



One-anastomosis Gastric Bypass, is it better to measure biliopancreatic or common limb? Preliminary experience in patients with superobesity

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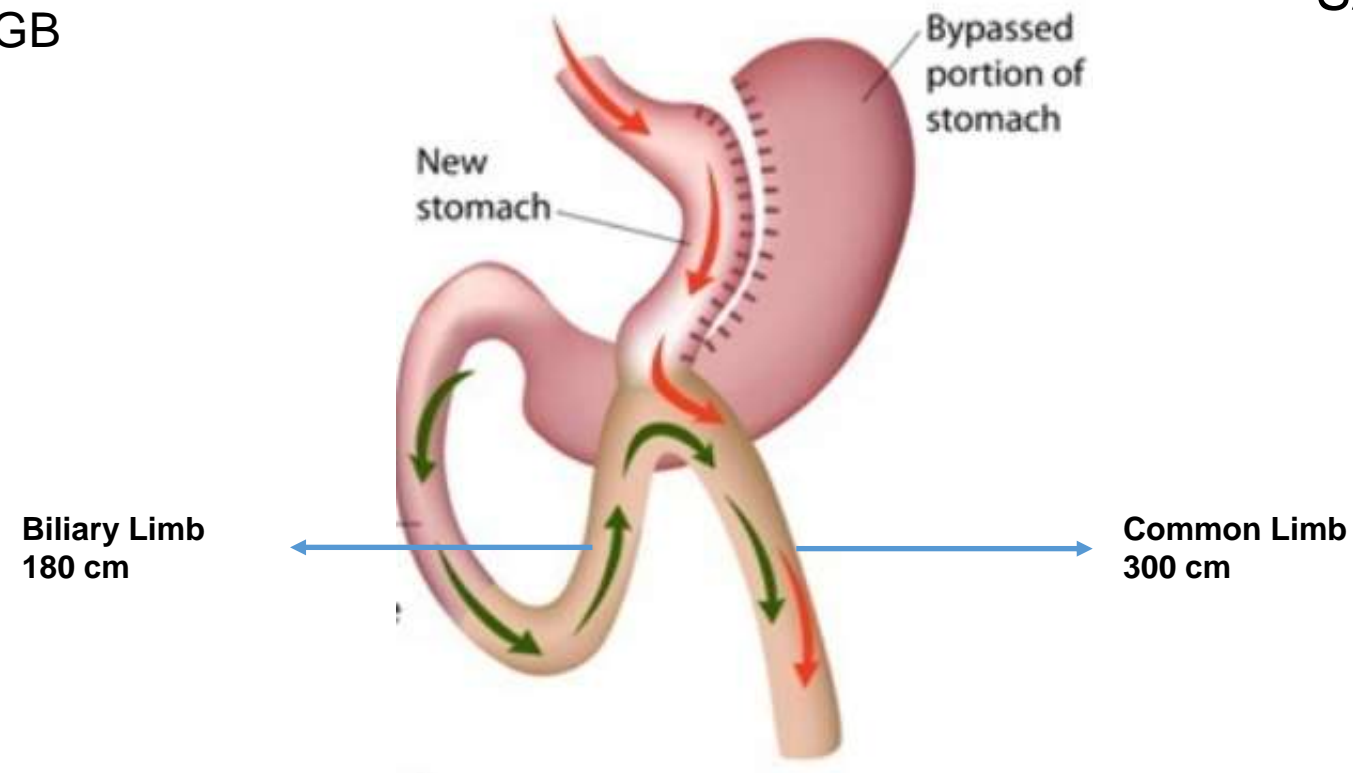
Cagliari



Same procedure, different measurement

OAGB

SAGI



Total small bowel length?



Why to perform SAGI than OAGB?

SAGI more safety than OAGB: «controlled» malabsorbiment for short small bowel

Same efficacy?



Patients with BMI>50kg/m were operated on from January 2022 to December 2022

SAGI (group 1)

OAGB (group2)

Perioperative complications, operative time, hospital stay and re-hospitalization

EWL%, EBML% TWL%, SFBari-score, nutritional complication at 6 month follow-up



31 (15%) superobese patient operated in one year (tot 198 patients)

SAGI (13 patients)

OAGB (18 patients)



Preoperative evaluation

	Tot	Gr1 (SAGI)	Gr2 (OAGB)	p-value
Sex (M)***	8/31 (25.8%)	3/13 (23.1%)	5/18 (27.8%)	0.7770
Age*	47.1+- 10.1	45.3 +- 8.5	48.4 +- 11.2	0.4043
Weight (Kg)*	147.1 +- 26.6	152.8 +- 31.4	143.2 +- 23.04	0.2798
Height (cm)*	161.7 +- 0.1	164 +- 0.1	159.9 +- 0.1	0.2392
BMI (kg/m^2)*	56.2 +- 6.7	56.7 +- 7.1	55.9 +-6.7	0.7594
DM**	7/31 (22.6%)	3/13 (23.1%)	4/18 (22.2%)	1
Hypertension**	15/31 (48.4%)	7/13 (53.9%)	8/18 (44.4%)	0.7
OSAS**	15/31 (48.4%)	6/13 (46.2%)	9/18 (50%)	1
Dislipidemia**	5/31 (16.1%)	3/13 (23.1%)	2/18 (11.1%)	0.6
Osteoarthritis**	16/31 (51.6%)	8/13 (61.5%)	8/18 (44.4%)	0.4
Esophagitis	1/31 (3.2%)	1/13 (7.7%)	0/18 (0%)	0.4
GERD**	5/31 (16.1%)	2/13 (15.4)	3/18 (16.7%)	1
Previous abdominal surgery**	5/31 (16.1%)	2/13 (15.4%)	3/18 (16.7%)	1
BED**	9/31 (20%)	5/13 (38.5%)	4/18 (22.2%)	0.4

No differences between two groups



Perioperative evaluation

	Tot	Gr1 (SAGI)	Gr2 (OAGB)	p-value
Operative time (min)	91.9 +- 26.9	93.1 +- 14.2	91.1 +- 33.6	0.8447
Hospital stay (days)	2.3	2,2 +- 0.9	2.4 +- 0.8	0.4641
ASA score	3	3	3	
Complications	2/31 (6.5%)	1/13 (7.7%)	1/18 (5.6%)	1
Bleedings	2/31 (6.5%)	1/13 (7.7%)	1/18 (5.6%)	1
Blood transfusions	1/31 (3.2%)	1/13 (7.7%)	0/18 (0%)	0.4
Dindo Clavien	2/31 (6.5%)	1/13 (7.7%)	1/18 (5.6%)	1

No differences between two groups



6-months follow-up

	Tot	Gr1 (SAGI)	Gr2 (OAGB)	p-value
Peso (Kg)	98.4 +-18 Kg	105.9 +- 18.1 Kg	93 +- 16.3 Kg	0.0459
TWL	49.2 +- 15 Kg	49.9 +- 16.6 Kg	50.3 +- 14.1 Kg	0.6636
EWL%	55%	49%	58%	0.0419
BMI a 6 mesi	37.4 +- 4.7 Kg/m^2	40.1 +- 5.5 Kg/m^2	36.1 +- 3.7 Kg/m^2	0.0669
eBMIL% a 6 mesi	60.3	54.3	63.6	0.0468
%TWL	33%	30%	34.9%	0.0668
SF-BARI-SCORE a 6 mesi	96.2	90.6	100.3	0.1300

Confronto statistico tra i due gruppi mediante test t di Student per dati non appaiati

	Tot	Gr1 (SAGI)	Gr2 (OAGB)	P-value
Anemia a 6 mesi	3/30 (10%)	2/13 (15.4%)	1/17 (5.9%)	0.56
Iposideremia a 6 mesi	2/30 (6.6%)	2/13 (15.4%)	0/17 (0%)	0.2
Ipoprotidemia a 6 mesi	1/30 (3.3%)	0/13 (0%)	1/17 (5.9%)	1.0
Vitamina D a 6 mesi	11/30 (36.6%)	9/13 (69.2%)	2/17 (11.8%)	0.002
Vitamina B12 a 6 mesi	1/30 (3.3%)	0/13 (0%)	1/17 (5.9%)	1.0
Acido Folico a 6 mesi	3/30 (10%)	2/13 (15.4%)	1/17 (5.9%)	0.55

Confronto statistico tra i due gruppi (1 e 2) mediante test del chi quadro

Weight loss more efficacy in OAGB than SAGI
Vitamine D deficicency more in SAGI than OAGB



Take Home Messages

- SAGI seems to be a safe procedure
- Because early follow-up efficacy could not be analyze
- It is interesting to underline that biliary limb seems to be more important to determinate weight loss
- If SAGI is more malabsorptive than OAGB: more malassorbiment is more weight loss????