

# XXVIII IFSO World Congress

9-12 September 2025 | Santiago, Chile



## Are New Metabolic Procedures Critical for the Evolution of the Field ?

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# IFSO 2025 Santiago

Combined Therapies, The Dawn of a New Era

[ifso2025.org](https://ifso2025.org)



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# Nothing to Disclosure



**Really?**

**THE NEW**

**IS CRITICAL TO**

**ANY EVOLUTION !!**



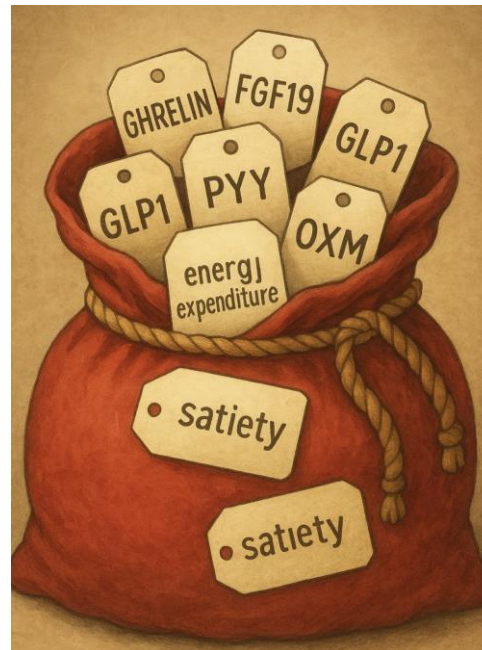
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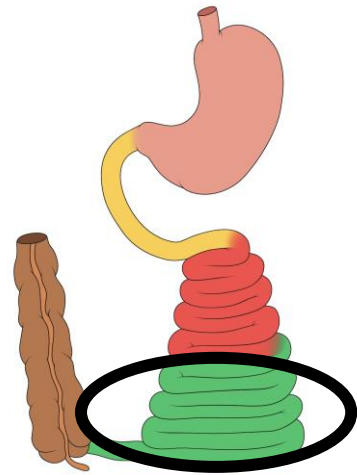
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1990

The **POST PRANDIAL**  
**Physiological Response** was  
understood after 1990

2025





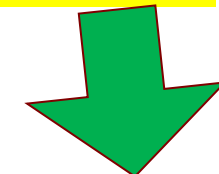
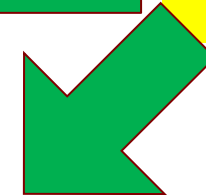
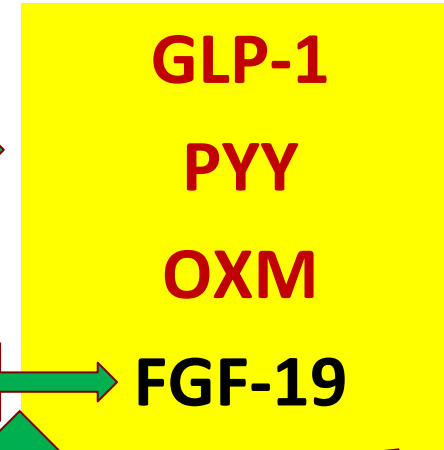
**Absorption of nutrients mainly in the ileum**

**L CELLS**



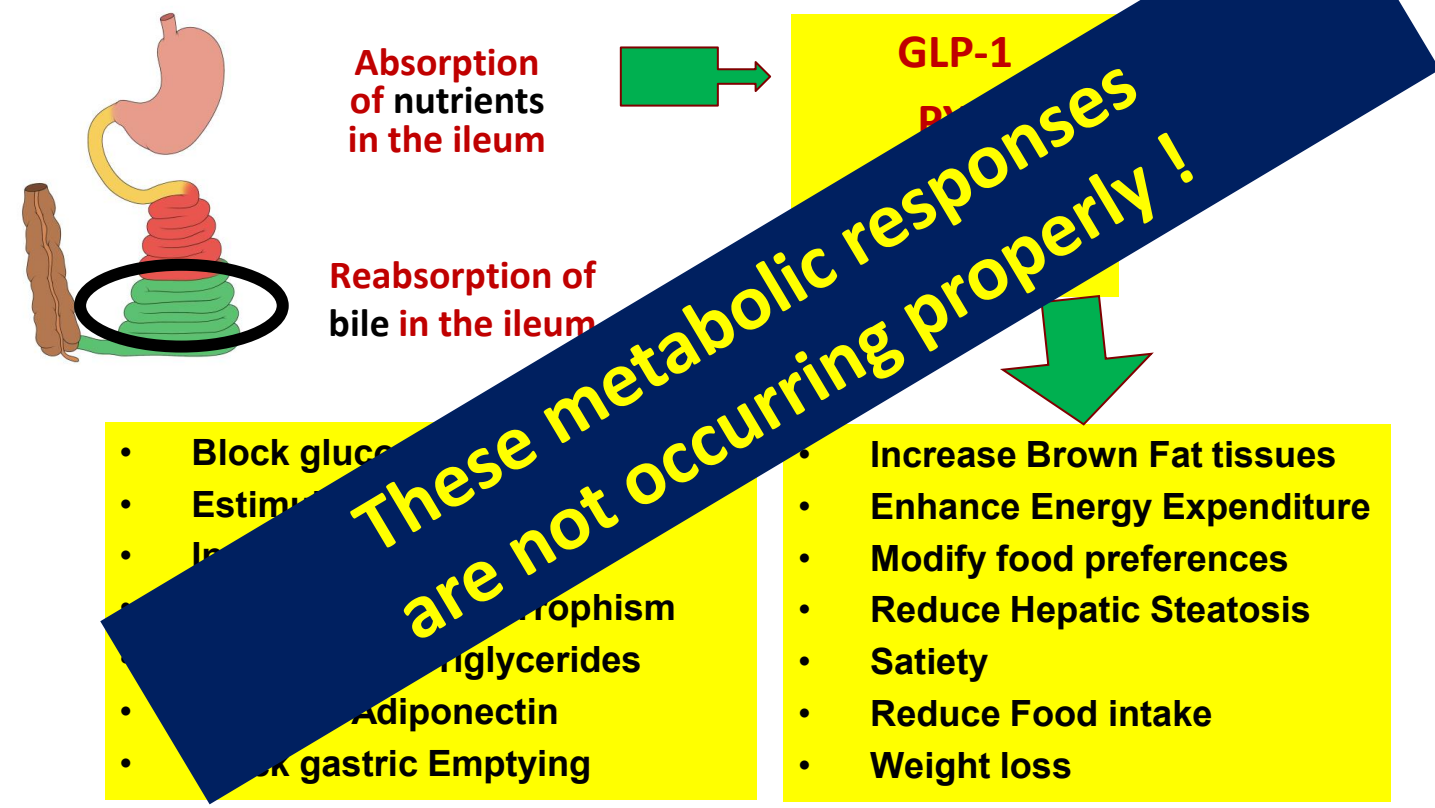
**Reabsorption of bile exclusively in the ileum**

**ileocyte**



- **Estimate insulin secretion**
- **Block gluconeogenesis**
- **Insulin sensitivity**
- **Maintain Beta Cell Trophism**
- **Clearence of Triglycerides**
- **Glucose Effectiveness**
- **Block gastric Emptying**

- **Increase Brown Fat tissues**
- **Enhance Energy Expenditure**
- **Modify food preferences**
- **Reduce Hepatic Steatosis**
- **Satiety**
- **Reduce Food intake**
- **Weight loss**

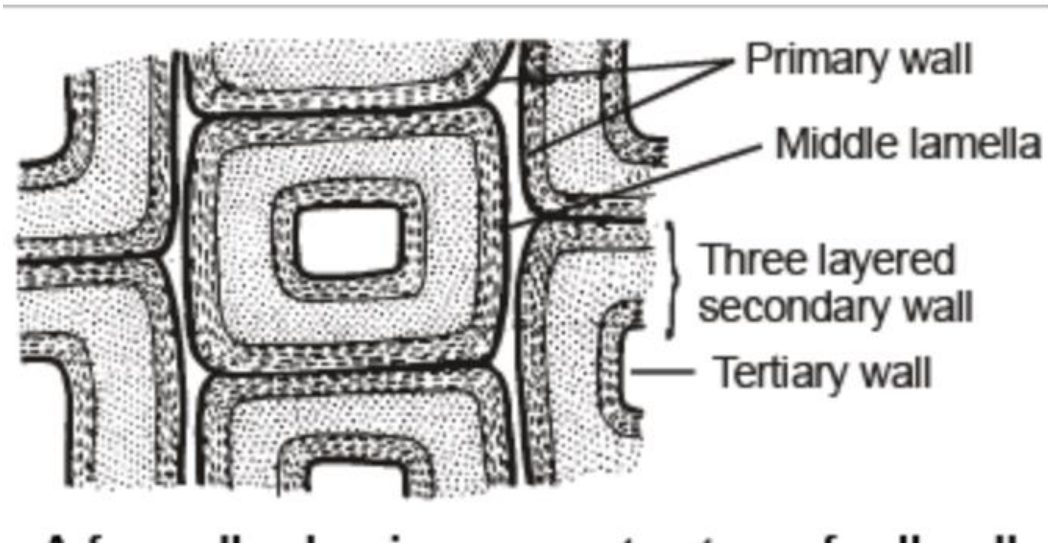


# Cellulose - The vegetal cell wall



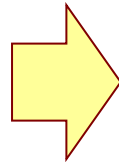
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# Suddenly...

From a little of this...



To much of these!



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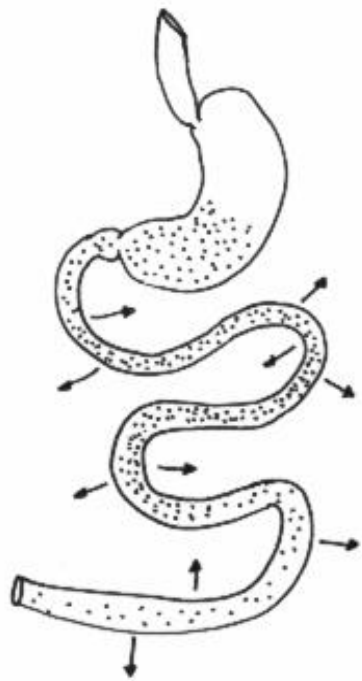
# Obesity and Metabolic Syndrome

## The Proximal-Distal Imbalance Theory



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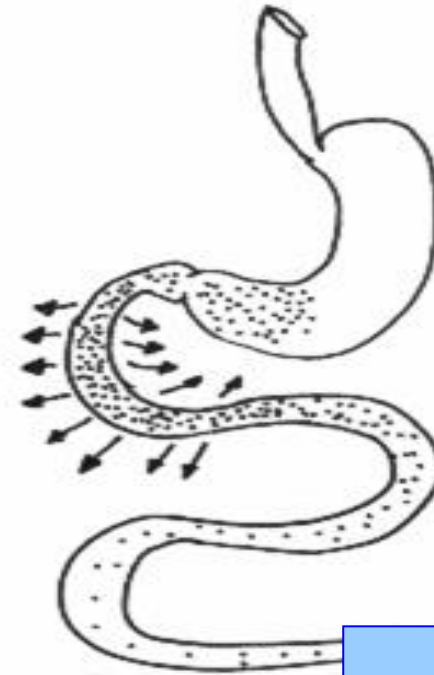
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Refined  
modern diet



Santoro S. Einstein 2003, 1:44



duodenojejunal  
**ENDOCRINE**  
hyperactivity

Ileal  
**ENDOCRINE**  
hypoactivity



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# Obesity and Metabolic Syndrome

If you give the patients:

✓ GLP-1, or PYY, FGF19, OXM

✓ Its analogs (like semaglutide )

✓ Or if you don't give the enzyme that destroy them:

✓ DPP-IV inhibitors— (like Sitagliptin)

**Patients improve**



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# IN WEIGHT RECIDIVISM AFTER RYGB, WHAT DID NOT WORK WELL ?

ORIGINAL ARTICLES

## Gut Hormones as Mediators of Appetite and Weight Loss After Roux-en-Y Gastric Bypass

*Carel W. le Roux, MRCP, PhD,\* Richard Welbourn, MD, FRCS,† Malin Werling, MD,‡  
Alan Osborne, MRCS,† Alexander Kokkinos, MD,\* Anna Laurenus, RD,‡ Hans Lönroth, MD, PhD,‡  
Lars Fändriks, MD, PhD,‡ Mohammad A. Ghatei, PhD,\* Stephen R. Bloom, FRCP, DSc,\*  
and Torsten Olbers, MD, PhD‡*

*(Ann Surg 2007;246: 780–785)*

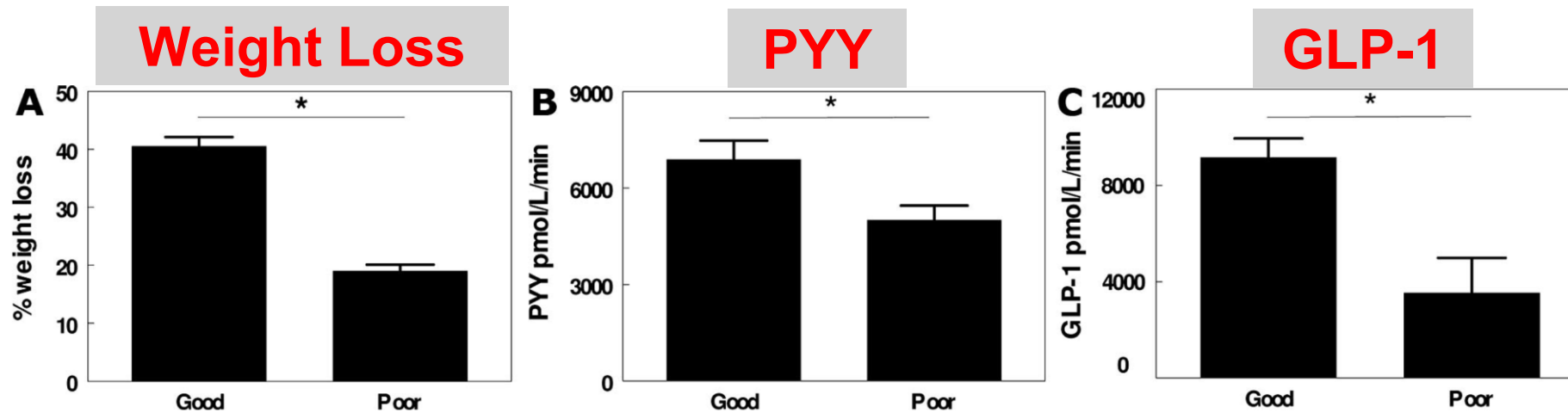


FIGURE 2. A, The total body weight loss after gastric bypass surgery in the good and poor weight loss groups. B and C, The PYY and GLP-1 responses after a standard meal of 400 kcal in the good and poor weight loss groups. \* $P < 0.05$ .

Good weight loss = BMI ~ 25.1 Kg/m<sup>2</sup>

Poor weight loss = BMI ~ 37.8 Kg/m<sup>2</sup>



# After an insufficient result of a jejunal surgery



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The Plan is to administer  
**ileal** hormones analogs ??



Even without  
**ANY ANATOMICAL MODIFICATION,**  
**DISTAL GUT HORMONES WORK!**



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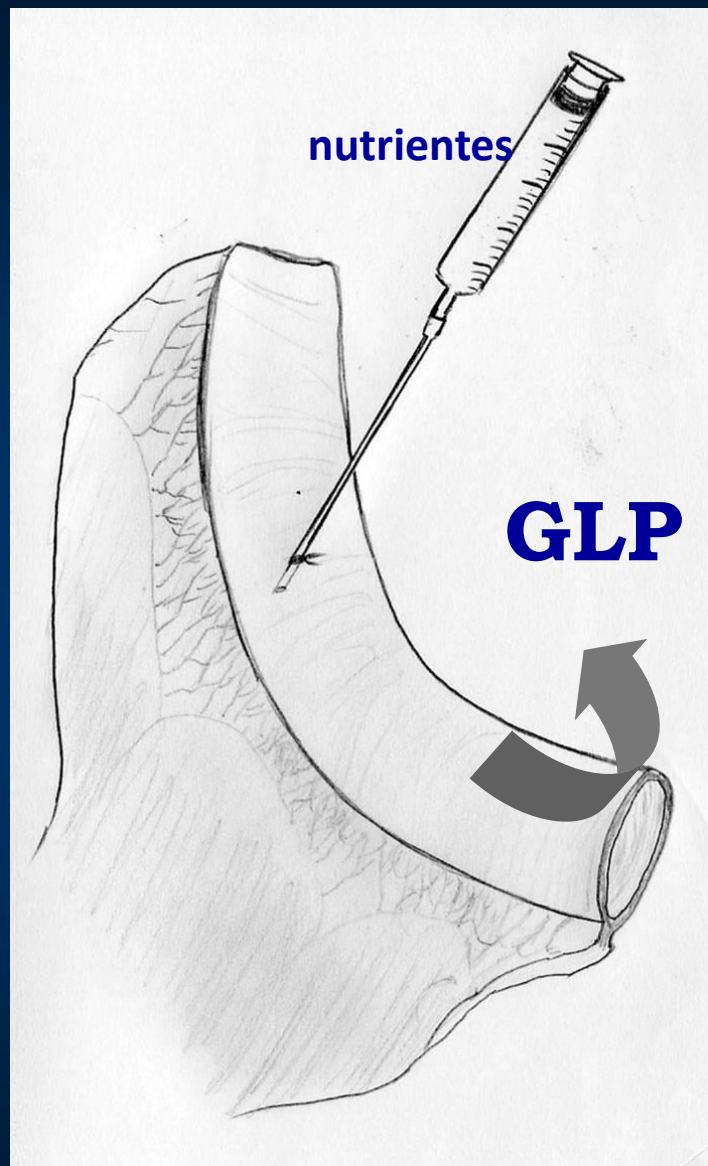






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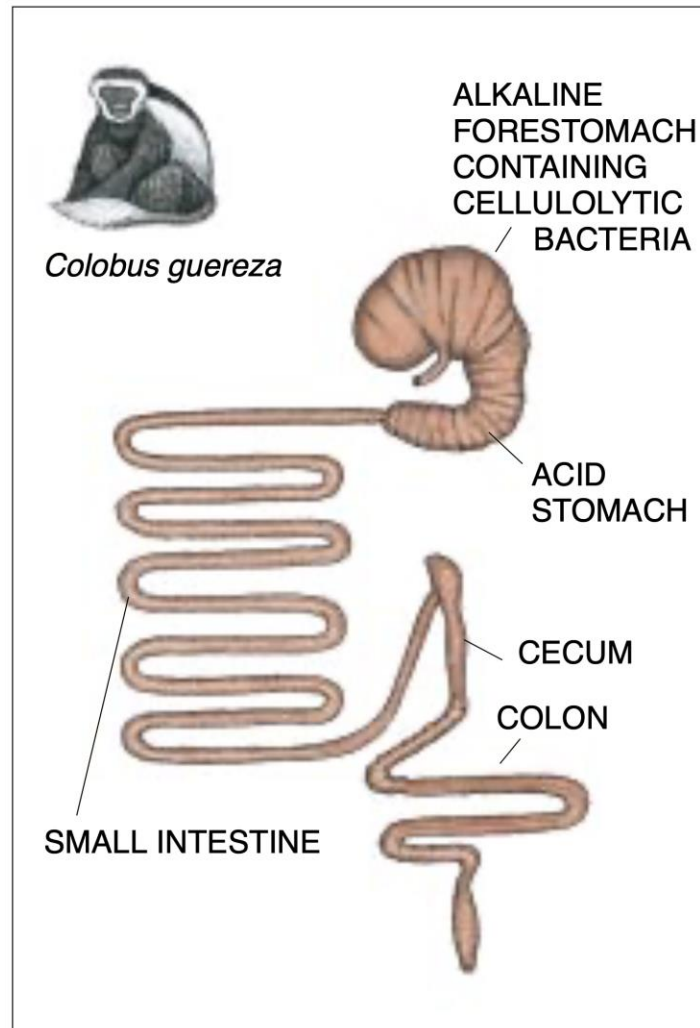
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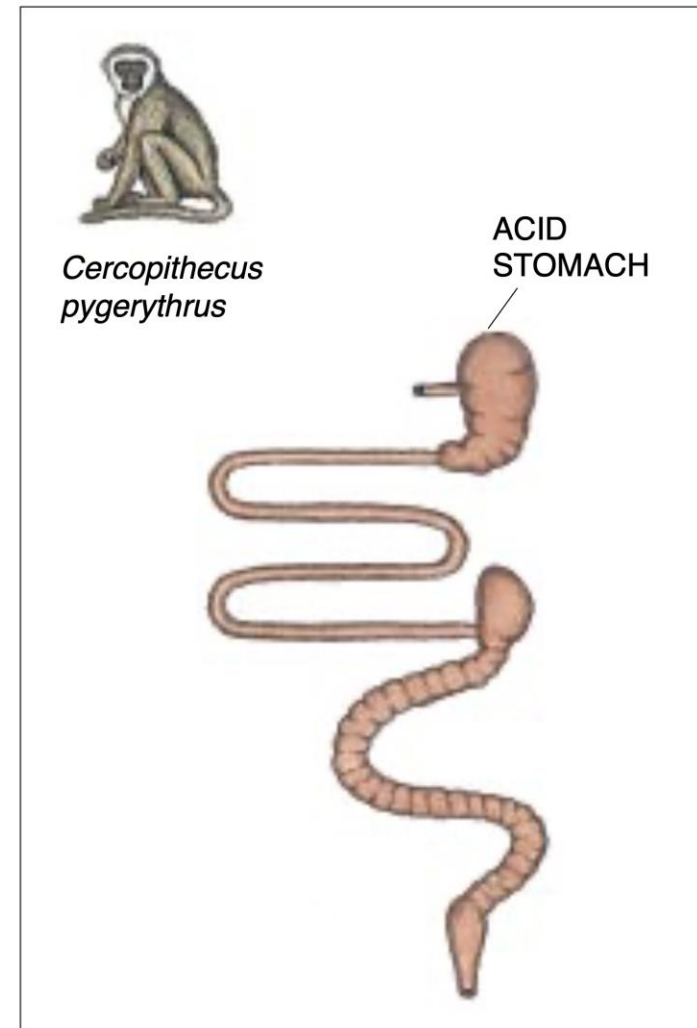
**“Under all experimental conditions, ileal carbohydrate increased plasma GLP-1 by 80-100% (all  $P < 0.005$ ). Ileal lipid perfusion had similar effects”**

Dig Dis Sci 1995 May;40(5):1074-82

**Diet: mostly leaves poor  
in calories and with a lot  
of cellulose**



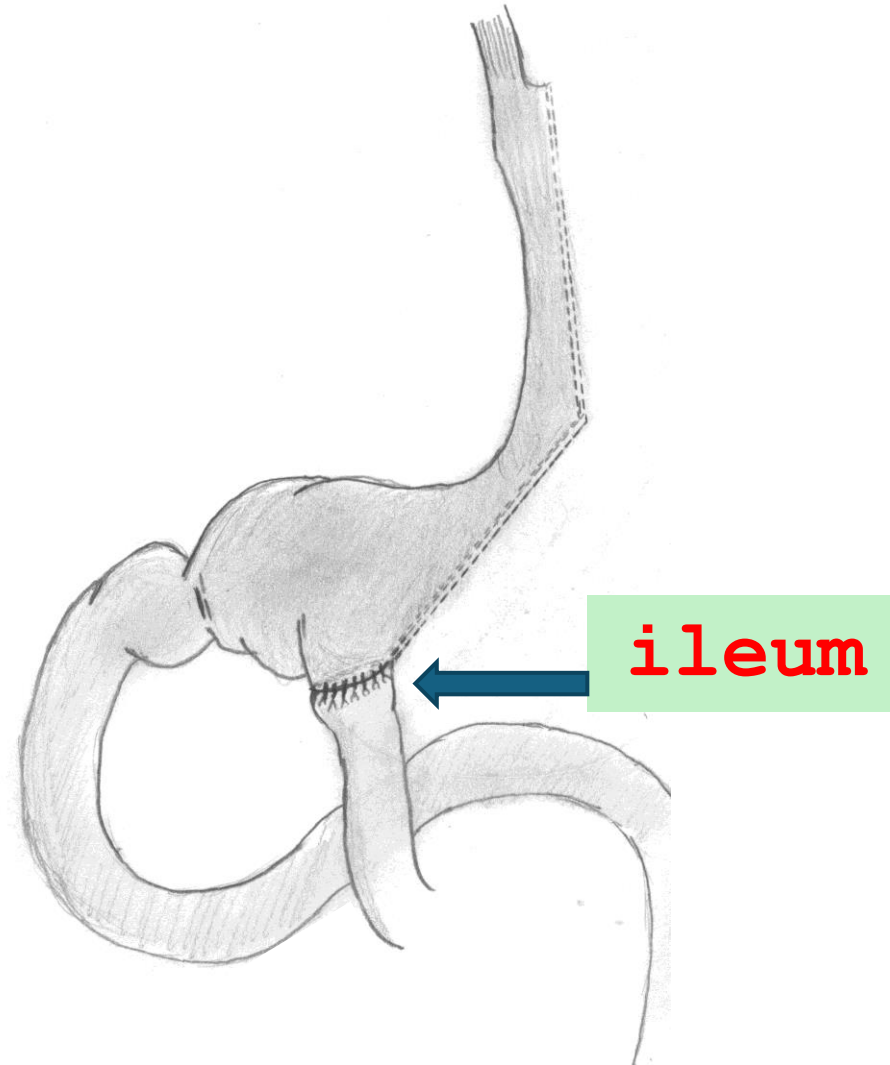
**Diet: younger leaves and  
fruits; more calories and  
less cellulose**



- The concept of a Bipartition (2001)
- First to procedure designed to **avoid restriction and malabsorption**

**Developed to rebalance gut endocrine activity**

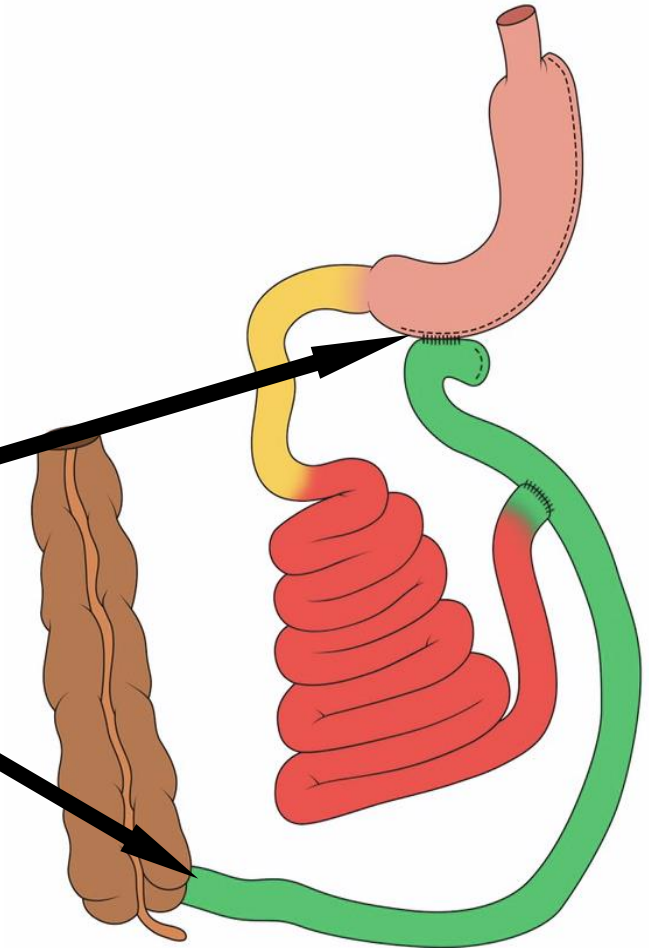
- First approved protocol (2002)
- First procedure (2003)



**Pure Metabolic Surgery**

# Gastro-cecal distance (GCD)

The smallest distance that  
does not provoke  
clinical malabsorption

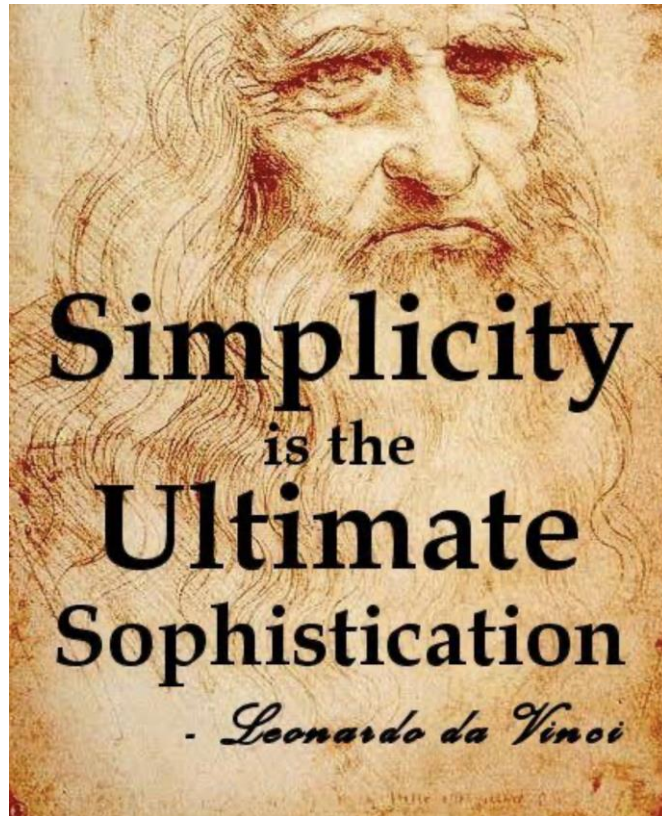


# The Bipartitions



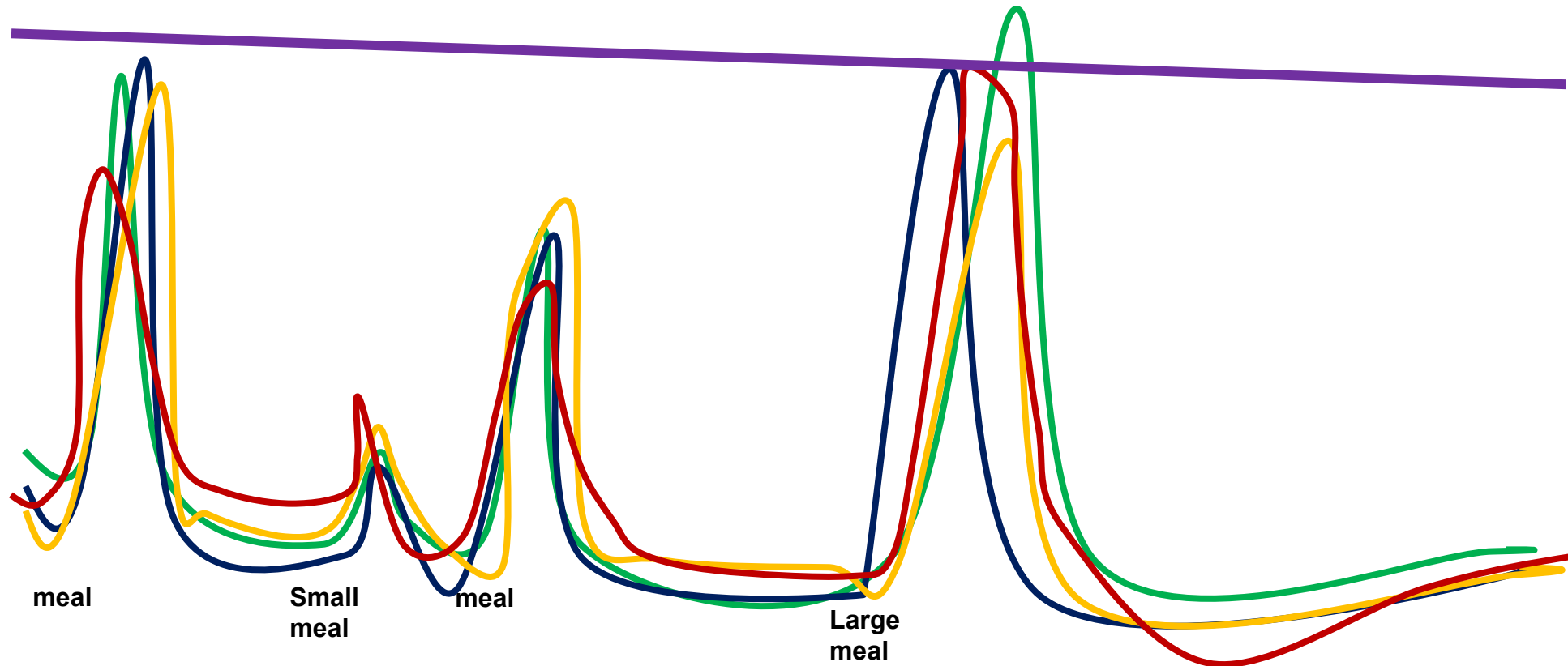
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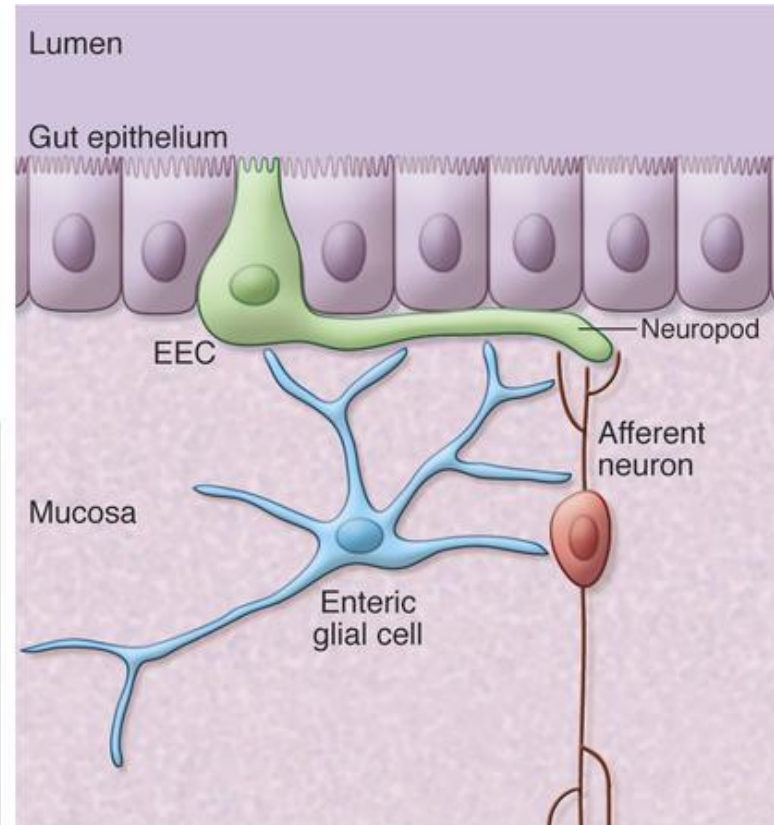
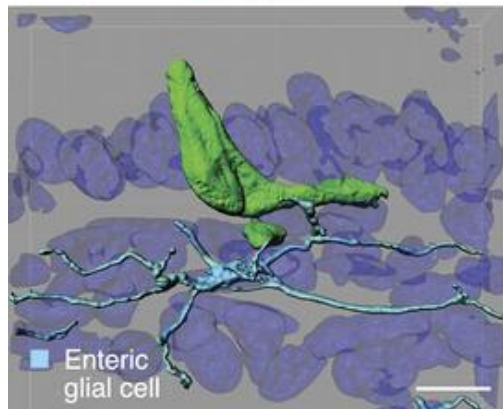
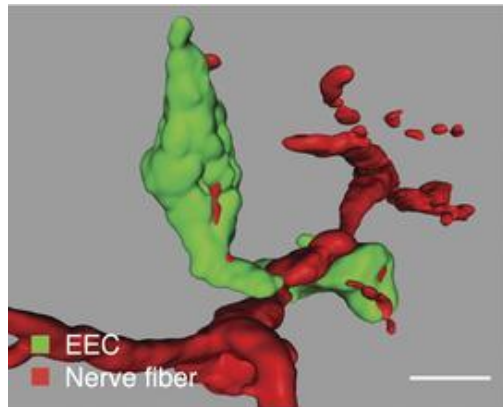
A simple mode to add the  
physiological ileal signals  
to your sleeve

# Physiological secretion of Gut hormones



Plasmatic levels of an administered single gut hormone analog

# The neuropods !



**Surgery** provides the secretion of hormones directly **over sensitive neurons** that receive and transmit these signals

**The subcutaneous has no neuropods for gut hormones...**



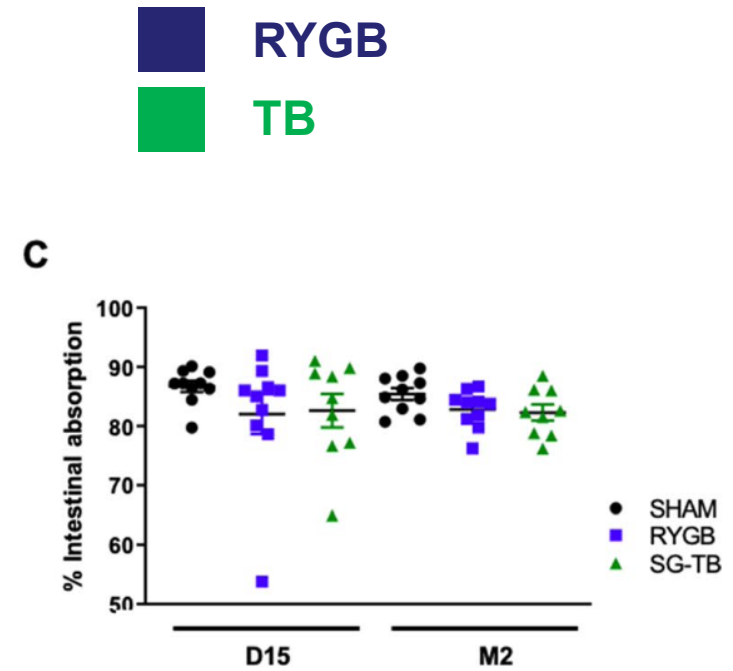
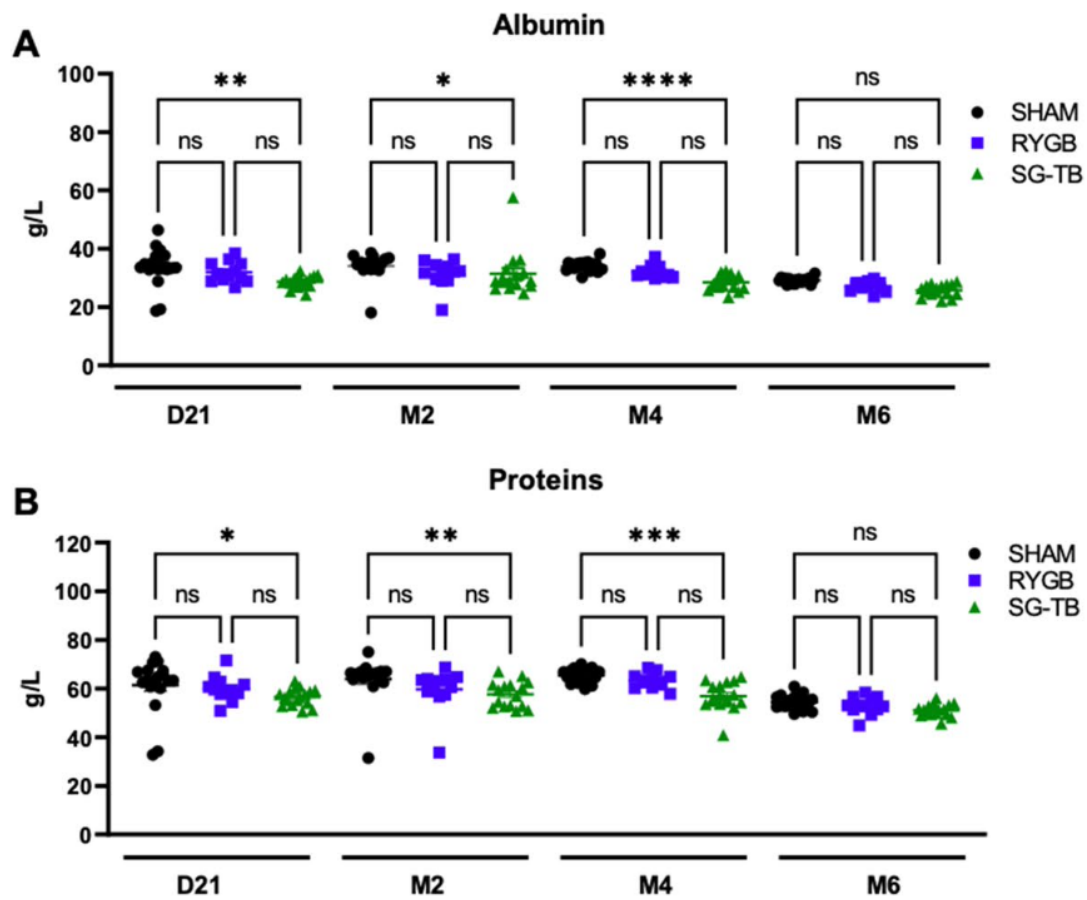
# Analysis of the Efficacy and the Long-term Metabolic and Nutritional Status of Sleeve Gastrectomy with Transit Bipartition Compared to Roux-en-Y Gastric Bypass in Obese Rats

Clement Baratte<sup>1,2,3</sup> · Alexandra Willemetz<sup>1,2</sup> · Lara Ribeiro-Parenti<sup>1,2,3</sup> · Claire Carette<sup>1,4</sup> · Simon Msika<sup>1,2,3</sup> · Andre Bado<sup>1,2</sup> · Sebastien Czernichow<sup>1,4,5</sup> · Maude Le Gall<sup>1,2</sup> · Tigran Poghosyan<sup>1,2,3</sup> 

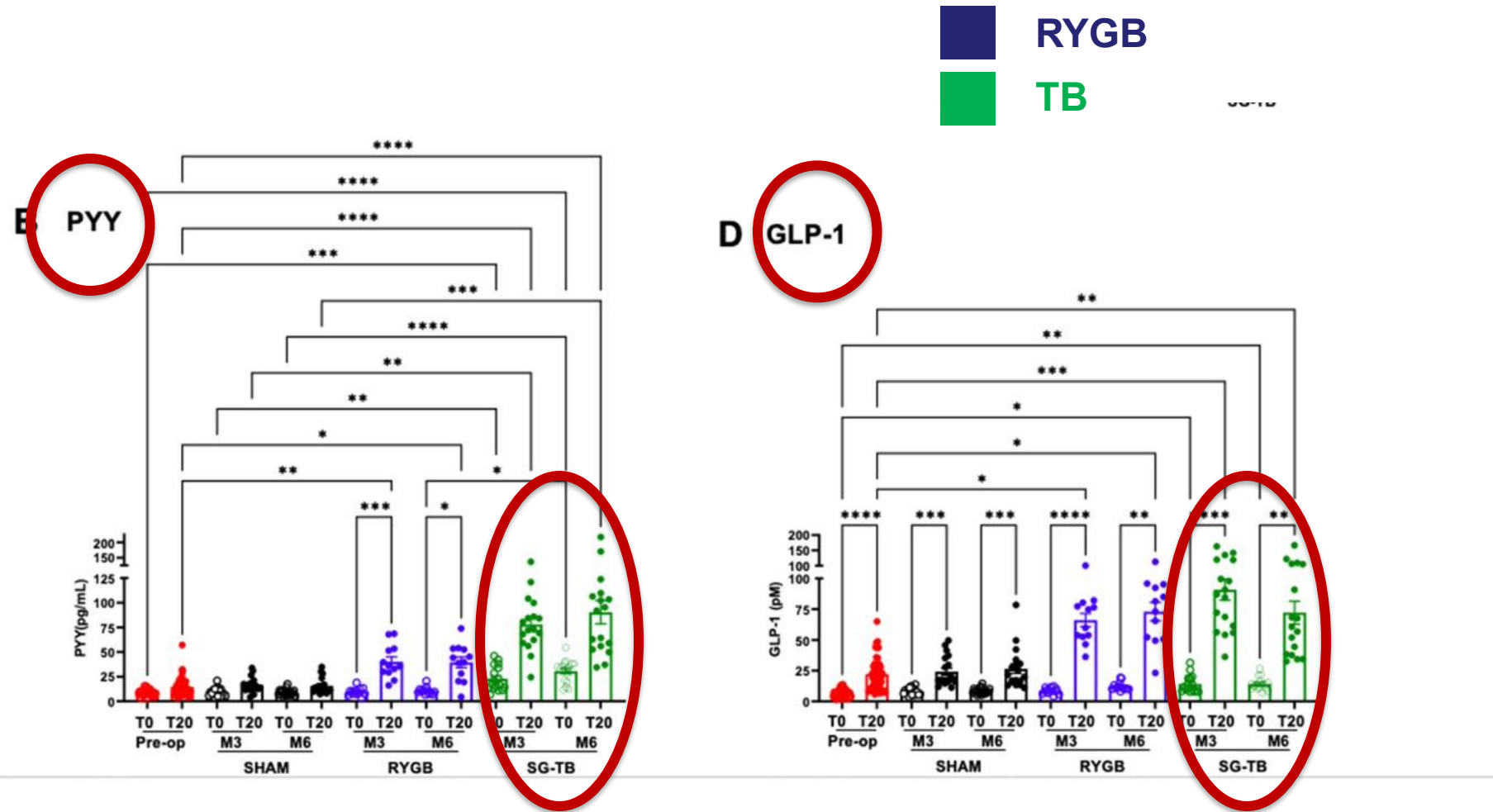
Received: 18 June 2022 / Revised: 12 January 2023 / Accepted: 19 January 2023

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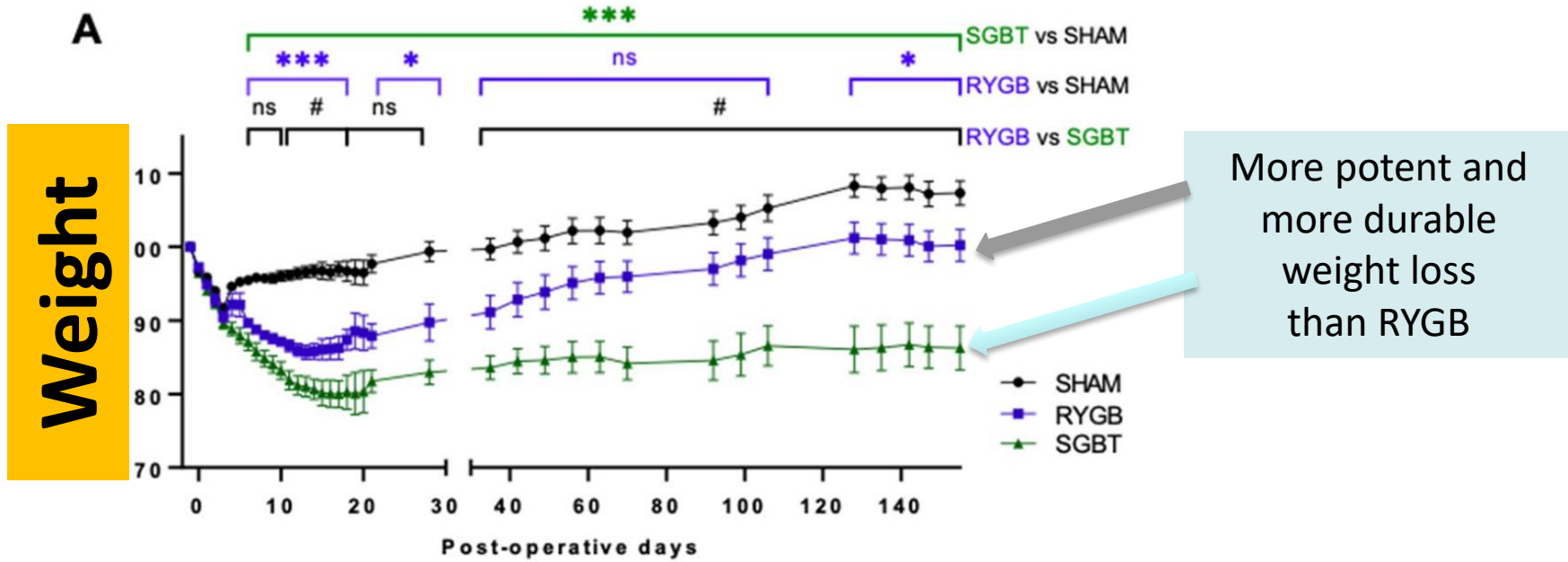
**SGTB x RYGB**  
**Obese rats**  
**6 months in a rat = 15 years in a man**



**No significant differences in nutritional parameters**



RYGB  
TB



Baratte C et al. Obes Surg 2023

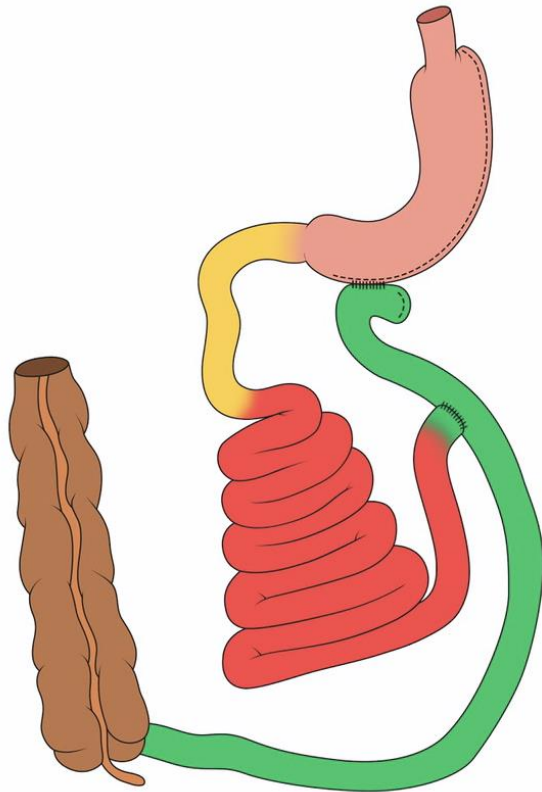
Baratte C et al. Obes Surg. 2023 Apr;33(4):1121-1132.

**Friendly anatomy with  
food everywhere**

**All limbs are  
alimentary**

**Full endoscopic  
access, including to  
the ileum**

**All is  
Common Channel  
Except 40cm**

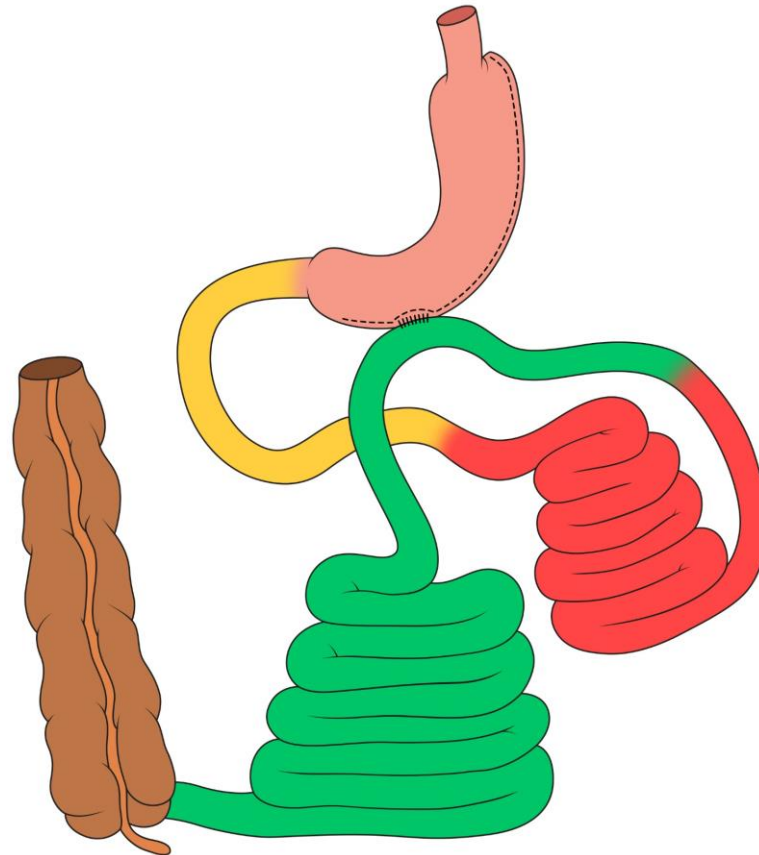


**The Bipartition**

# One-Anastomosis Transit Bipartition

## OATB

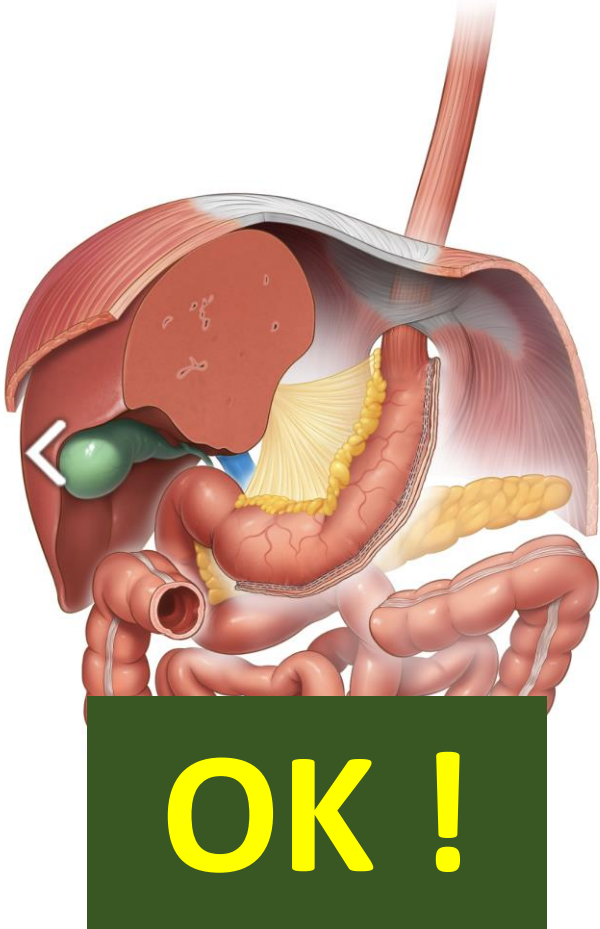
(SASI, Loop Bipartition)



**All Major Brazilian Societies**  
**have already**  
**recognized the Bipartitions**

# IFSO point of view ??

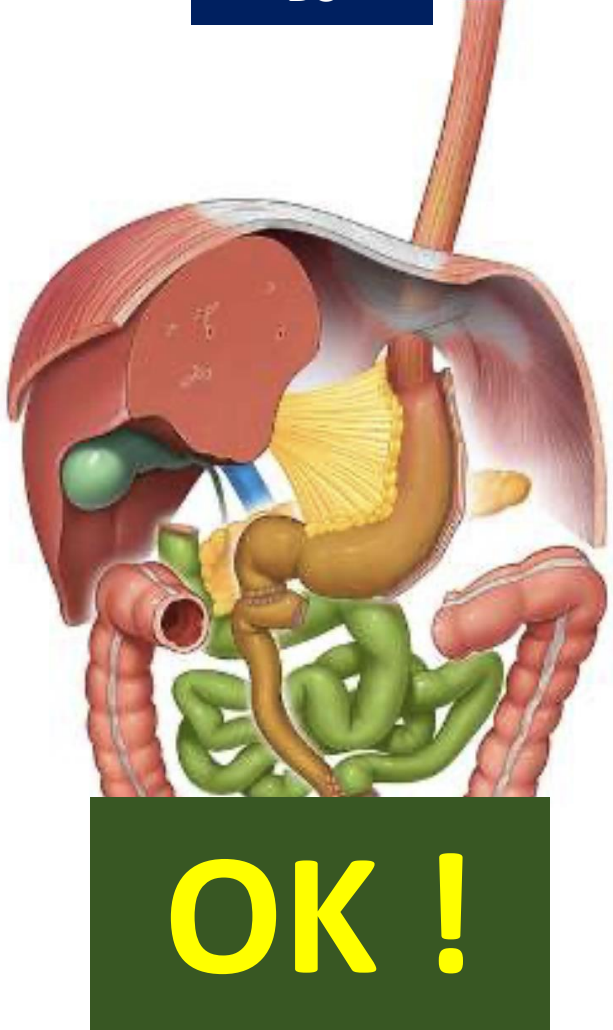
Sleeve



Bipartition



DS

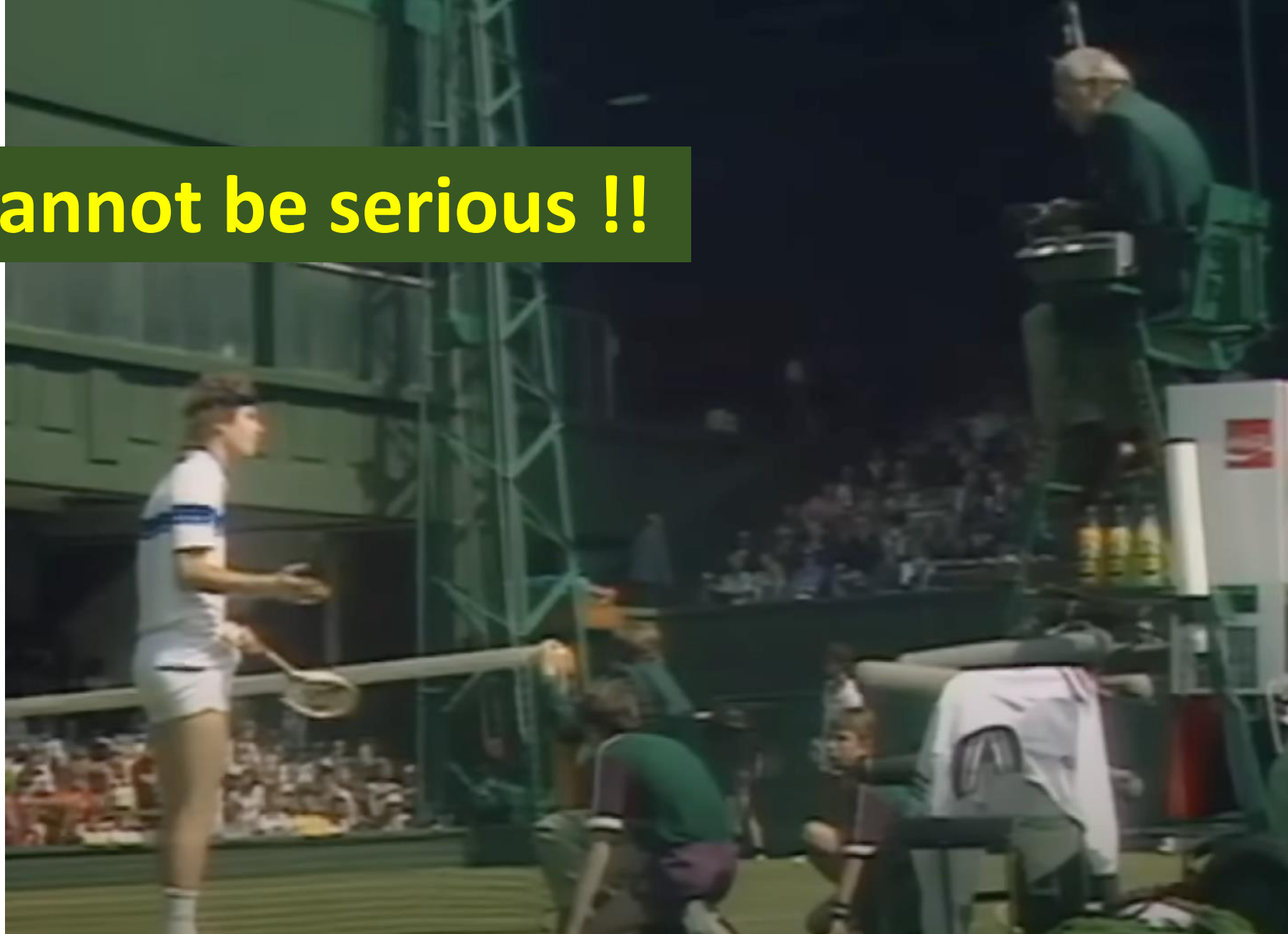




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**You cannot be serious !!**



1990



2025



1990



2025



1990



2025



1990



2025





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Bariatric Surgery → once aimed at Malnutrition

Disease

Pure Metabolic Surgery → aims at Disturbance of Metabolism

Treatment



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**Medication is a fantastic progress,  
but analogs in the subcutaneous  
are different than  
the Originals (all of them) in the gut**

# Pure Metabolic Surgery is our Evolution



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Thank You

