

Single-anastomosis sleeve jejunal bypass (SASJ) shows a non-inferior result to one-anastomosis gastric bypass (OAGB) in two years



Yu-Hung Lin, Kaohsiung Chang Gung Memorial Hospital, Kaohsiung, Taiwan

Tien-Chou Soong¹, Wei-Jei Lee², Kong-Han Ser³, Ming-Hsien Lee⁴

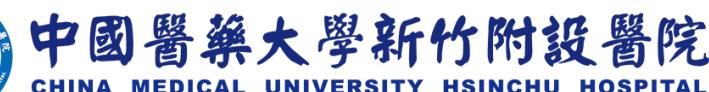
Taiwan SASJ Study Group

¹E-DA Dachang Hospital

²Medical Weight Loss Center, China Medical University Hsinchu Hospital

³Bariatric and Metabolic Surgery Center, Ten-Chan General Hospital

⁴Metabolic & Bariatric Surgical Department, Taichung Tzu Chi Hospital, BuddhistTzu Chi Medical Foundation

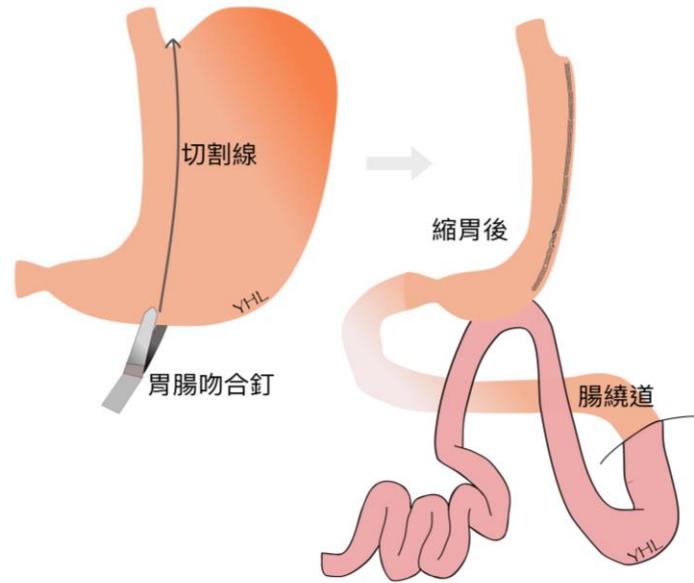


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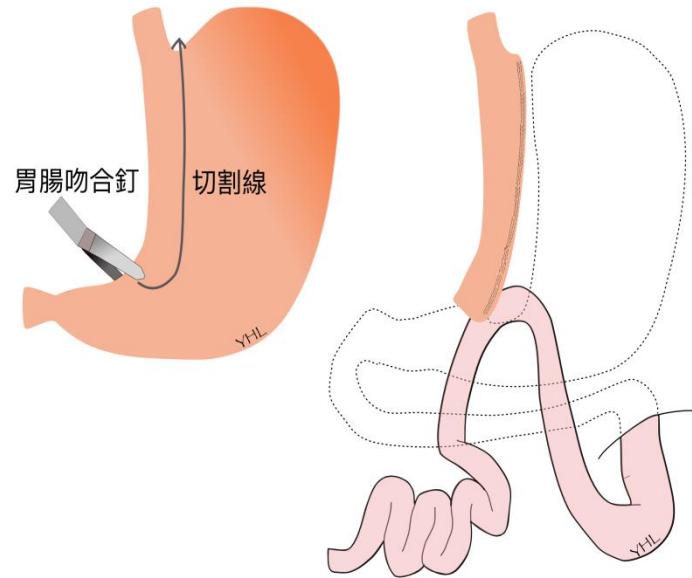
Melbourne 2024

SASJ vs OAGB: technical aspects



SASJ

- Minimal common limb: 350cm
- B-P limb: 40% total bowel length
- G-J opening: 3-4cm



OAGB

- Minimal common limb: 350cm
- B-P limb: 30% total bowel length
- G-J opening: 3 cm

Patient Characteristics

Enrolling time: Jan 2022~Dec 2023

Retrospective

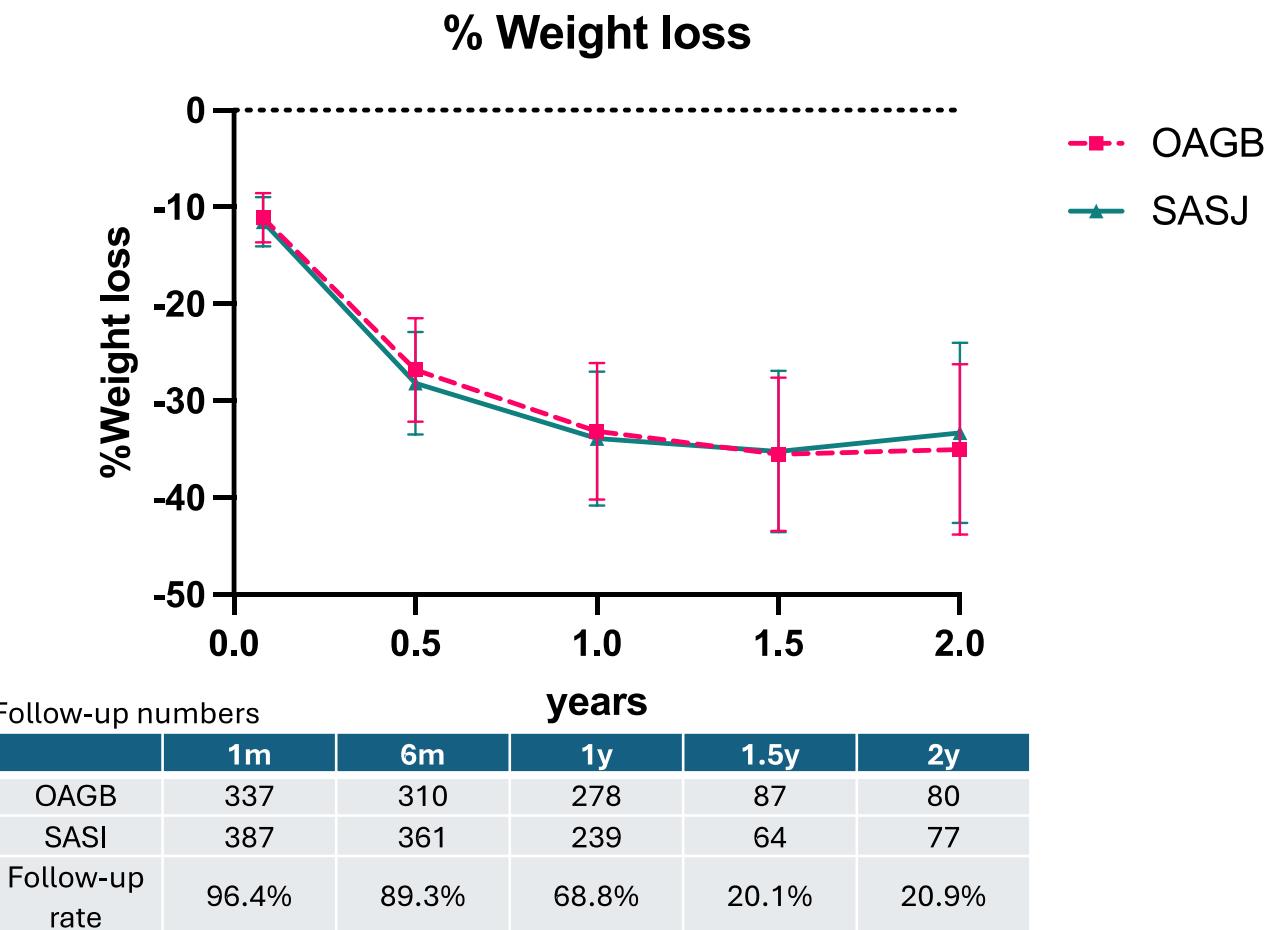
Non-randomized

Exclusion: BMI 32.5, revisional surgery

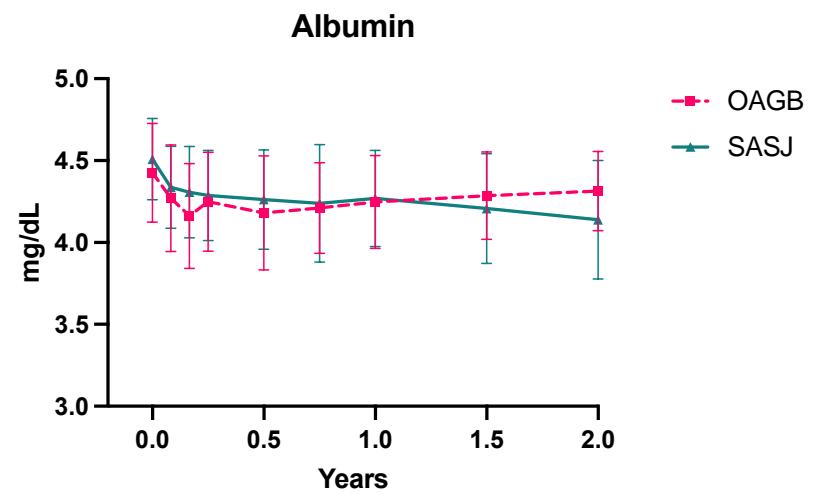
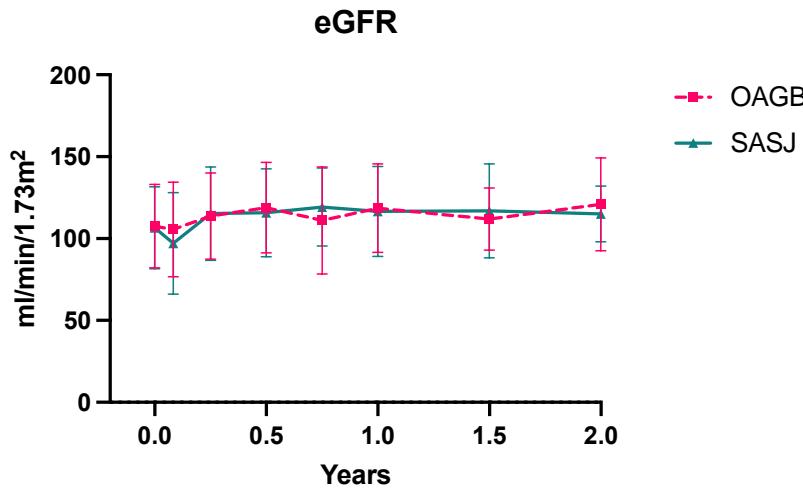
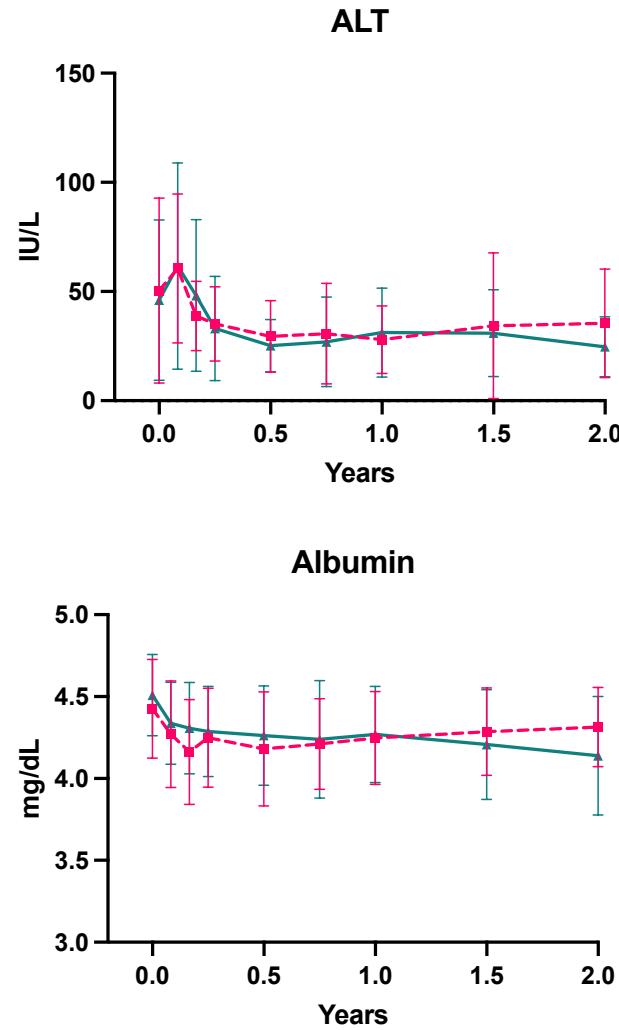
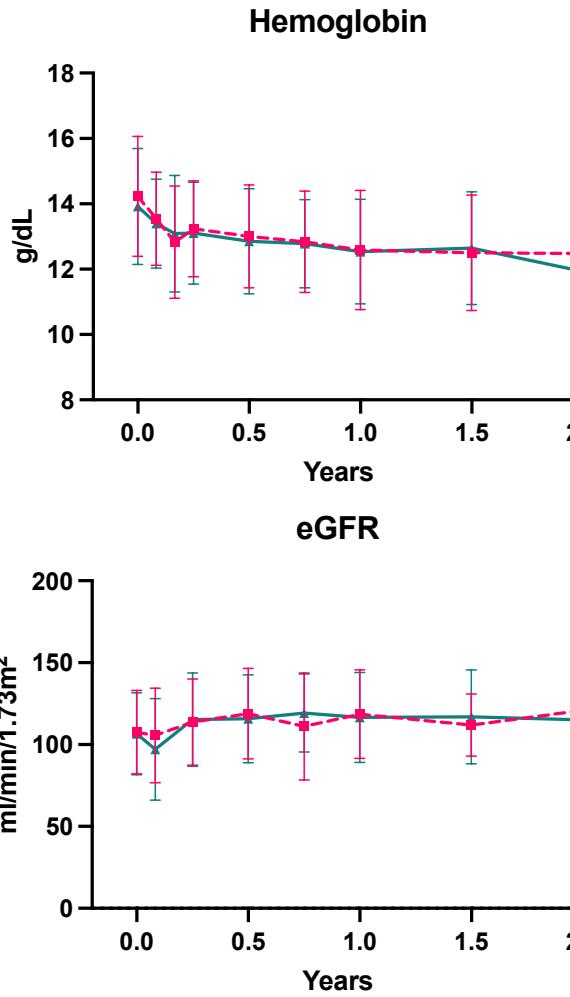
	OAGB	SASJ	p
Numbers	355	396	
Female	188(53%)	263(66.4%)	<0.001
Hypertension	133(37.8%)	135(34.9%)	0.444
Hyperlipidemia	134(38.2%)	113(29.3%)	0.012
T2DM	124(35.1%)	69(18.0%)	<0.001
OSA	33(9.3%)	37(9.6%)	1
re-admission	4 (1.1%)	5 (1.3)	1
re-operation	0 (0%)	2 (0.5%)	0.501
preop BMI	41.6+-7.0	38.9+-5.0	<0.001
total bowel length	707.7+-123.2	673.3+-110.9	<0.001
B-P limb	225.3+-59.4	270.4+-66.3	<0.001



Weight loss after surgery



SASJ and OAGB showed comparable results



No difference in glycemic and cholesterol control

