



ADJUSTABLE GASTRIC BAND CONVERSION TO LAP BYPASS.

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BACKGROUND: Adjustable Gastric band (AGB) is one of the effective surgical options to treat morbid obese patients. It's also the main bariatric procedure in some countries such Australia. Due to it's restrictive manner, some patients such as the sweet eaters could not loose enough weight. In our personal series of 1028 patients treated with AGB in a 4 years period, 133p (13%) had unsatisfactory weight loss. Among them 16 were converted to lap bypass without major complications. **AIM:** Demonstrate the technical steps of converting AGB to a lap Bypass. **Method:** The previous AGB porth incisions are used to access the abdominal cavity, the adhesions are taken down following the AGB catheter, the anterior fundoplication is opened until it reaches the his angle, the band is opened and removed, the dissection of the small curvature begins under the band location, then a grastroplasty is done, the transit is than reconstructed with an Roux-an-Y bypass with 1,5m of alimentary limb and 80cm of biliopancreatic limb with a calibrated end to side stapled gastrojejunostomy, a drain is usually left in place. **CONCLUSION:** Converting failed AGB to bypass is a very useful and safe tool to achieve success in bariatric surgery.