



LAP BARIATRIC SURGERY- A TAILORED APPROACH IN A 2843 SINGLE CENTER PATIENT SERIES

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BACKGROUND: Lap bariatric surgery is quickly taking its place around the world with the benefits of minimally invasive surgery. The three main techniques done by lap are the Adjustable Gastric Band (AGB), Gastric Bypass (GBP) and the Bilio Pancreatic Diversion (BPD). To choose the best option to each patient our group tailored the surgical due to patient profile. **AIM:** Analyze the results and indication of each technique in this series. **CASUÍSTIC:** Between December of 1999 and July of 2004, 2843 patients) were submitted to lap bariatric procedures, being: 1111AGB (Mean 34,5y; 128Kg; 45,2BMI) 1107GPB (Mean 36,5y; 137Kg; 44,7BMI) plus 486 with Fobi-Capella Bypass - FCB (Mean 37,5y; 129Kg; 46,1BMI) and 139 had a BPD (Mean 40y; 162Kg; 49BMI) done. **RESULTS:** (see table). **CONCLUSION:** Comparing the numbers, goods results with low complications and mortality rates can be achieved with different Lap bariatric surgeries in a tailored approach

CASUISTIC	N	AGE (Y)	WEIGHT (M)	BMI. (M) INITIAL	OPERATIVE TIME
AGB	1111p	34,5y	128Kg	45,2 Kg/m ²	45min*
FCB	486p	37y	129Kg	46,1 Kg/m ²	98min
GBP	1107p	36,5y	137Kg	44,7Kg/m ²	70min**
BPD	139p	40y	162Kg*	49 Kg/m ^{2*}	160min

RESULTS	BMI (M) FINAL	UNSATISF WEITGHT LOSS	COMPLIC. (%)	RE-OP (%)	MORTALITY. (%)
AGB	30,1 Kg/m ²	13%*	5,5%	5,3%*	ZERO*
FCB	28 Kg/m ²	0,66%	6,7%	0,66%	0,33%
GBP	27,4 Kg/m ²	1,1%	7,7%	1,51%	0,43%
BPD	26,8 Kg/m ²	0,8%	10,2%	1,8%	1,6%

* p < 0,05