



## GASTRIC BAND CONVERSION TO SIMPLIFIED LAP BYPASS. A 42 CASES SERIES.

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**INTRODUCTION:** 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 its restrictive manner, some patients such as the sweet eaters could not loose enough weight and some of them will need a revisional surgery. Our option in those patients is to convert the AGB in a Simplified Lap Bypass. **CONTENT;** In a series of 1174 patients treated with AGB in a 5 years period, 152p (13%) had unsatisfactory weight loss. Among them 42 were converted to lap bypass. There was 32 (76%) females, the operative time varies between 105 to 198min (M = 125min).. **Operative technique:** 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 over an boogie is done, the transit is than reconstructed with an calibrated (11-12mm) end to side stapled gastrojejunostomy and a antecolic Roux-an-Y bypass on the supra mesocolic space with 1,5m of alimentary limb and 80cm of biliopancreatic limb. A drain is usually left in place. **RESULTS;** 4 (9,5%) patients had G-J stenosis treated with endoscopic balloon dilatation. No conversion, significant bleeding, leak or deaths happened in this series. **CONCLUSION:** Converting failed AGB to lap bypass is a very useful and safe tool to achieve success in revisional bariatric surgery.