Ring Augmented Bypass in Patients with Suboptimal Clinical Response after RYGB

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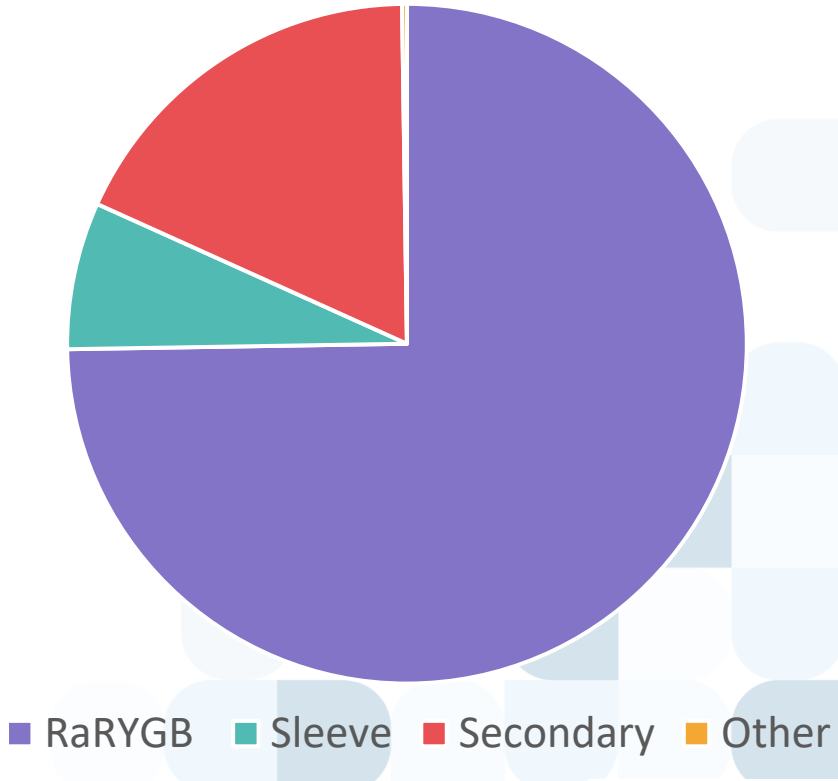
Disclosures

In accordance with EACCME criteria for the Accreditation of Live Educational Events», please disclose whether you have or you have not any conflict of interest with the companies:

Speakers and faculty fees:

- Bariatric Solutions
- FitForMe
- Johnson&Johnson
- Medtronic

Case mix Zuyderland MC 2024



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Minimizer User

- Primary cases
  - RaRYGB
  - (RaSleeve)
- Secondary cases
  - Conversional surgery
    - Lapband to RaRYGB
    - Sleeve to RaRYGB
    - VBG to RaRYGB
  - Revisional surgery
    - Pouch revision and Minimizer placement

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- Recurrent weight gain after Bariatric Surgery is a serious challenge

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Banded vs Ring augmented Procedure

- Ring
  - Non-restrictive
  - Non-inflatable
- Band
  - Restrictive
  - Inflatable
- Complications are different

Obesity Surgery (2024) 34:1958–1959
https://doi.org/10.1007/s11695-024-07168-7

IFSO

LETTER TO THE EDITOR

Check for updates

Clarifying Terminology in Bariatric Metabolic Surgery: The Need for Distinction Between "Band" and "Ring"

Bart Torensma[1,2,3] · Mohamed Hany[2] · Frits Berends[3] · Edo Aarts[3] · Jodok Fink[4] · Evert-Jan G. Boerma[5]

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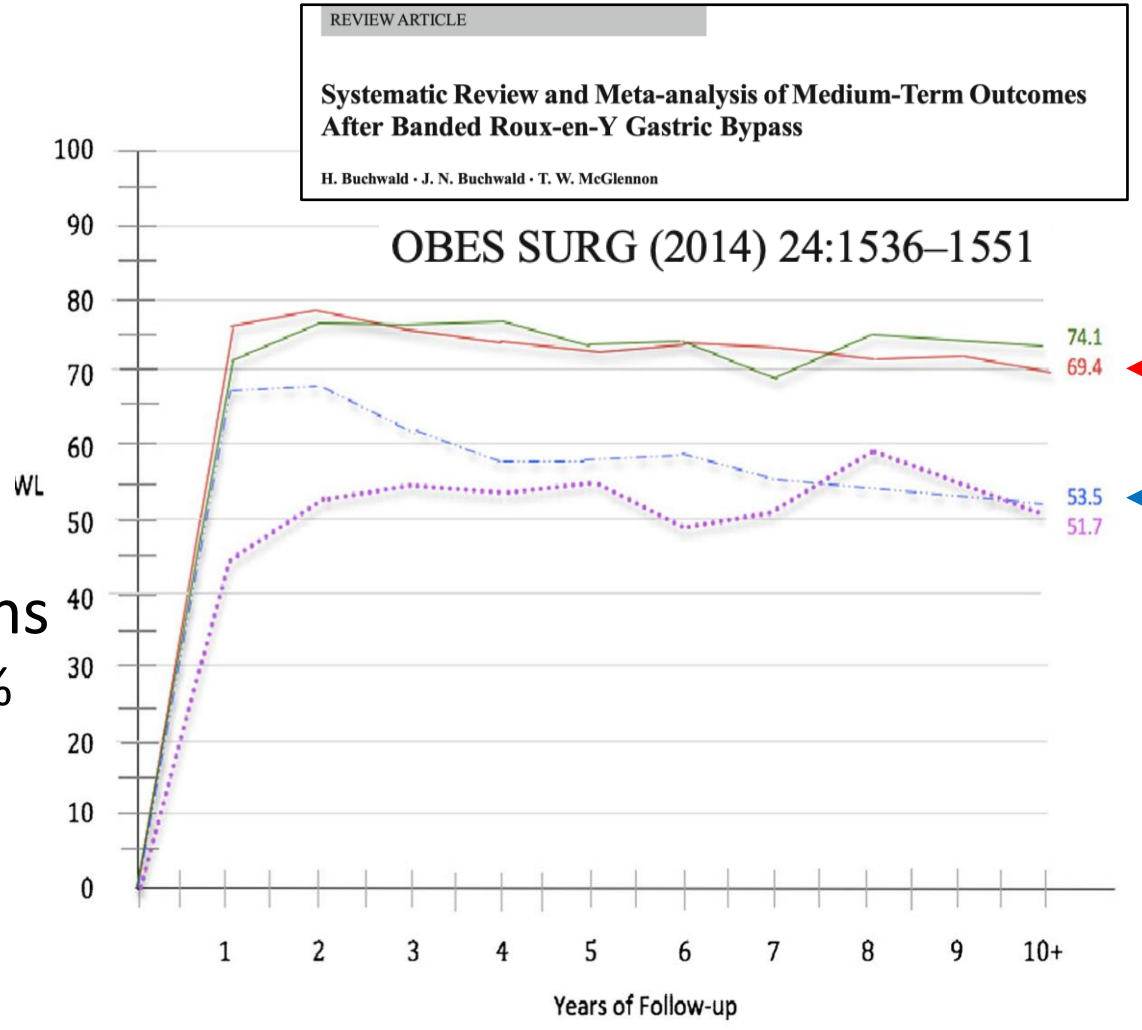
Evidence from Literature on RaRYGB

Weight loss

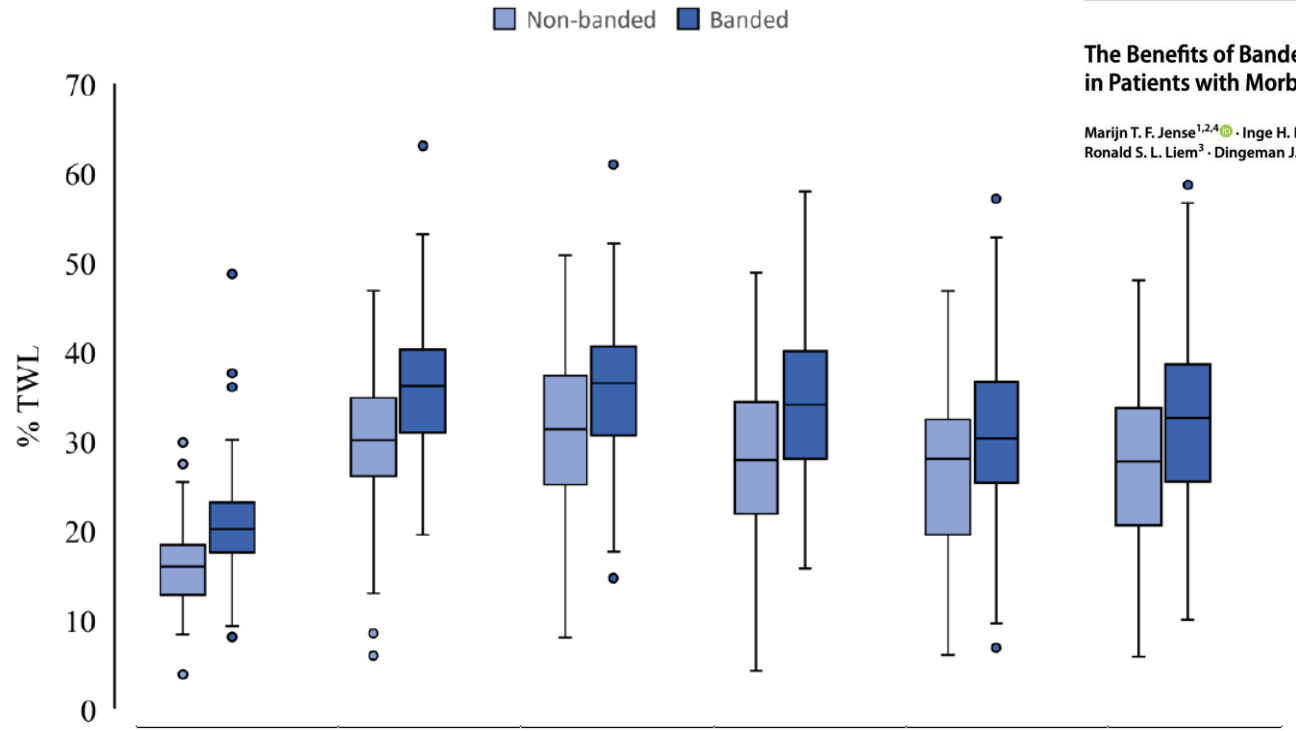
- 5yr EWL 72.5%
- 10yr EWL 69.4%

Complications

- 10.9% early and 20% late complications
  - Non-ring related complication rate 15.2%
  - Ring related complication rate 4.1%
    - Erosion 2.3%
    - Slippage 1.5%
    - Removal 2.3%



Our RaRYGB Results – RaRYGB vs RYGB



	3 months*	1 year*	2 years*	3 years*	4 years*	5 years*
Non-banded	141	150	137	103	80	135
Banded	161	145	153	105	76	161
Missing	73	80	85	167	219	79
P value	**< .001**	**< .001**	**< .001**	**< .001**	**.027**	**< .001**

Obesity Surgery (2022) 32:1856–1863
https://doi.org/10.1007/s11695-022-06024-w

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ORIGINAL CONTRIBUTIONS

The Benefits of Banded over Non-banded Roux-en-Y Gastric Bypass in Patients with Morbid Obesity: a Multi-center Study

Marijn T. F. Jense[1,2,4] · Inge H. Palm-Meinders[2] · Rochelle Sigterman-Nelissen[1] · Evert-Jan G. Boerma[1,2] · Ronald S. L. Liem[3] · Dingeman J. Swank[3] · Jan Willem M. Greve[1,2,4]

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Our RaRYGB Results – RaRYGB vs RYGB

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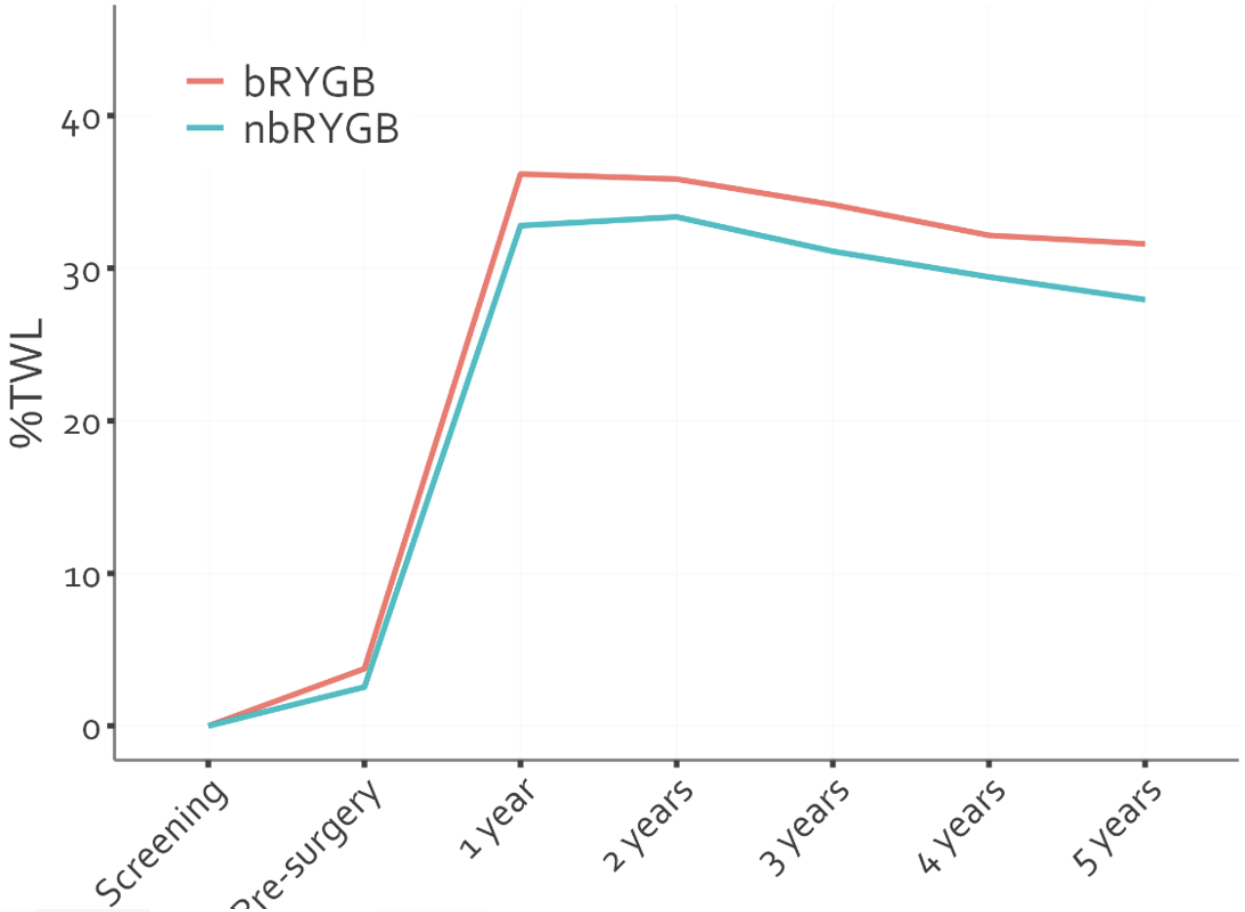
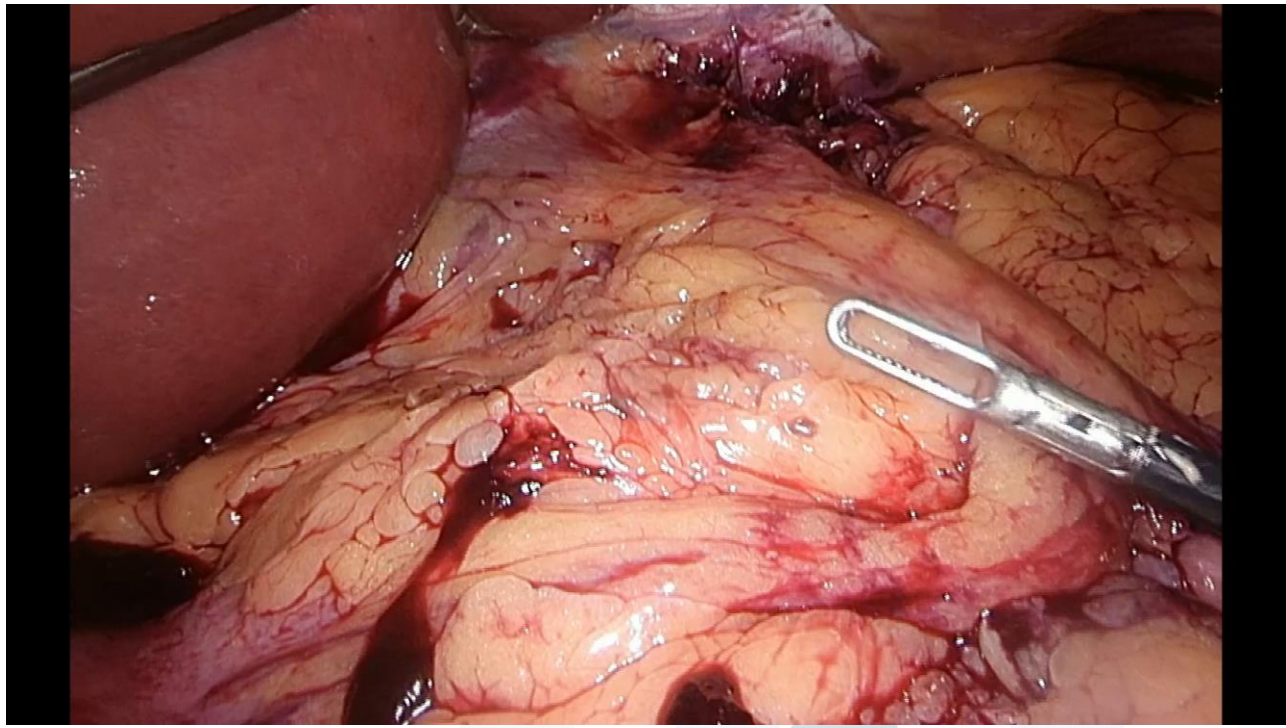
Our RaRYGB Results – Comparison TWL





Obesity Surgery (2025) 35:3013–3019
https://doi.org/10.1007/s11695-025-07988-1

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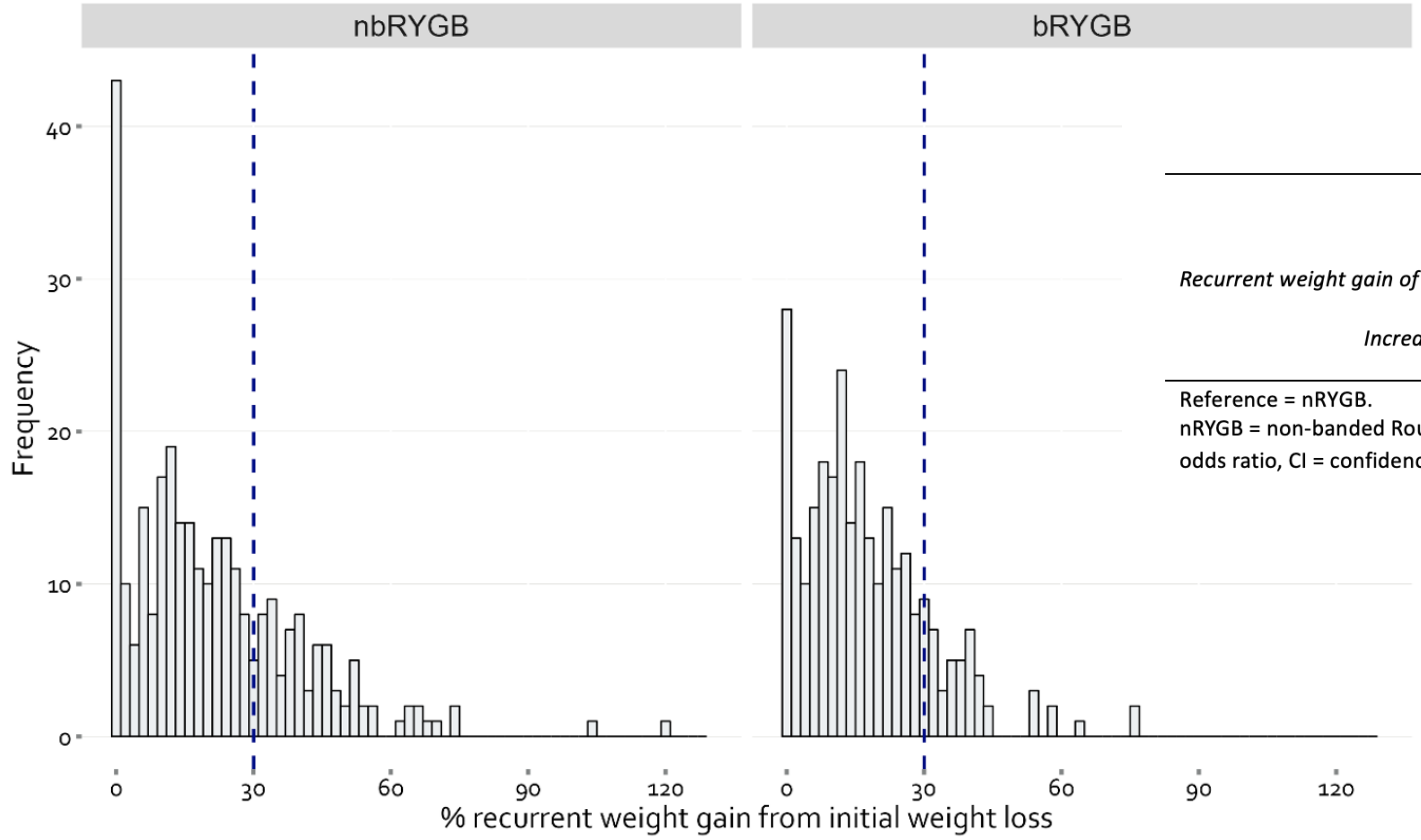
Our RaRYGB Results – Comparison of RWG



Incidence of weight recurrence	*nRYGB*	*bRYGB*	OR (95% CI)	P-value
N	**296**	**296**		
Recurrent weight gain of > 30% from initial weight loss (n, %)	146 (49.3)	90 (30.4)	0.45 (0.32 – 0.64)	< 0.01
Increase of ≥20% from nadir weight (n, %)	123 (41.6)	77 (26.0)	0.50 (0.35 – 0.71)	< 0.01

Reference = nRYGB.
nRYGB = non-banded Roux-en-Y gastric bypass, bRYGB = banded Roux-en-Y gastric bypass, N = number of patients, OR = odds ratio, CI = confidence interval.

The blue dashed line displays the new criterium for recurrent weight gain (i.e. >30% from the initial weight loss)
RYGB = regular Roux-en-Y gastric bypass, raRYGB = ring-augmented Roux-en-Y gastric bypass

Obesity Surgery (2025) 35:3013–3019
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The concept of Cumulative TWL

Obesity Surgery (2024) 34:3521–3522
https://doi.org/10.1007/s11695-024-07398-9

CORRESPONDENCE

Setting the Standard: Cumulative Total Weight Loss as Outcome Measure After Secondary Bariatric Metabolic Surgery

Kayleigh A. M. van Dam[1,2] · Geert H. J. M. Verkoulen[1] · Evelien de Witte[1,3] · Pieter P. H. L. Broos[1,3] · Jan Willem M. Greve[2] · Evert-Jan G. Boerma[1,3]

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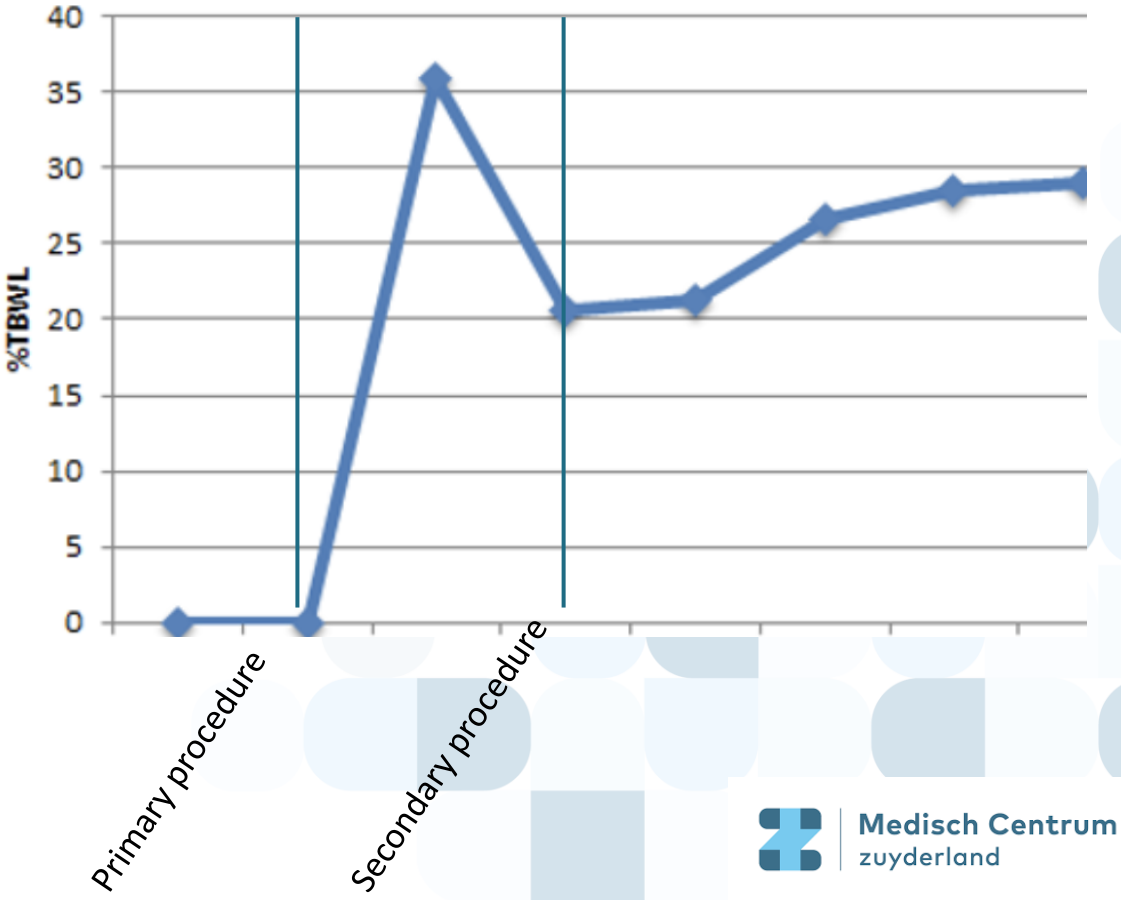

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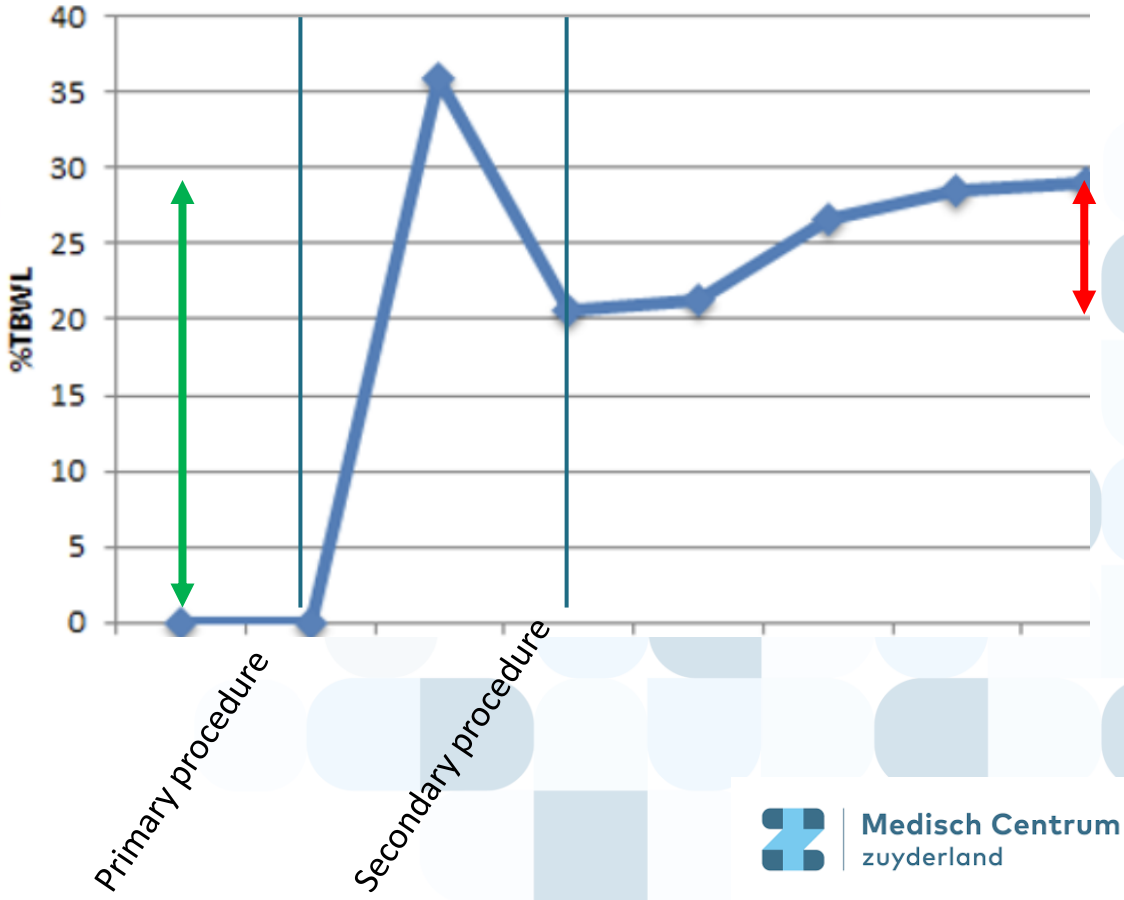
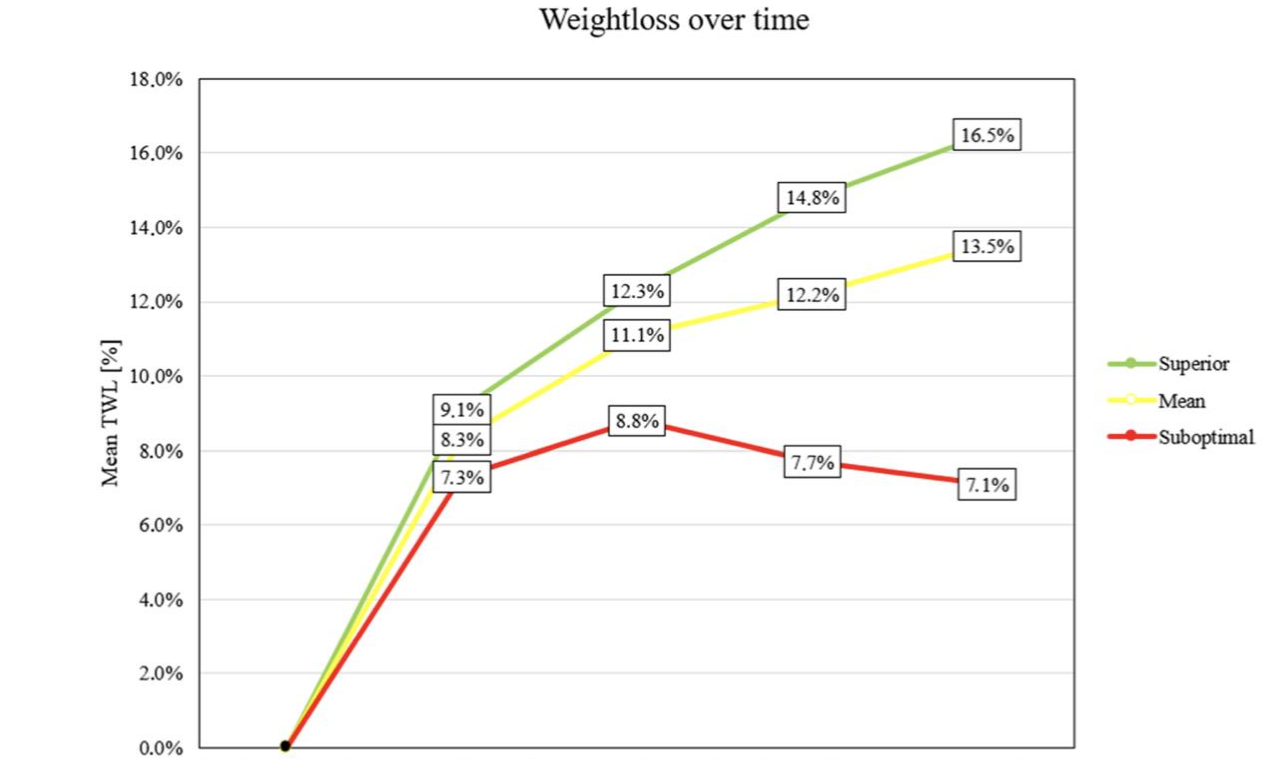


Pouch revision and Minimizer placement

Post-Revision		TWL [%]
P12 months	Superior	14.8
	Inferior	7.7
	Total	12.2
P24 months	Superior	16.5
	Inferior	7.1
	Total	13.5

One Ring-related complication (2.8%)



	Screening	3 months	6 months	12 months	24 months
Superior % (n)	0	9.1 (19)	12.3 (17)	14.8 (17)	16.5 (15)
Mean %[a] (n)	0	8.3 (31)	11.1 (26)	12.2 (26)	13.5 (22)
Suboptimal % (n)	0	7.3 (11)	8.8 (9)	7.7 (9)	7.1 (7)

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https://doi.org/10.1007/s11695-025-07984-5

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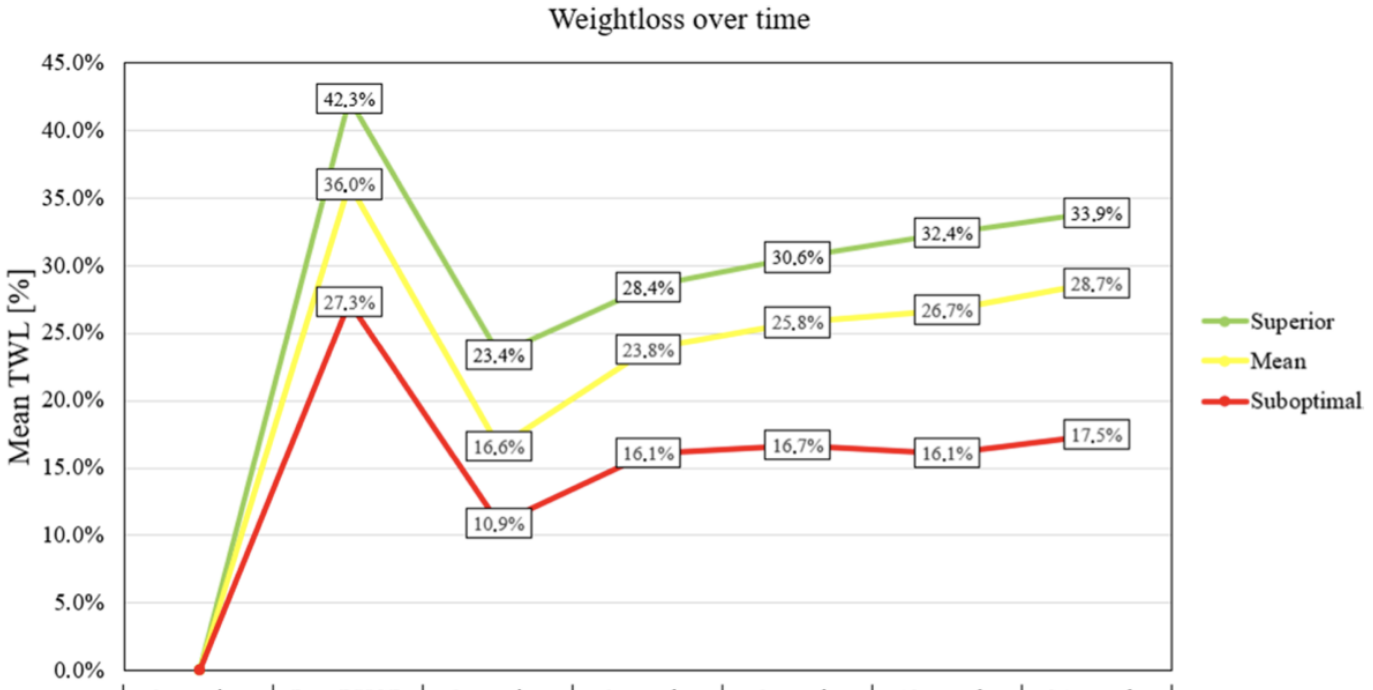
Pouch revision and Minimizer placement

Post-RYGB		TWL [%]
P12 months	Superior	32.4
	Inferior	16.1
	Total	26.7
P24 months	Superior	33.9
	Inferior	17.5
	Total	28.7



	Screening	Post RYGB	Screening	3 months	6 months	12 months	24 months
Superior % (n)	0 (20)	42.3 (20)	23.4 (20)	28.4 (19)	30.6 (17)	32.4 (17)	33.9 (15)
Mean %[a] (n)	0 (36)	36.0 (35)	16.6 (36)	23.8 (31)	25.8 (26)	26.7 (26)	28.7 (22)
Suboptimal % (n)	0 (15)	27.3 (15)	10.9 (15)	16.1 (11)	16.7 (9)	16.1 (9)	17.5 (7)

Obesity Surgery (2025) 35:2990–2997
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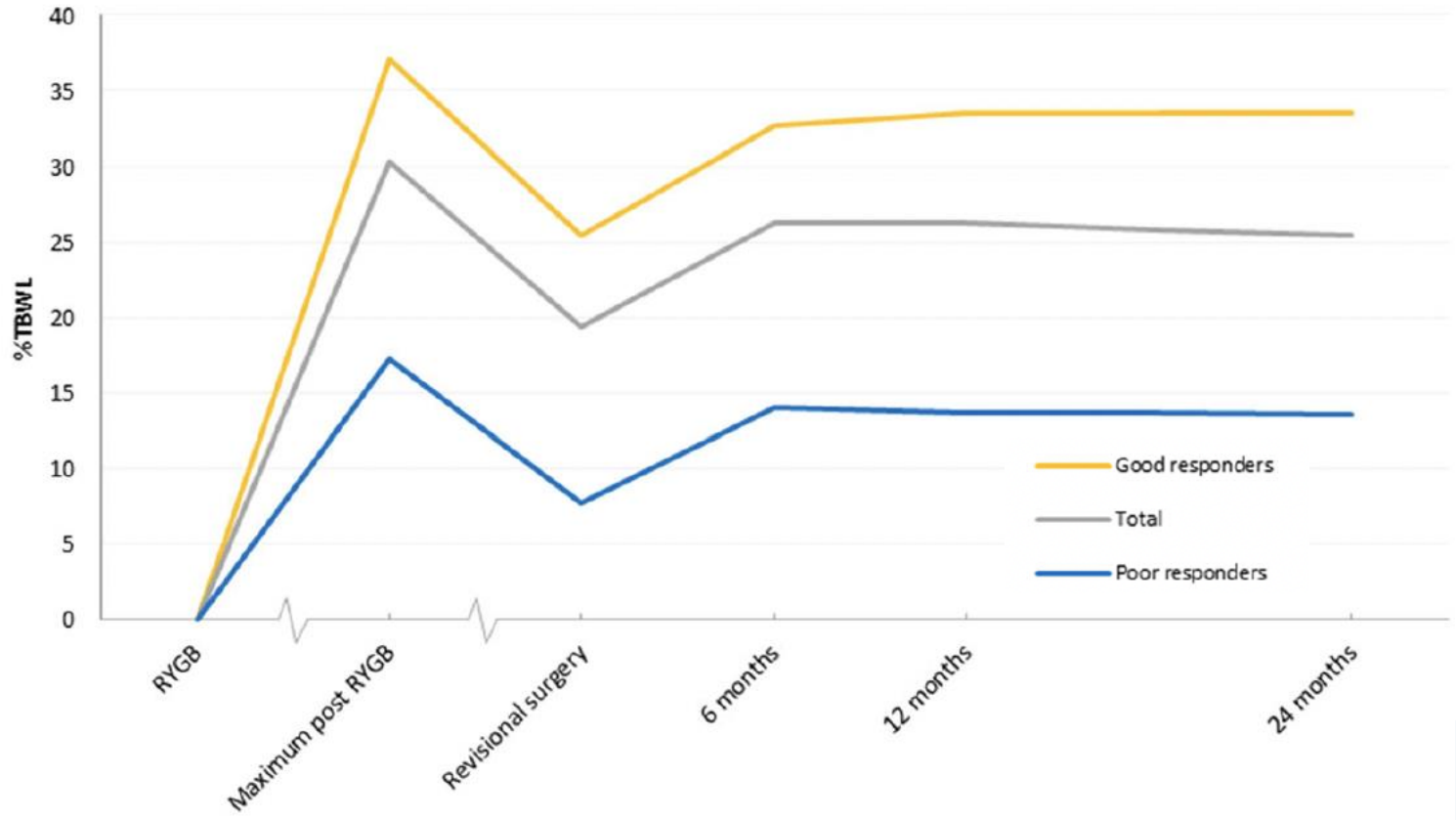
Pouch revision and Minimizer placement



Obesity Surgery (2020) 30:797–803
https://doi.org/10.1007/s11695-019-04361-x

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Conclusions

- As sustained weightloss is the ultimate goal of MBS, ring augmented procedures should be considered as they result in higher percentages of weightloss, specifically on the long term.
- Ring related complications are rare and are easy to treat

- Pouch revision in combination with Minimizer placement results in significant additional weightloss with a acceptable complication rate and should be considered as a viable option for recurrent weight gain after RYGB

Questions?

Minimizer II-study

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