Management of proximal gastric leak after laparoscopic sleeve gastrectomy by combined endoscopic and laparoscopic insertion of t-tube

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**Background:** Proximal gastric leak is the most dreaded complication of laparoscopic sleeve gastrectomy (LSG), having an incidence of 1-3%. Surgical management options for these leaks include drainage (open or laparoscopic), oversewing, stenting, endoscopic clipping and fibrin glue sealing. These procedures often take several weeks to heal and have a significant failure rate. Utilizing combined laparoscopic and endoscopic approach to convert the leak into a controlled fistula over a T-tube has not gained much popularity but appears to be an effective alternative in the management of proximal gastric leaks after LSG.

**Methods:** This is a case series of seven patients with proximal gastric leak after LSG managed with combined approach in our hospital between July 2013 and June 2017. The objective of the study is to evaluate the safety and efficacy of combined laparoscopic and endoscopic insertion of T-tube in the management of proximal gastric leak after LSG.

**Results:** Seven out of 628 patients had a proximal gastric leak after LSG (1.1%). Two patients (29%) were diagnosed with leak within seven days of surgery, four patients (57%) between seven and thirty days of surgery and one patient (14%) >30 days after surgery. Six patients (86%) had contrast extravasation on CT scan. Two patients (29%) needed additional unplanned radiological source control procedures. The mean (SD) duration of hospital stay was forty (24) days. There was no postoperative mortality. Five patients (71%) healed within two weeks of surgery. All patients showed complete recovery at a follow up of six months.

**Conclusion:** Combined laparoscopic and endoscopic insertion of T-tube for proximal gastric leaks following LSG is a safe procedure with minimum complications, acceptable hospital stays and healing rates approaching 100% at six months.

**Biography**
Md Tanveer Adil is a General Surgeon. His special interest is Bariatric Surgery and Academic Research. He completed his Surgical Residency from Medical College and Hospital, Kolkata, India and has been practicing as a General Surgeon since 2011. He has more than 10 publications under his name and has presented in many national and international conferences. He currently works in the Bariatric Unit of Luton and Dunstable university Hospital, United Kingdom. He completed his Masters degree (ChM) in General Surgery under the University of Edinburgh with distinction and will be awarded the “Thomas Annandale Medal” by the Royal College of Surgeons of Edinburgh for being the Top-Performing student. He is also a recipient of ASGBI bursary for his role in the surgical discussion boards. Md Tanveer Adil lives in Luton, England.

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