

Banded Sleeve Gastrectomy VS Laparoscopic Sleeve Gastrectomy

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**NAPOLI
2023**

DISCLOSURES



Founding President of Bariatec Corporation that used to produce the MSR™ and GaBP Ring™ devices

I had a Ring Banded Gastric Bypass to control Type 2 diabetes with complete remission of Diabetes with loss and maintenance of 58 lbs. for twelve years.

BMI 31.4 ----24.2

Hb A-1c 9.4---6.4

Blood glucose <100

Sleep Apnea- resolved

Arthritis-resolved

Increased energy level

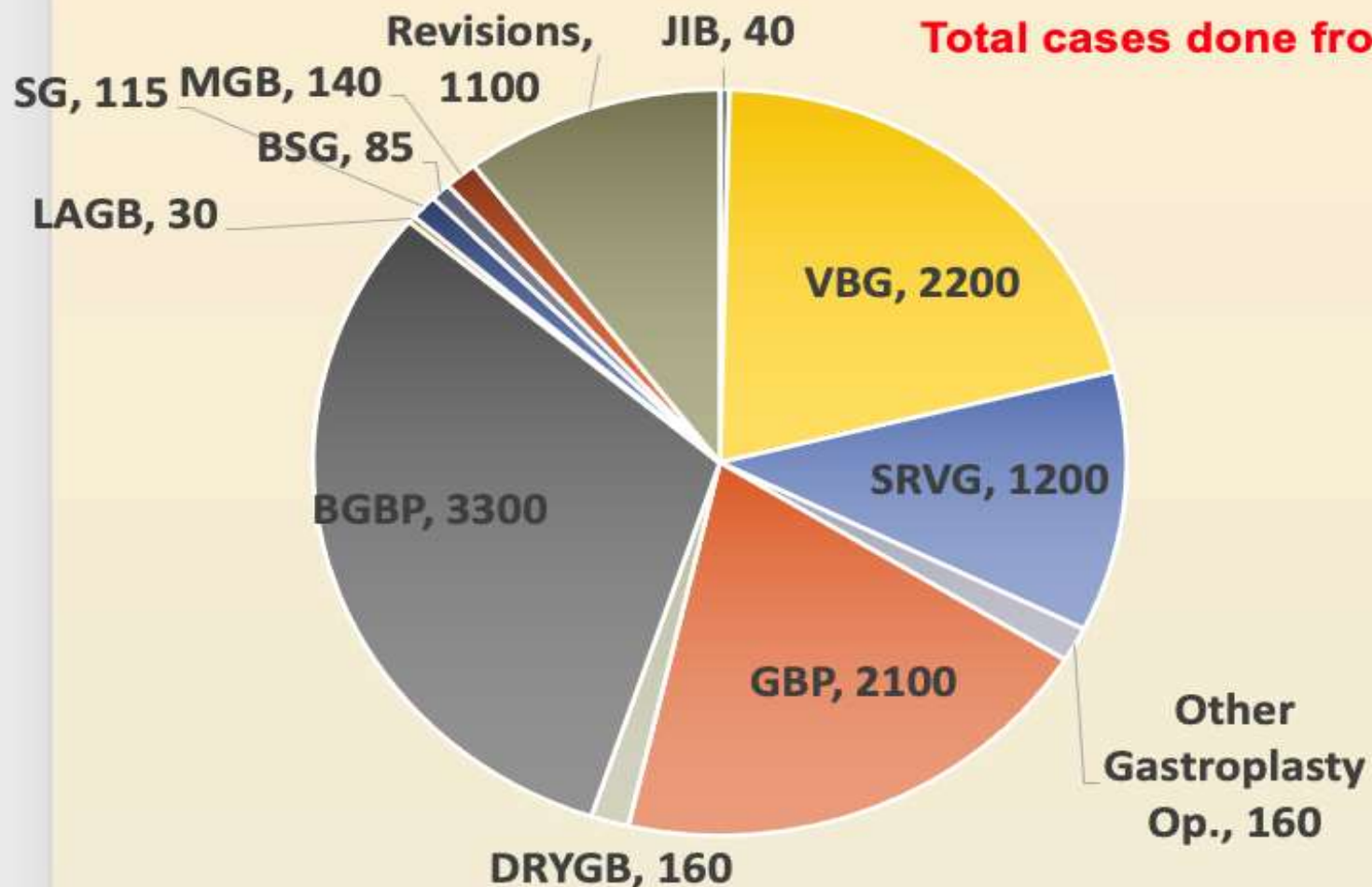


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Case Mix Disclosure

Mathias Fobi MD FACS

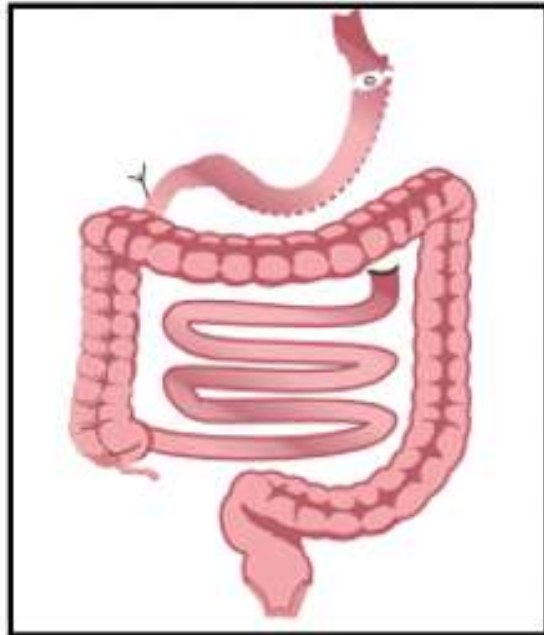
Total cases done from June 1974—To June 20, 2019 = 10,630



TYPE OF SURGERIES	Numbers
JIB	40
VBG	2200
SRVG	1200
Other Gastroplasty Op.	160
GBP	2100
DRYGB	160
BGBP	3300
LAGB	30
SG	115
BSG	85
MGB	140
Revisions	1100
TOTAL	10630

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BSG

Banded Standard Sleeve Gastrectomy (BSG)

A=1-2cm -----Distance of sleeve transection away from EG Junction
B=2.5-3cm----Width of the Sleeve
use size 32-40 Fr. Bougie to size sleeve
C= 15 to 20 cms. Length of the Sleeve
D=2-6cm-----Antrectomy distance from the pylorus
V=75-150 cc-Volume of the Sleeve

Band is placed 3-5 cms. from GE junction
Band Size: 7, 7.5



SG

Standard Sleeve Gastrectomy (SG)

A=1-2cm -----Distance of sleeve transection away from EG Junction
B=2.5-3cm----Width of the Sleeve
use size 32-40 Fr. Bougie to size sleeve
C= 15 to 20 cms. Length of the Sleeve
D=2-6cm-----Antrectomy distance from the pylorus
V=75-150 cc-Volume of the Sleeve

A5103

WEIGHT REGAIN 5 YEARS AFTER LAPAROSCOPIC SLEEVE GASTRECTOMY: BALANCING THE BENEFITS

*James Tankel¹; Michael Neumann²; Alexander Mintz³;
Josef Weiss³; Ohn Sibirsky³; Ram M Spira³; ¹Shaare Zedek
Medical Centre, Tsur Hadassah Jerusalem; ²Shaare Zedek*

- **LSG** is a successful bariatric procedure with a significant number of patients achieving greater than 50% EWL. However, a large number of patients subsequently regain weight with a significant number subsequently falling below the EWL of 50% that they had achieved.





Weight Regain Following Sleeve Gastrectomy—a Systematic Review

Melanie Lauti¹ · Malsha Kularatna¹ · Andrew G. Hill¹ · Andrew D. MacCormick¹

Systematic review reported the **rate and/or cause of weight regain**

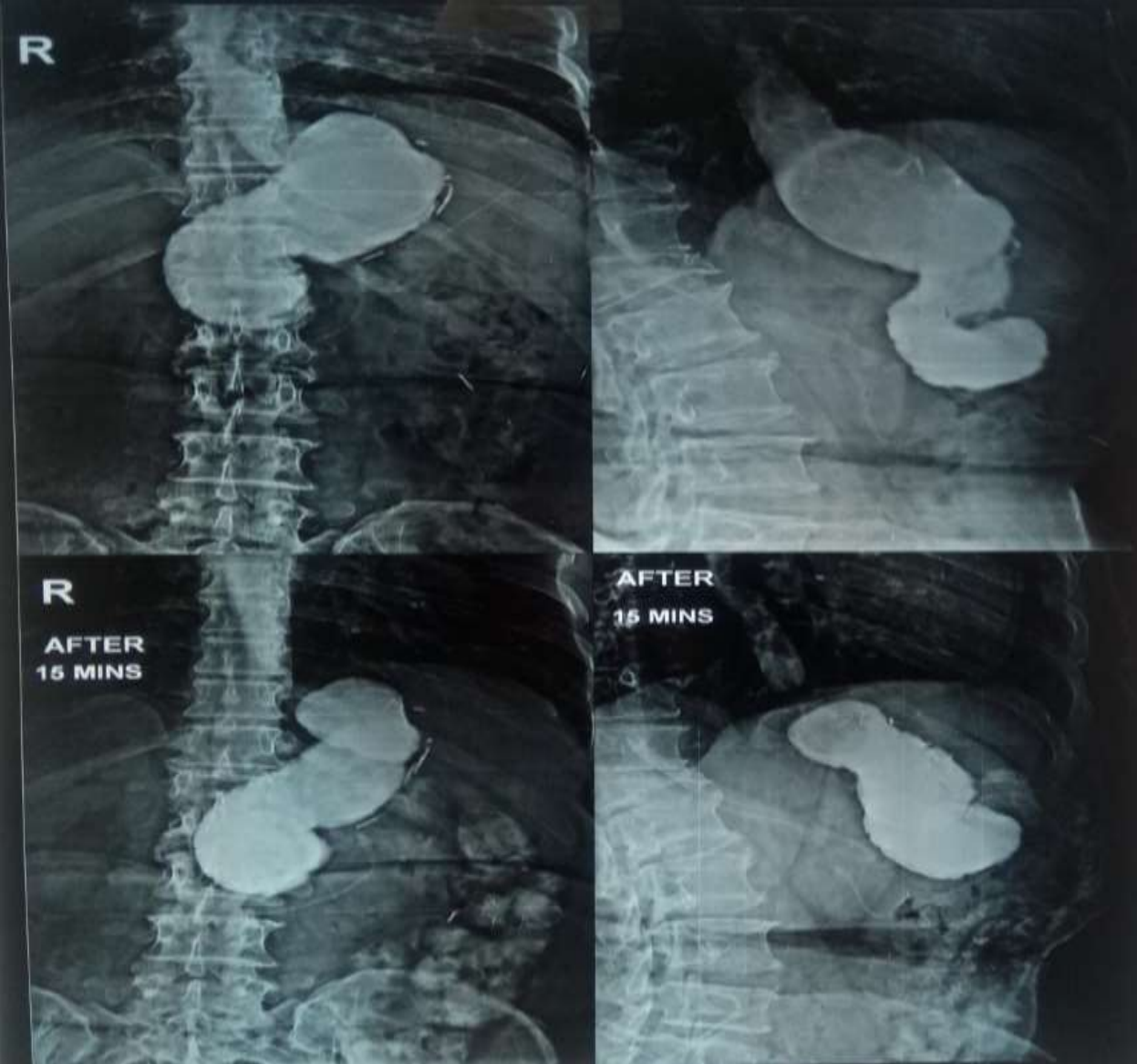
- **Rates of regain** ranged from 5.7% at 2 years to 75.6% at 6 years.
- Proposed **causes of weight regain** included initial sleeve size, **sleeve dilation**, increased ghrelin levels, inadequate follow-up support and maladaptive lifestyle behaviours.



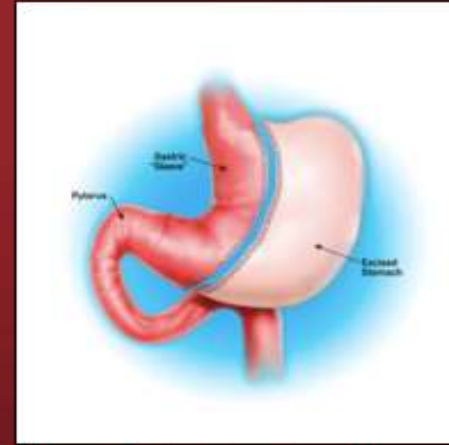
Dilation of the sleeve pouch is part of the natural history of the operation



Xray showing Dilated Sleeve over the years



Banding the Sleeve minimizes the dilation of the sleeve
Resulting in less weight regain



Sleeve Gastrectomy



Ring Banded Sleeve Gastrectomy



A Ring, banding the pouch of The Sleeve Gastrectomy prevents dilation of the sleeve

ORIGINAL CONTRIBUTIONS

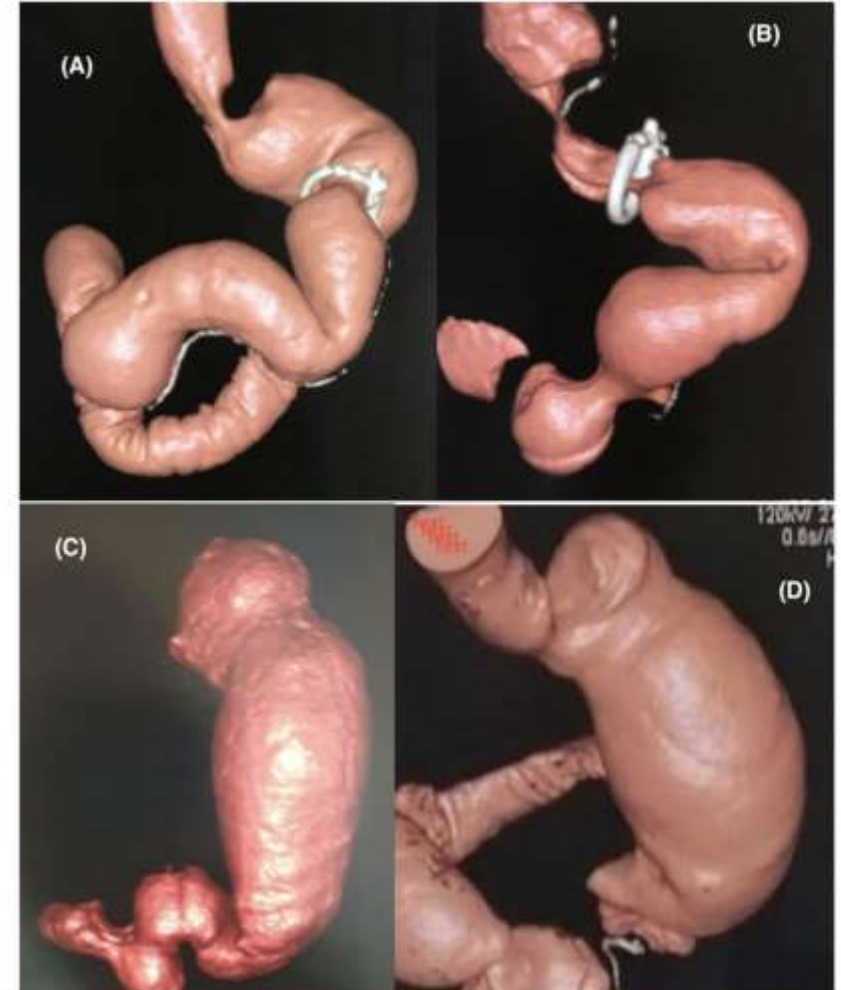


Comparison of Sleeve Volume Between Banded and Non-banded Sleeve Gastrectomy: Midterm Effect on Weight and Food Tolerance—a Retrospective Study

Mohamed Hany^{1,2} · Bart Torensma³ · Ahmed Zidan¹ · Ann Samy Shafiq Agayby¹ · Mohamed Ibrahim¹ · Mohamed El Shafie⁴ · Iman El Sayed⁵

No patients from the BS group needed conversion to another procedure, while 171 patients (13.4%) in the LSG had conversions to RYGB surgery. The indications for conversion were weight regain in 76 (3.9%), GERD in 64 (5.0%), and GERD with WR in 31 (2.2%) patients.

Fig. 4 Images from the 3D reconstruction of the sleeve pouch for volume assessment 4 years after surgery. (A) and (B): Banded sleeve gastrectomy (BSG), (C) and (D): conventional non-banded sleeve gastrectomy (LSG). N.B: Hiatal hernia is noted in Figure B.



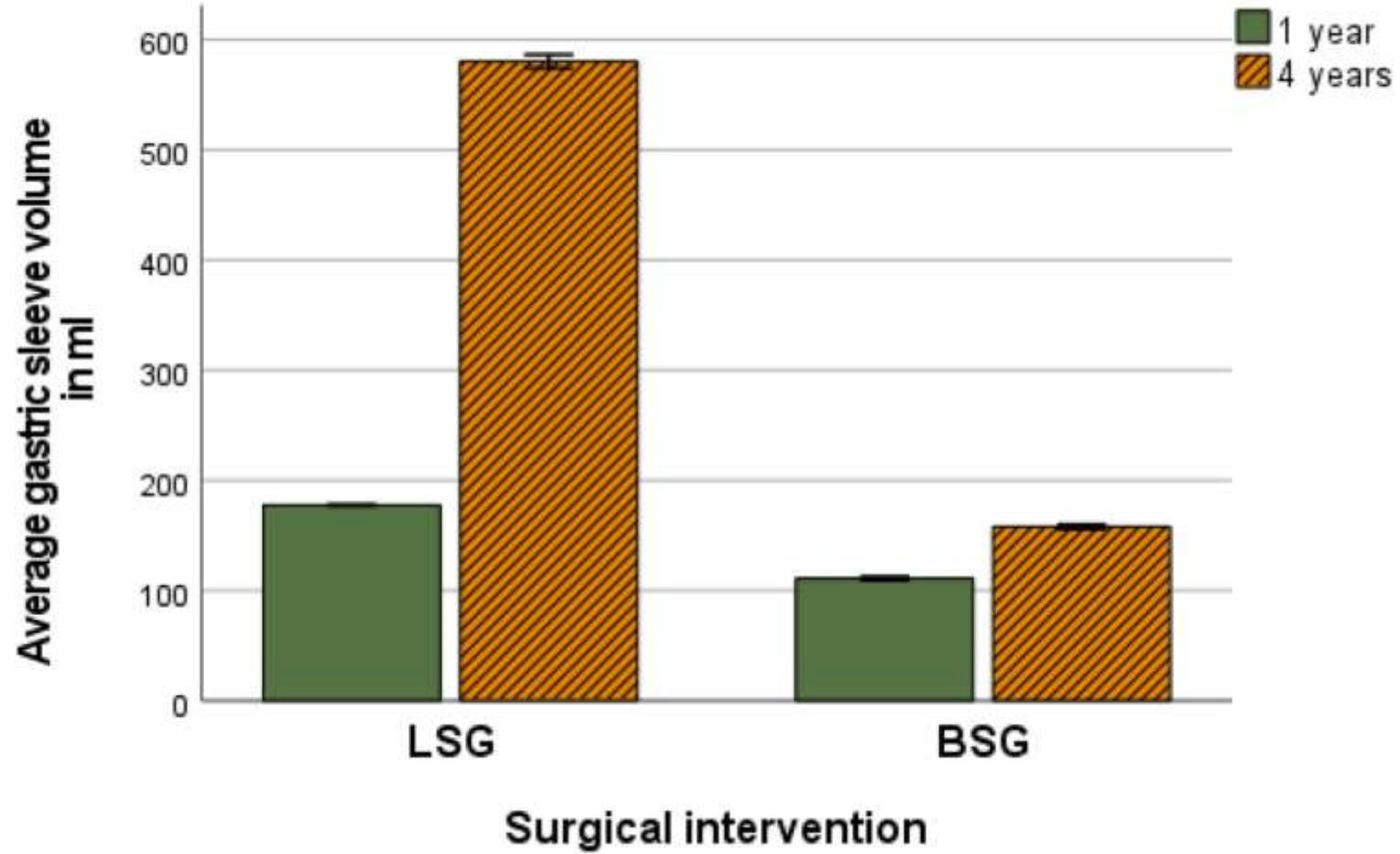
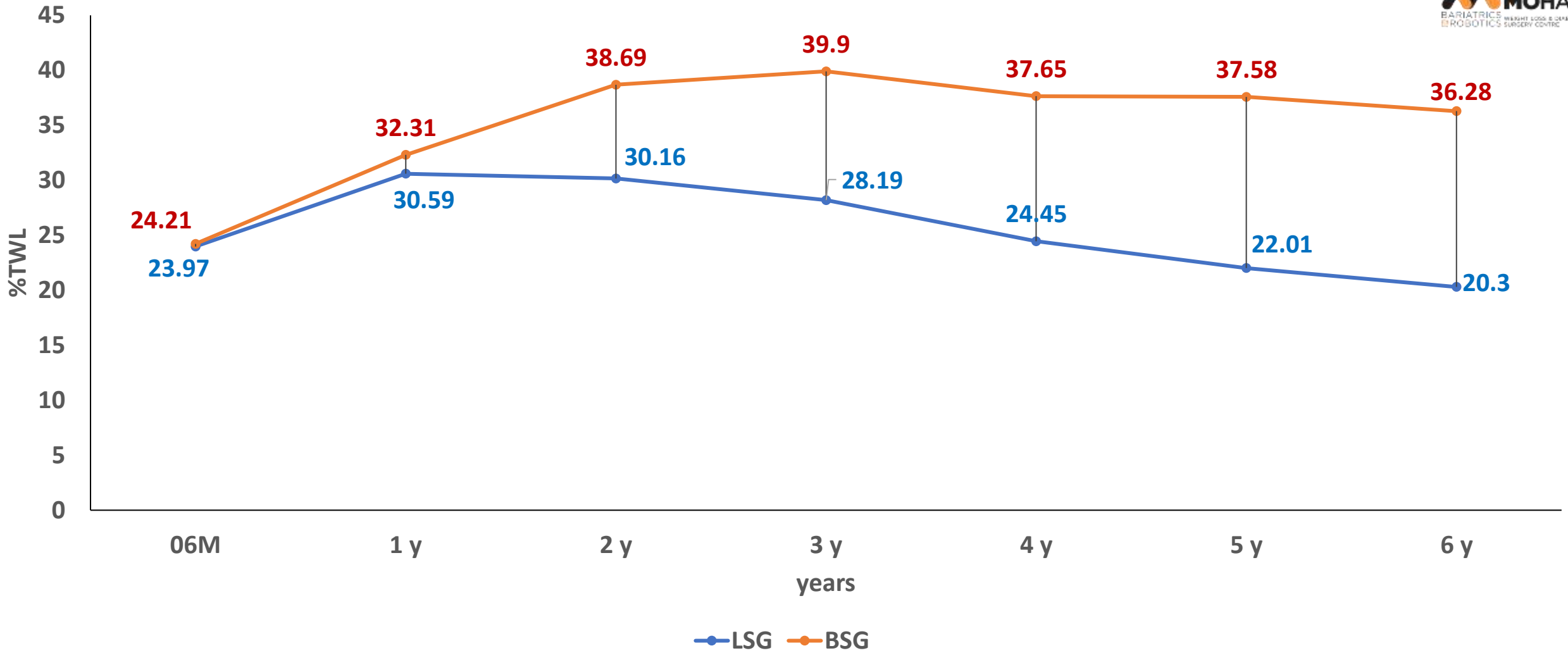


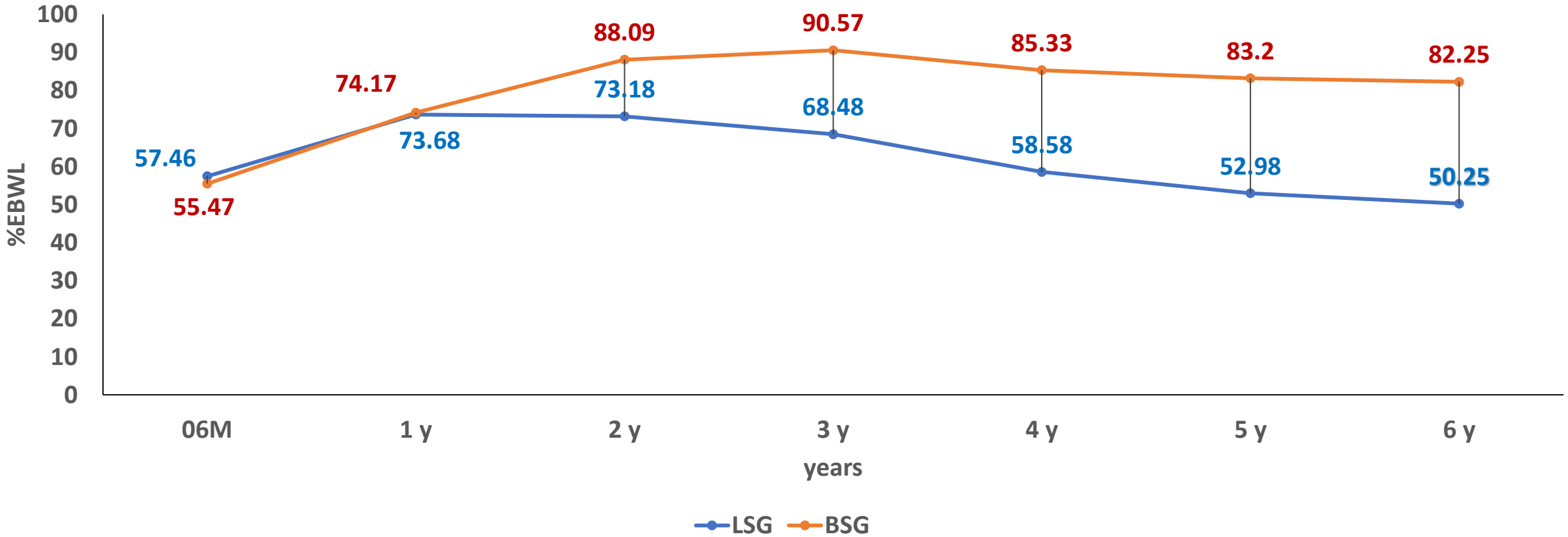
Fig. 3 Average sleeve pouch volume in ml in the LSG and BSG cohorts

Data of MOHAK

Procedure	Method	Number
Sleeve Gastrectomy (3138)	Laparoscopic	2189
	SILS	638
	Robotic	311
Banded Sleeve Gastrectomy (2147)	Laparoscopic	1752
	SILS	96
	Robotic	299



%EBWL



Revision operations LSG VS BSG

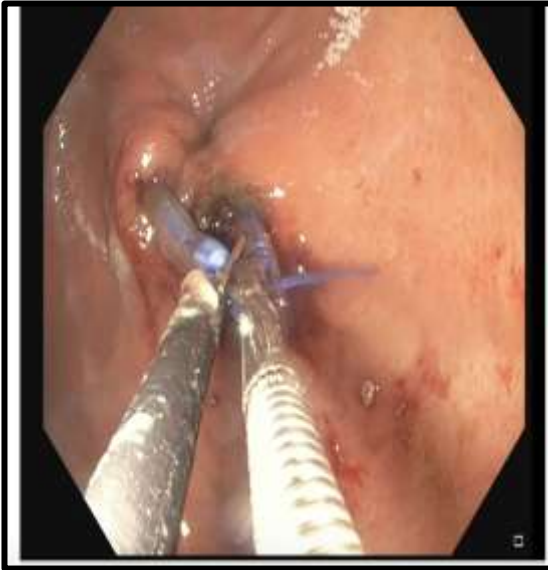
Incidence of revision is sevenfold after LSG as compared to BSG

	Female	Male	Av.Age	Av.HT	Av.WT	Av.BMI	Av. yrs. p/o	TOTAL
LSG	208	68	45.2	161.7	88.7KG	37.5	3.4	276/3138(8.7%)
BSG	21	7	43.1	161.5	72.5KG	28.0	1.2	28/2147(1.3%)

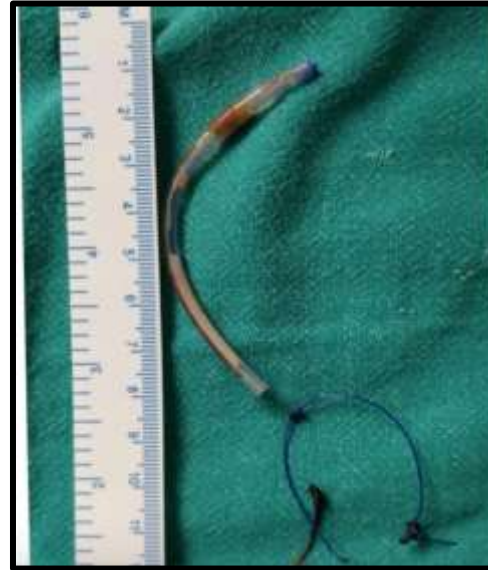
	Laparoscopic Re-Sleeve	Conversion to Gastric Bypass	Conversion to OAGB/MGB	Endoscopic pouch reduction	TOTAL
LSG	22	141	103	2	276

	Laparoscopic Band Removal and Conversion to RYGB	Diagnostic Lap + Band Removal	Endoscopic Band Removal using Endoscopic Scissor	Endoscopic Band Removal Using Argon	TOTAL
BSG	6	15	5	2	28

Endoscopic Removal of Band



**Endoscopic removal
of eroded ring after
BSG**

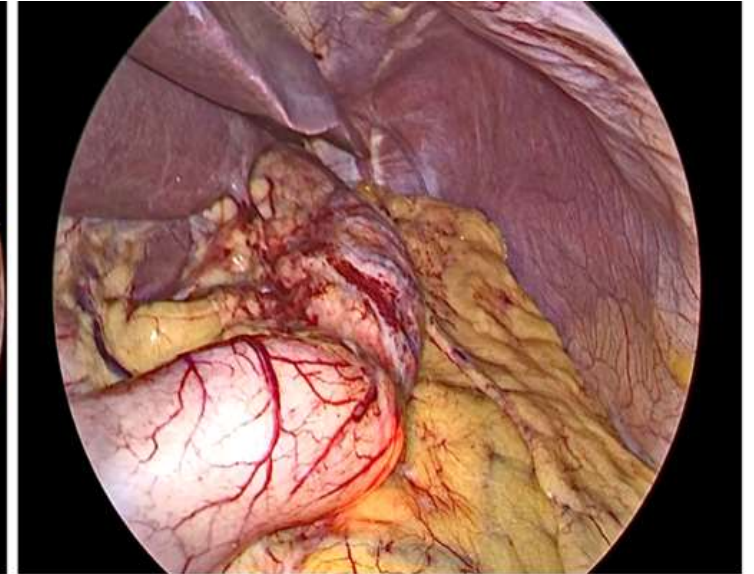
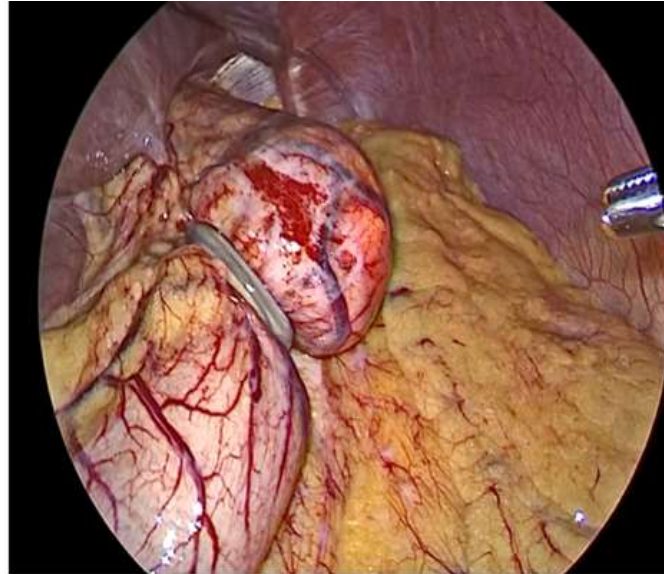


**Removed Ring
endoscopically after BSG**

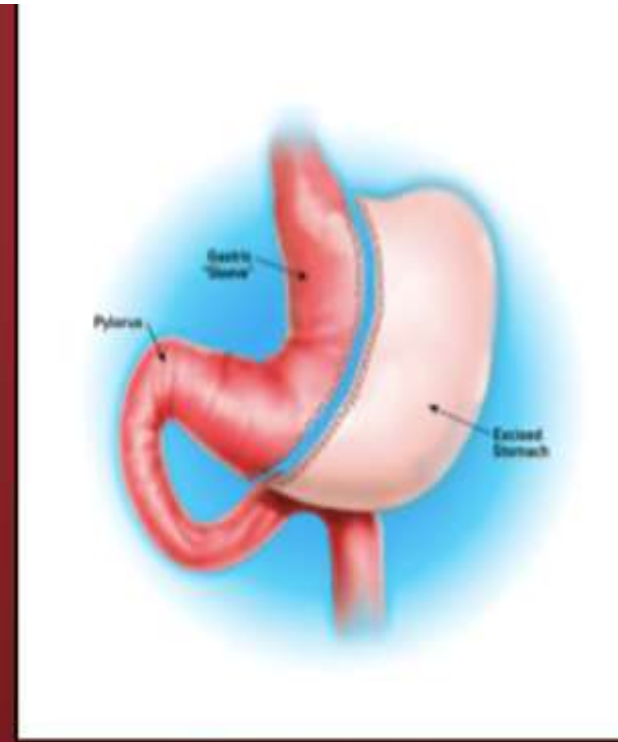


**Endoscopic
dilation after
band removal**

Ring slippage after
BSG : View after
laparoscopic band
removal



Conclusion



Sleeve Gastrectomy



Ring Banded Sleeve Gastrectomy

The banded sleeve decreases the incidence of revision surgery after the sleeve by many fold

Should All Sleeves be banded?

My irrevocable answer is Yes

Kelvin Higa performed a banded gastric bypass on me in 2011 for T2D and twelve years later I still feel the restrictive mechanism of the banded pouch.

BMI 32 to 26

Blood Glucose. <100

Hgb A-1c 9.6 to <6.4





MOHAK TEAM

THANK YOU

We offer various treatment modalities for obesity. The operation is determined by the profile of the patient and guided by findings from analysis of the data from our prospectively maintained database

