Laparoscopic sleeve gastrectomy versus laparoscopic adjustable gastric banding – Perspective from rural Australia

Ya Chu May Tsai1, H M Tsai2, J Muir3, S Clifforth3 and W Ooi4
1St Vincent’s Hospital, Australia
2Monash University, Australia
3Western District Health Service, Australia
4University of Melbourne, Australia

Aim/Objective: Obesity affects over 60% of Australian population and bariatric surgery is increasingly used to address this issue. However, there is limited literature in the Australian rural context. Our objective was to compare outcomes of laparoscopic sleeve gastrectomy (LSG) and laparoscopic adjustable gastric banding (LAGB) performed in rural Australia.

Methods: Retrospective review of consecutive patients who underwent LAGB and LSG by a single surgeon at a rural hospital in Victoria, Australia were obtained from bariatric database. The main outcomes measured were major complications and weight loss over time, expressed as percentage of excess body weight loss (% EWL) and Body Mass Index loss (BML kg/m²).

Results: 140(58.1%) and 101 patients (41.9%) underwent LSG and LAGB respectively. No mortality was recorded. Three patients (2%) returned to theatre due to staple line leak post LSG. Only 1(1%) patient in the LABG required return to theatre for re-adjustment of band. Post op blood transfusion rates were 2% (3patients) and 1% (1patient) in the LSG and LABG group respectively. 7 other patients (5%) undergoing LSG encountered post op complications (6 patients at electasis, 1patient a trial fibrillation) compared to 1 patient in LABG group with pulmonary embolus. LSG group had a higher pre-operative BMI (45.05±6.84kg/m²) compared to LAGB group being 43.15±6.73kg/m² (p<0.05). LSG provided significantly greater (p<0.05) weight loss after 18 months (% EWL 68.75±13.05% and BML 11.73 ± 6.44 kg/m²) compared to LAGB (% EWL 46.15±23.85% and BML 8.13±5.44kg/m²)

Conclusions: Bariatric surgery can be performed safely in rural Australia with comparable results to international standards. LSG is more effective than LAGB in achieving weight loss.

Biography
Ya Chu May Tsai is currently a Doctor at St Vincent’s Hospital Melbourne Australia after completing her MBBS/B Med Science at the University of Melbourne in 2013. She has been involved in cardiovascular medicine research with Professor Andrew Wilson and has published in the International Journal of Cardiology. Her area of interests includes cardiology and peri-operative medicine. She is currently completing Postgraduate Certificate/Diploma in Clinical Ultrasound.

maytsai1990@gmail.com