

AB023. PP-2 Laparoscopic sleeve gastrectomy results

Can Arıcan, Özgür Akmeşe, Levent Uğurlu, Cengiz Aydın

Department of General Surgery, SBÜ Tepecik Education and Research Hospital, Istanbul, Turkey

Correspondence to: Cengiz Aydın. Department of General Surgery, SBÜ Tepecik Education and Research Hospital, Istanbul, Turkey. Email: caydin2@yahoo.com.

Background: Obesity is a health problem that reduces quality of life and duration and is associated with many comorbid diseases. Nowadays, morbid obesity is accepted as a disease. Laparoscopic sleeve gastrectomy (LSG) is a more accepted surgical technique because it provides more effective weight loss and regression of comorbid diseases in morbid obesity patients compared to conventional methods. We aimed to present the mid-term results of LSG operations performed in our clinic.

Methods: 301 patients who underwent LSG in our clinic between April 2013 and July 2018 were included in the study. Patients between 18–60 years with a body mass index (BMI) above 40 kg/m² were evaluated preoperatively. All patients underwent surgery after endocrine and psychiatric consultations were completed. The data of the patients were recorded retrospectively before and after surgery.

Results: Of the patients, 244 (81.06%) were female and 57 (18.94%) were male, with a mean age of 37.3 years. Mean BMI was calculated as 45.3. The mean follow-up period was 27.6 months. Sleeve gastrectomy + hiatus repair was performed in 7 patients, sleeve gastrectomy + cholecystectomy was performed in 18 patients. The mean operation time was 98.2 minutes. Median time to oral intake was 1 day and median hospital stay was 3 days. Mortality was not observed in any patient. Leakage was observed in 3 patients (0.99%) and hemorrhage was observed in 2 patients (0.66%). The patients lost 14.3 kg in the first month, 20.2 kg in the second month, 25.9 kg in the third month, 36.4 kg in the 6th month and 46.5 kg in the 12th month. Excess Body Weight Loss (EBWL) was 48.5% at 3 months, 67.1% at 6 months and 83.7% at 12 months.

Conclusions: LSG has become one of the most preferred

methods in the treatment of morbid obesity in our country and in the world due to its ease of application, low morbidity mortality rates, short duration of operation and length of hospital stay and providing very effective weight loss and metabolic control in patients. In the 12-month period, patients recovered from an average of 83.7% of their excess weight and achieved significant improvements in comorbid diseases such as cardiovascular diseases, diabetes, hypertension, sleep apnea. Long-term results can be made more accurate interpretations are examined and we think that LSG is an effective and reliable method in the treatment of obesity in the short and medium term.

Keywords: Obesity surgery; laparoscopic sleeve gastrectomy; short-term results

Provenance and Peer Review: This abstract is included in “Abstracts from the 3rd Turkish National Congress on Bariatric and Metabolic Surgery, 21st-24th November 2019, Antalya-Turkey”, which is commissioned by the Guest Editor (Mehmet Mahir Özmen) for the series “Bariatric and Metabolic Surgery” published in *Annals of Laparoscopic and Endoscopic Surgery*. This abstract did not undergo external peer review.

Conflicts of Interest: The authors have completed the ICMJE uniform disclosure form (available at <http://dx.doi.org/10.21037/ales-2019-bms-34>). The series “Bariatric and Metabolic Surgery” was commissioned by the editorial office without any funding or sponsorship. The authors have no other conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the non-commercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: <https://creativecommons.org/licenses/by-nc-nd/4.0/>.

doi: 10.21037/ales-2019-bms-34

Cite this abstract as: Arıcan C, Akmeşe Ö, Uğurlu L, Aydın C. Laparoscopic sleeve gastrectomy results. *Ann Laparosc Endosc Surg* 2020;5:AB023.