

Euro Gastro 2019: Comparison of Short -Term Outcomes between Multi- Port and Single-Port Sleeve Gastrectomy: A Prognostic Study - Athar Samir Mahmoud Alward - Cairo University, Egypt

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Background: Single-incision laparoscopic surgery has attracted a great deal of interest in the surgical community in recent years, including bariatric surgery. Literature is scarce about operative and clinical outcomes of single port sleeve gastrectomy compared to conventional laparoscopy. Single port sleeve gastrectomy (SPSG) has been proposed as an alternative to the multiport laparoscopic procedure; however, it has yet to meet wide acceptance and application.

Methods: This was a prospective non-randomized clinical study, that has been conducted for the first time in our institute, Kasr Al Ainy Hospital, to evaluate the feasibility and to assess the short-term outcomes for 18 months and complication rates of the single port sleeve gastrectomy (SPSG) versus the conventional multiport sleeve gastrectomy (MPSG). 40 patients underwent laparoscopic sleeve gastrectomy, 20 in each arm. Postoperative outcomes in terms of excess weight loss, resolution of comorbidities, complication rates, pain scores and cosmetic benefits were compared in both groups.

Results: 82.5% of our patients were females and 17.5% were males. The mean age was 34.95 ± 9.89 SD years for the MPSG group (group A) and 31.20 ± 8.78 SD years for SPSG group (group B). The mean body mass index (BMI) was 46.85 ± 6.18 SD kg/m² for group A and 44.30 ± 5.28 SD kg/m² for group B. Mean excess weight loss, resolution of comorbidities, length of hospital stay, complications were comparable in both groups. 2 patients required relaparoscopies, one in either group. There were no leakage nor mortalities in either group. Operating times were longer in SPSG group. 3 patients required the placement of additional ports. Patients in SPSG group had better wound satisfaction and less post-operative pain.

Conclusions: SPSG is a safe, effective and feasible surgical procedure for morbid obesity in selected individuals and comparable to the conventional laparoscopic technique in terms of outcomes. It has equally effective weight loss and resolution of comorbidities. It also has the added benefits of little or no visible scarring and reduced postoperative pain.