

## Re-sleeve Gastrectomy – An Efficient Revisional Bariatric Procedure - 3 Years Results

Simona Filip<sup>1</sup>, Ionut Hutopila<sup>1,2</sup>, Catalin Copaescu<sup>1,3</sup>

<sup>1</sup>Ponderas Academic Hospital Bucharest, Romania

<sup>2</sup>University of Medicine and Pharmacy “Titu Maiorescu”, Bucharest, Romania

<sup>3</sup>“Grigore T Popa” University of Medicine and Pharmacy, Iasi, Romania

### Abstract

**Background:** Laparoscopic gastric sleeve is a well-known bariatric procedure with good results on weight loss and remission of comorbidities. For patients with weight regain and a large sleeved stomach, the laparoscopic re-sleeve (re-LSG) can be considered a revisional option.

**Aim:** The objective of this study is to evaluate the results of laparoscopic re-sleeve as revisional procedure in patients with weight regain after gastric sleeve, in a Center of Excellence in Bariatric Surgery (BS-CoE).

**Method:** A retrospective evaluation of a prospectively maintained database identified 27 patients who underwent laparoscopic gastric re-sleeve after gastric sleeve from January 2013 - December 2016 in our BS-CoE. Patients were monitored in conformity with our standard bariatric program and the efficiency of re-sleeve in terms of weight loss and comorbidities outcome was evaluated at 6 months, 1 year and 3 years postoperative.

**Results:** Re-sleeve gastrectomy was performed by laparoscopic approach in all cases and 24 (89%) patients had concurrent surgical procedures, all of them hiatal hernia repair. No intra or post-operative complications were found except one case of gastric tube stenosis. Mean BMI before re-sleeve was 35.69 kg/m<sup>2</sup> (range 28,58-52) and follow-up results at 6 months after re-sleeve revealed mean BMI was 28.39 ± 5.32 kg/m<sup>2</sup> with EWL 83.88%, at 1 year mean BMI 27.23 ± 5.23 kg/m<sup>2</sup> with EWL 94.45% and at 3 years BMI 27.65 ± 5.13 kg/m<sup>2</sup> with EWL 85.41%. There are statistically significant differences (p < 0.01), between BMI before re-sleeve and BMI for all other moments of measurement 6 months, 1 year and 3 years after re-sleeve. All the 6 patients (22%) with comorbidities before re-sleeve had remission of their diseases at ne year postoperative, but 1 patient had recurrence of hypertension at 3 years postoperative.

**Conclusion:** Laparoscopic redo sleeve is an efficient revisional surgery option for weight regain after primary gastric sleeve with effective weight loss and improvement of comorbidities in a medium term follow-up.

**Key words:** bariatric surgery, revisional surgery, re-sleeve gastrectomy, weight regain