1 (29.9-79.1) Sex (male, %)	Intervention: Laparoscopy-assisted distal gastrectomy (minimal invasive surgery) Control: Open distal gastrectomy	12 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval - R0-resection	NA	

	Intervention: 69 (69%) Control: 65 (67.7%)					
Cui, 2015	N at baseline Intervention:128 Control: 142 Age (mean, SD) Intervention: 60.1 ± 12.6 Control: 57.5 ± 11.2 Sex (male, %) Intervention: 88 (69%) Control: 98 (69%)	Intervention: Laparoscopy-assisted distal gastrectomy (minimal invasive surgery) Control: Open distal gastrectomy	36 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval	NA	Some concerns
Cai, 2011	N at baseline Intervention:49 Control: 47 Age (mean, SD) Intervention: 60.2 ± 9.8 Control: 60.3 ± 10.2 Sex (male, %) Intervention: 39 (80%) Control: 37 (79%)	Intervention: Laparoscopy-assisted distal gastrectomy (minimal invasive surgery) Control: Open distal gastrectomy	36 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval	NA	HIGH
Huscher, 2005	N at baseline Intervention: 30 Control: 29 Age (mean, SD) Intervention: 63.2± 12.5 Control: 63.6 ± 13.2 Sex (male, %)	Intervention: Laparoscopy (minimal invasive surgery) Control: Open gastrectomy	60 months	- Survival - Complications - Length of hospital stay - Lymph node retrieval	NA	HIGH

	Intervention: 18 (60%) Control: 21 (73%)					
Individual studies						
STOMACH trial Van der Wielen, 2021 Van der Wielen, 2022	N at baseline Intervention: 47 Control: 49 Age (mean, SD) Intervention: 59.4 (±12.5) Control: 61.8 (±10.0) Sex (male, %) Intervention: 28 (59.8%) Control: 32 (65.3%)	Intervention: Minimal invasive procedure Control: Open procedure	Follow up at 3, 6 and 12 months.	- Survival - Complications - Length of hospital stay - Lymph node retrieval - Quality of life - Pain - R0-resection	Funded by Fonds NutsOhra (FNO).	Some concerns
Etoh, 2023	N at baseline Intervention: 252 Control: 255 Age (range) Intervention: 64 (34-80) Control: 67 (33-80) Sex (male, %) Intervention: 169 (68.1) Control:168 (66.1)	Intervention: Laparoscopy-assisted distal gastrectomy (LADG) (minimal invasive surgery) Control: Open distal gastrectomy (ODG)	Median (IQR): 67.9 (60.3-92.0) months	- Survival, - Complications	NA	Some concerns
Xing, 2024	N at baseline Intervention: 216 Control: 214 Age (range) Intervention: 60.40 (±10.08) Control: 59.37 (±12.46) Sex (male, %)	Intervention: Laparoscopy (minimal invasive surgery) Control: Open surgery	36 months	- Survival	NA	Some concerns

	Intervention: 85 (39.35%) Control: 76 (35.51%)					

For further details, see risk of bias table in the appendix