

IS ROUTINE PREOPERATIVE VENOUS DUPLEX SCREENING NECESSARY FOR PATIENTS HAVING BARIATRIC SURGERY?

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Background: Morbidly obese patients are perceived to be at high risk for perioperative deep vein thrombosis (DVT). Routine preoperative bilateral lower extremity venous duplex screening for DVT is a part of their preoperative work up in many Bariatric centers. The purpose of our study is to determine the prevalence of preoperative DVT in our patient population, and form a basis to make a case for or against routine preoperative venous duplex screening in bariatric patients. **Methods:** A five year (2005–2010) retrospective chart review was performed, of our prospectively maintained bariatric database. Demographic data and the incidence of preoperative DVT was analyzed using statistical software. **Results:** 555 patients underwent bariatric surgery during this five year period. 402 (72%) were females, and 153 (28 %) were males. The age range was 18– 67 (median age 43). 454 (82 %) of patients were Caucasians, 46 (8%) were Hispanics, 45 (8%) were black and 10 (2%) other race. The mean BMI was 47.1 (SD 6.8). 177 (32%) patients underwent the Roux-en-y gastric bypass procedure, while 378 (68%) had the lap band procedure. Only one patient with a history of chronic DVT was found to have a positive preoperative venous duplex. The incidence of preoperative DVT was 0.2%. **Conclusion:** The incidence of preoperative DVT is very low in these patients. Routine preoperative venous duplex screening is therefore unnecessary. We would suggest preoperative duplex screening in those patients with a previous history of DVT or evidence of significant venous insufficiency