



LAPAROSCOPY CONVERSION OF AN SCOPINARO PROCEDURE IN TO A VERTICAL BANDED GASTROPLASTY BYPASS

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INTRODUCTION: Bilio Pancreatic Diversion (BPD) is a valid and approved operation to surgically treat morbid obese patients. A patient with a modified lap scopinaro operation was referred with troubles due to bad smell of her intestinal gases . In terms of weight loss the operation was working quit good but she desired a reversion without regaining weight. **AIM:** Demonstrate in video, the technical steps of laparoscopic conversion of an scopinaro procedure to a vertical Banded Gastroplasty (VBG). **CONTENT:** Gastric pouch and gastro-ileal anastomosis are dissected until its liberation from the mesocolic hole; VBG with linear staplers is performed; The transected stomach with the gastro-ileal anastomoses is passed to infra mesocolic space ; From the Treitz angle the biliopancreatic limb is measured without diving, the intestinal limb is guided to supramesocolic space (as a BII isoperistaltic limb) by the mesocolon hole; the gastrojejunostomy (G-J) is done with a linear stapler; the BII like limb is divided with stapler; The alimentary limb is mobilized 100cm and a enteroanastomosis with a linear stapler on the supra mesocolic space is performed; The enteroanastomosis and the alimentary limb are conduced to the inframesocolic space; The distal roux-and-Y of the scopinaro previous operating is identified ; the lateral anastomoses is transected within staplers to preserver an “ileal limb”; this “ileal limb” is mobilized until it reaches the new common channel that comes from the gastroplasty; those are submitted to a side-to-side anastomoses; the transected stomach with the gastro-ileal anastomoses is divided within staplers and removed trough one of the ports site;. **RESULTS;** Patient evolution was uneventfully, her problem was solved and she is keeping the weight. **CONCLUSION:** This approach to seems to be reasonable and safe for this particular cases and the technique described can be helpful in this king of lap revisional surgery