Validity of sleeve gastrectomy for band failures

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Introduction: Gastric banding is the one of the main restrictive procedures among the bariatric operation. sleeve gastrectomy proved to be more than just a restrictive operation, and proved to be successful for patients who had failed to lose their weight with banding. Patients and Method: 52 patients were included in this study. All had their bands done More than a year earlier. mean BMI $\,41\,\,(38 ext{-}49)$. Mean age 28(18-52).31 female and 21 male. they were with no significant co-morbidities. All had sleeve gastrectomy done along with the removal of the band at the same session . The band was removed, the tunneling sutures is removed and the fundus was stretched back to its original anatomy after the excision of the peri gastric fibrous ring at the band site. Then sleeve gastrectomy is performed in the usual way using endo GIA stapling devise and we suture the proximal staple line with 2/0 vicryl. The follow up ranges from 1 to 4 years (19)(14)(11) and (8) patients respectively. Results: There was no major morbidity (Gastric leakage), no mortality, 3 wound infections, 1 chest infection. No convertions to laparotomy. Mean hospital stay 3 days (2-4). At the end of the first year following the operation all had significant weight loss 35-45% of the EBW. At 2 year 33 patients have lost 55% of the EBW. By the third year 19 patients had 55% EBW loss, At 4 years 8 patients lost 65% of their EBW. Conclusion: Sleeve gastrectomy can be regarded as a salvage procedure for band failure patients and sure it is more than a restrictive procedure, it is a valid metabolic operation and may be comparable to Gastric bypass for patients with failed bands.