AB024. PP-3 Laparoscopic Roux-N-Y gastric by-pass surgery in the treatment of morbid obesity

Semra Demirli Atici, Yasemin Kirmizi, Emran Kuzey Avci, Levent Uğurlu, Cengiz Aydin

Department of General Surgery, SBÜ Tepecik Education and Research Hospital, Istanbul, Turkey

Correspondence to: Cengiz Aydin. Department of General Surgery, SBÜ Tepecik Education and Research Hospital, Istanbul, Turkey. Email: caydin2@yahoo.com.

Background: Obesity is an increasing health problem. Today, it has been proven to be directly associated with many comorbid diseases. It is known to have significant negative effects on quality of life and duration. The results of conventional methods are not satisfactory. Nowadays, the most effective methods in the treatment of obesity are surgical modalities and laparoscopic Roux-N-Y By-pass (LRBGB) surgery has been applied effectively in our country and in the world for many years. We aimed to present the results of by-pass operations we performed in our clinic.

Methods: Thirty-seven patients who underwent LRBGB in our clinic between April 2013 and July 2019 were included in the study. Patients between 18–60 years with a body mass index (BMI) above 40 kg/m² were operated after endocrine and psychiatric consultations were completed. Data collected regularly before and after the operation of the patients were analyzed retrospectively.

Results: Of the patients, 27 (72.9%) were female and 10 (27.1%) were male. The mean age was 42.3 years. Mean BMI was 48.6. The mean follow-up was 24.3 months. The operation of 36 patients was completed laparoscopically. One patient was switched to open. No mortality was observed in one patient, but one patient was reoperated due to perforation of the Y leg postoperatively. The mean operation time was 195 minutes, median oral intake time was 1 day, and median hospital stay was 4 days. The patients lost 14.7 kg in the first month, 20.3 kg in the second month, 25 kg in the third month, 35.6 kg in the 6th month, and 46.8 kg in the 12th month. Excess Body Weight Loss (EBWL) was determined as 41.6%, 57.4%, 75.9% at 12 months.

Conclusions: LRBGB is a safe and effective treatment modality in the treatment of morbid obesity with low morbidity and mortality rates. An effective obesity treatment method other than surgery has not been developed in our country and in the world yet. In the literature and in our study, it was observed that the patients who received LRBGB gained weight in the short term and there was a significant improvement in comorbid diseases. Mortality and morbidity rates are similar when compared with the literature. We think that LRBGB can be safely applied after the necessary preoperative preparations are meticulously completed in all patients with indication.

Keywords: Obesity surgery; laparoscopic Roux-n-Y Gastric by-pass (LRBGB)

Provenance and Peer Review: This abstract is included in “Abstracts from the 3rd Turkish National Congress on Bariatric and Metabolic Surgery, 21st-24th November 2019, Antalya-Turkey”, which is commissioned by the Guest Editor (Mehmet Mahir Özmen) for the series “Bariatric and Metabolic Surgery” published in Annals of Laparoscopic and Endoscopic Surgery. This abstract did not undergo external peer review.

Conflicts of Interest: The authors have completed the ICMJE uniform disclosure form (available at http://dx.doi.org/10.21037/ales-2019-bms-35). The series “Bariatric and Metabolic Surgery” was commissioned by the editorial office without any funding or sponsorship. The authors have no other conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the non-commercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: https://creativecommons.org/licenses/by-nc-nd/4.0/.
