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# MISHAPS AND THEIR TACTICAL MANAGEMENT ENCOUNTERED DURING MINI GASTRIC BYPASS- AN EXPERIENCE

**Shailesh Kumar, A S N Rao, Nikhil Gupta and Abu Masud Ansari**

Indra Prastha University, India

**Background:** Morbidly obese patients of BMI 47 planned for mini-gastric bypass

**Result:** After pneumoperitoneum and proper port placement, a window was made in the lesser curvature just proximal to incisura angularis. A stapler of 45mm was fired horizontal from the epigastric port. Then after securing proper haemostasis, second staplers of 60 mm were fired longitudinally to create the gastric tube, which inadvertently lead to the opening of stomach cavity anteriorly. It happened because of the wrongly insinuated thin posterior blade into the posterior stomach wall. This mishap was managed very tactically. Postoperative patients remain uneventful and doing well.

**Conclusion:** We should clear the posterior dissection nicely. Any resistance in insinuating the stapler should be handled with utmost care.

shaileshkdr@gmail.com