

## Laparoscopic adjustable gastric banding in a Japanese institute

Department of Surgery I, Oita University Faculty of Medicine, Oita, Japan.

Masayuki Ohta, MD, Teijiro Hirashita, MD, Yukio Iwashita, MD, Tadashi Ogawa, MD, Kazuhiro Yada, MD, Takashi Masuda, MD, Hidetoshi Eguchi, MD, Seigo Kitano, MD

**Background/Aim:** Although bariatric surgery has not been popular in Japan, the most popular bariatric procedure is now laparoscopic sleeve gastrectomy. In 2005, we introduced laparoscopic adjustable gastric banding (LAGB) into Japan, and here, our data were presented and evaluated.

**Methods:** Between August 2005 and December 2010, 31 morbidly obese patients (18 women / 13 men, mean age of 39yr) received LAGB in our institute. All patients were morbidly obese (BMI > 35 kg/m<sup>2</sup>), and the averaged weight was 118 kg and BMI was 43 kg/m<sup>2</sup>. In regard to LAGB devices, LAP-BAND® (Allergan Medical) was used in 29 patients and SAGB® (OBTECH Medical GmbH) in 2 patients. All procedures of LAGB were performed through the pars flaccida pathway with band fixation using gastric-to-gastric sutures. Averaged follow-up duration was 35 months.

**Results:** All the procedures were completed laparoscopically. Two complications were experienced (postoperative bleeding and port trouble), and reoperations were needed in the patients. Weight loss and % excess weight loss on the average were 25kg and 44% after 1 year, 33 kg and 57% after 3 years and 29 kg and 51% after 5 years. Accordingly, comorbidities were frequently improved, and type 2 diabetes and metabolic syndrome were resolved in 9 of 10 patients (90%) and in 14 of 17 patients (82%), respectively.

**Conclusions:** LAGB is safe and effective in Japanese patients with morbid obesity, and our data seem to be equivalent to those previously reported in Western countries.