

Banded Micropouch Roux-en-Y gastric bypass as a Revisional Bariatric procedure

Khaled Gawdat, Ahmed Osman, Basem Al-Shayeb

Department of Surgery

Ain-Shams School of Medicine

Cairo, Egypt.

Introduction: Bariatric procedures have variable success and Failure rates. Revisional bariatric surgery is an important part of the bariatric surgery practice. Revisional bariatric procedures are complex with higher morbidity. Laparoscopic Banded micro-pouch Roux-en Y gastric bypass (LBMRYGB) gave excellent weight loss outcome in our primary patients. **Aim of Work:** a prospective study evaluating the use of BMRYGB as a revisional bariatric procedure in cases of failed primary procedures. **Methods:** from April 2004, 289 patients had a LBMRYGB as a revisional bariatric procedure. 86 % were females mean age 34 years, 104 patients (36%) had a previous gastric banding, 93 patients had a vertical banded gastroplasty (32%), 26 patients (9%) had a Roux-en-Y-gastric bypass 35 patients (12.2%) had a sleeve gastrectomy. 31 patients (10.8%) had multiple previous procedures. **Results:** 25 patients had postoperative leaks (8.6%), 3 patients had pulmonary embolism (1%), 2 patients had pneumonia (0.7%). GIT bleeding in 2 patients (0.7%). 4 patients died (1.4%) mortality. Late complications were band erosion in 3 patients (1%), excessive weight loss in 5 patients (1.7%). Postoperative weight loss was 76% EBWL at 18 months. 72% EBWL at 36 months, 69% EBWL at 5 years and 66% at 10 years. **Conclusion:** LBMRYGB gives excellent and durable weight loss as a revisional bariatric procedure. Complication rates are higher than the primary group but similar to revisional surgery literature. Good primary and secondary procedure choice remains very essential to reduce treatment failures.

Paper for oral presentation

Khaled Gawdat, M.D.

khaledgawdat@hotmail.com