

Is Laparoscopic Duodenojejunal bypass with Sleeve an effective alternative to Roux en Y gastric bypass:  
A Randomized Trial

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**Background:**The incidence of Obesity and related metabolic disorders including Carcinoma Stomach in India is one of the highest in the world .Hence one requires a procedure that allows postoperative surveillance of the stomach with the best outcomes in terms of weight control and resolution of comorbidities .Here we compare one such procedure, Duodenojejunal bypass with Sleeve against the standard Roux-en Y gastric bypass.**Methods:**52 patients were randomized into 2 groups of Laparoscopic Duodenojejunal bypass with Sleeve (DJB) and Laparoscopic Roux en Y gastric bypass (RYGB) of 26 patients each. **Results:**The mean BMI at the end of 6 months and 1 year was 35.16, 29.25 in RYGB and 34.51, 28.10 in DJB. The %excess BMI loss at 6 months and 1 year were 52%  $\pm$ 19 and 77%  $\pm$ 24 in RYGB and 58%  $\pm$ 14 and 82%  $\pm$ 19 in DJB, which was not statistically significant.14/26 patients in the RYGB and 19/26 in the DJB group had Type II Diabetes . In RYGB 12 had complete resolution and 2 had improvement and 16 patients in the DJB had complete resolution and remaining 3 had improvement . There was 100% resolution of Dyslipidemias in both groups. There was 1 patient in the DJB group who presented with internal herniation 1 month post-op was managed surgically. **Conclusion:**Laparoscopic Duodeno-jejunal bypass with Sleeve, which combines the principles and advantages of Sleeve Gastrectomy and RYGB is a safe and effective alternative to gastric bypass in weight reduction and resolution of comorbidities.Also, with the possibility that the procedure can be made less restrictive by altering the size of the sleeve, it can be employed as a procedure to treat Metabolic Syndrome even in the lower BMI group. But, a long term follow up is necessary to establish it as a standard procedure.