

IDabstract	73
Speaker	Pizza Francesco under40 <input type="checkbox"/>
ARGOMENTO	Redo-surgery
TITOLO DEL LAVORO	One Anastomosis Gastric Bypass after Sleeve Gastrectomy failure: One not fit for all
AUTORI	<p>Francesco Pizza¹ PhD Md, Dario D'Antonio¹ Md, Juan Antonio Carbonell Asíns², Francesco Saverio Lucido³ Md, Salvatore Tolone³ PhD Md, Ludovico Docimo³ PhD, Chiara Dell'Isola⁴ Md and Claudio Gambardella³ Md</p> <p>1 Department of Surgery, Hospital "A. Rizzoli", LaccoAmeno , Naples, Italy. 2 Biomedical Research Institute (INCLIVA). Bioinformatics and Biostatistics Unit. – Valencia, Spai 3 Division of General, Mininvasive and Bariatric Surgery, University of Campania "Luigi Vanvitelli", Naples Italy 4 AORN "dei Colli" Monaldi-Cotugno_CTO Department of Infectious Diseases - Hepatologic</p>
RELATORE	
INTRODUZIONE	<p>Considering the multitude of bariatric procedures performed all over the world, the necessity of revisional surgery increased in the same way. Some Authors argued that as a consequence of the great diffusion of Sleeve Gastrectomy (SG), the number of patients who have a Weight Regain at long follow-up is congruous and justified. Several studies showed that One Anastomosis Gastric Bypass (OAGB) was an effective and safe option also as a redo surgery.</p>
METODI	<p>This study is a retrospective analysis of prospectively collected data on 582 obese patients. The primary aim of the study was to evaluate %Excess Weight Loss, Body Mass Index (BMI) and remission of comorbidity at mid- and long-term follow-up after OAGB in subjects previously underwent SG. The secondary aim was to investigate the onset of esophagitis and gastritis at Upper Endoscopy (UE) and the presence of nutritional deficiencies in patients undergoing OAGB as redo surgery</p>
RISULTATI	<p>63 patients underwent OAGB as redo-surgery for Insufficient Weight Loss or significant Weight Regain. After a mean follow-up of 34.32±1.71 months the mean weight decreased to 71.25±10.22 kg, with a median BMI of 24.46±2.06 kg/m². At a mean follow up of 34.32±1.71 months after OAGB, D3 and B12 vitamin, Iron deficiency were recorded in 7 (11.9%), 4 (6.7%) and 7 (11.9%) subjects, respectively.</p>
DISCUSSIONE	<p>OAGB is a safe and effective bariatric procedure in terms of morbidity, mortality and %EWL also as revision surgery after SG. Further larger studies are needed to address this issue.</p>
BIBLIOGRAFIA	
Revisore	Non assegnato
Accettazione	Non ancora definito
Note	