

# 5<sup>th</sup> Asian Obesity Specialists & Endocrinologists Annual Meeting

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## Laparoscopic Roux-en-Y gastric bypass versus laparoscopic sleeve gastrectomy to treat morbid obesity-related comorbidities: A systematic review and meta-analysis

Jianfang Li

The First People's Hospital of Xiaoshan, China

Our aim was to compare laparoscopic Roux-en-Y gastric bypass (LRYGB) and laparoscopic sleeve gastrectomy (LSG) for treating morbid obesity and its related comorbidities. An electronic literature search was performed from inception to May 2015 and a total of 18,455 patients, enrolled in 62 recent studies, were included in this meta-analysis. Patients receiving LRYGB had a significantly higher percentage of excess weight loss and better resolution of hypertension, dyslipidemia, gastroesophageal reflux disease, and arthritis compared with those receiving LSG. LRYGB and LSG showed similar effects on type 2 diabetes mellitus and sleep apnea.

[ljfidd611@163.com](mailto:ljfidd611@163.com)

## Ophthalmic complications of bariatric surgery

Rui Azevedo Guerreiro

Hospital Espírito Santo, Portugal

Obesity is increasing vastly in the world and the number of bariatric surgeries being performed is also increasing. Patients being submitted to bariatric surgeries, especially malabsorptive procedures have an increased risk of developing nutrient deficiencies, which can culminate in symptomatic hypovitaminosis, if supplementation is not done correctly. The eye and the optic system need an adequate level of several vitamins and minerals to perform properly, especially vitamin A, and my presentation wants to cover the main nutrients involved, the possible ophthalmic complications that can arise by their deficiency, and the management of those complications.

[ruiazedoguerreiro@gmail.com](mailto:ruiazedoguerreiro@gmail.com)