

AB108. SOH22ABS177. Comparing surgical site infection rates in bariatric surgery: a retrospective review of peri-operative prophylactic regimens

Maria Fahmy^{1,2}, Paul Cromwell^{1,2}, Helen Heneghan^{1,2}

¹Department of Surgery, St. Vincent's University Hospital, Dublin, Ireland; ²School Of Medicine Belfield, National Bariatric Centre, University College Dublin, Dublin, Ireland

Background: The incidence of surgical site infection (SSI) after laparoscopic bariatric surgery is 1–4% (SSI). Although low risk, SSI remains a significant cause of morbidity. In our institution before March 2019, patients were given 3 doses of antibiotics peri-operatively as prophylaxis, the first dose at induction. After 2019 the protocol changed to one single dose at induction. The objective of this study is to assess the SSI rate and compare the single dosing regimen against the previous dosing regimen at preventing SSI.

Methods: A retrospective chart review of patients who underwent bariatric surgery in St. Vincent's Hospital and St. Michaels Hospital from 2017 to 2021 was conducted. All patients who underwent a gastric bypass (GB) or sleeve gastrectomy (SG) were included. The primary outcome was SSI within 30 days.

Results: A total of 255 patients were included. The median age was 53. The median body mass index (BMI) was 52.4 kg/m² (IQR: 9.9 kg/m²). Approximately fifty-nine percent of patients underwent a SG. Before March 2019, there were 111 patients, and 3 reported SSIs (2.7%), after March 2019 there were 144 patients, and 10 SSIs (6.9%). There was no significant difference detected (P=0.1645). Of the reported, SSIs 10 patients were male (76.9%), and

3 were female (23.1%).

Conclusions: Thirty-day SSI was more common in individuals undergoing bariatric surgery using a single dose of antibiotics, but this was not statistically significant. Men were 3 times more likely to develop a wound infection than women. Further study is needed to establish if a single dosing regimen is sufficient for patients undergoing bariatric surgery.

Keywords: Bariatric surgery; gastric bypass (GB); prophylactic antibiotics; sleeve gastrectomy (SG); surgical site infection (SSI)

Acknowledgments

Funding: None.

Footnote

Conflicts of Interest: The authors have no 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/map-22-ab108

Cite this abstract as: Fahmy M, Cromwell P, Heneghan H. AB108. SOH22ABS177. Comparing surgical site infection rates in bariatric surgery: a retrospective review of peri-operative prophylactic regimens. *Mesentery Peritoneum* 2022;6:AB108.