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GASTRIC SLEEVE RESECTION IN MEGA OBESE

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Aim: The aim of this study is to observe perioperative surgical treatment and experience with gastric sleeve resection (GSR) in patients with "body mass index" equal or higher than 70 kg $/m^2$ (BMI \geq 70 kg/m²) known as a "mega obese" (MO).

Methods: In 105 screened "super obese" patients with GSR, 4 MO patients (3.18%) with postoperative follow up from 3 to 108 months have been found during the period of 9 years.

Results: Preoperative mean BMI were 83 kg/m2. There were two patients with laparoscopic GSR and two with open due to insufficient pneumoperitoneum. Three patients preoperative were in stage 3 of Edmonton Obesity Staging System (EOSS) and one in stage 4. Three patients had excellent weight loss and resolution of comorbidities (from 3 to 108 months), while one patient with laparoscopic GSR during 15 months did not reach satisfactory result, furthermore second operation have been suggested.

Conclusion: GSR in MO patients could achieve good result both in short and in long term. Once prepared for procedure, on operative table, GSR procedure should be proceeding even in laparotomy needs. EOSS stage has been improved in all operated MO patients. Further studies will clarify role of GSR in MO patients.

Biography

Miroslav D llic has completed his PhD from University of Novi Sad in field of Hepato/Biliary/Pacreatic Surgery. He is the Director of Centre for Esophageal and Laparoscopic Surgery in Clinic for Thoracic Surgery, Institute for Lung Diseases in Sr. Kamenica. He is the founder of Alma Mons Course in Bariatric Surgery. He published 25 papers in literature as well as several books in Surgery.

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