



## BANDING THE GASTROPLASTY. 22 LAP REVISIONAL SURGERY FOR UNSACTISFATORY WEIGHT LOSS

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**INTRODUCTION;** The Gastric Bypass is one of the effective treatment of morbid obesity. Despite its effectiveness some patients may start gaining weight significantly after a while. In order to treat it our group offers to the patients the possibility of add a band on the gastroplasty in order to increase or return the restriction part of this operation.

**CONTENTS:** Dec-2001 to feb-04, 1992 were submitted to lap bypass being 1237 of them non-banded gastroplasties. Due to weight regain or unsatisfactory weight loss, 22 (1,7%) of them were submitted to a laparoscopic silicone band placement over the gastroplasty changing it in to a banded gastroplasty. Operative technique: 5 trocars; Gastrojejunostomy dissection; pars flacida approach similar to gastric band; silicone band placement behind the gastroplasty with goldfinger® 1cm above gastroplasty end; anterior closing of silicone band with Ethibond® 2-0 suture for a 6,2cm diameter over a 12mm boogie; test with methylene blue.

**RESULTS:** All revisional operations to band the gastroplasties were achieved by laparoscopy without conversions. No major complication or death occurred. 2 patients (9%) had bleeding on dissection controlled intra-operatively and no perforation happened Lap silicone band placement time varied between 35 to 90min (M=65min). No complications due to silicone band such as bleeding on dissection, band migration, slippage or intolerance due to vomiting happened. All patients were back on track of weight loss.

**CONCLUSIONS:** This revisional operation on gastric bypass is achievable by laparoscopy with minimum complication and good results of weight loss