

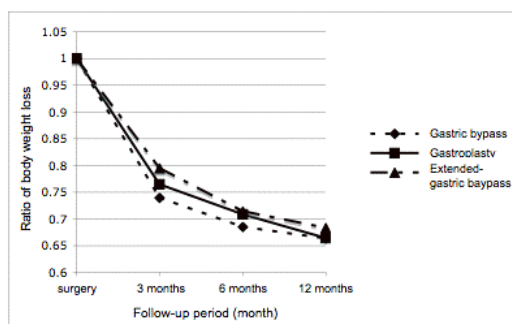
Retrospective analysis from 99 Japanese cases of bariatric surgery at Chiba University Hospital.

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Background: Since "classical-style" gastric bypass for morbid obesity has been performed in 1982, the first bariatric surgery in Japan, the number of obesity patients has been gradually increased. This is the retrospective analysis of the patient outcome at Chiba University Hospital, Japan. Patients & Methods: 99 patients have been operated for bariatric surgery in our department and our related hospital from 1982 though 2006. 31 males and 68 females were applied. The average age was 30.7 ± 9.8 years. 11 classical style gastric bypass, 69 gastroplasty (50 vertical banded gastroplasty, 8 horizontal banded gastroplasty, 11 other types), 17 Roux-Y gastric bypass, 1 sleeve gastrectomy and 1 sleeve gastrectomy with duodenal switch were performed in this study. Results: The body weight of each patients has been decreased favorably (figure). Among all surgery, no postoperative death has been observed. Conclusion: Our results indicated that bariatric surgery is safe and effective for Japanese. Although the higher disease rate of gastric cancer than western patients, we expect that more clinical trials will be designed and performed for more effective and suitable surgical procedures for Japanese obesity patients.

Figure



Similar resolution of weight and biochemical aberrations in the first 24 months despite different bariatric procedures

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Introduction: Malabsorptive operations (Scopinaro/SCOP and duodenal switch/DS) are considered more effective than Roux-en-Y gastric bypass (RYGB) for weight reduction and biochemical normalization, but comparative studies are not common. **Objective:** In a single-center prospective study, outcome in the first two years was comparatively monitored. **Methods:** Patients (N=41) were submitted to three interventions (SCOP, DS and RYGB) according to clinical criteria. There were no differences regarding age (44 ± 11 years), gender (83% females) or preoperative BMI or body weight (BMI 46 ± 5 kg/m²). Measurements included hematologic counts, iron, ferritin, triglycerides, total cholesterol and fractions, and glucose., which were documented preoperatively and 1, 3, 6, 12 and 24 months after surgery. **Results:** Patients submitted to the Scopinaro modality exhibited higher preoperative BMI (not statistically significant), but difference leveled off after 12 months. By the same token most biochemical variables normalized between 6 and 12 months, so that after two years the three populations displayed similar numbers for all documented variables. **Conclusions:** All three techniques were followed by adequate clinical and biochemical response. Scopinaro candidates were somewhat heavier but reached comparable BMI at the end of the study. Differences between the operations were not obvious during 24 months, and should probably require longer follow-up and superobese participants to be detected.

Intragastric balloon treatment for morbid obesity in Japanese patients.

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Background; Recently, also in Japan, bariatric surgery is a growing trend. We concern that Japanese patients undergoing bariatric surgery are at risk of developing gastric cancer, which is the most common malignancy in Japanese. Therefore, we expect that the temporary placement of intragastric balloon is suitable for Japanese.

Methods; We started the clinical trial of intragastric balloon treatment from 2007. We picked up patients according to the inclusion criteria of our institution which was “morbid obesity ($BMI \geq 35$) after conservative treatments including admission of more than one week duration and outpatient visit for 6 months.” The balloon was removed within 6 months according to the manufacturer’s suggestions.

Results; Six patients who met this criteria underwent the placement of intragastric balloon. No complications occurred. The average duration of procedure was 20.8 min. The average length of the hospital stay was 6.0 days. No one needed to remove ahead of schedule. The average weight loss and percent excess weight loss at the time the balloon was removed were 10.4 kg and 19.8%, respectively. Four patients had kept more than 20% of percent excess weight loss 6 months after the balloon removal. However, 2 patients already regained their weight during the placement of intragastric balloon.

Conclusion; Intragastric balloon treatment for morbid obesity in Japanese patients is safety and have some efficacy.

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