

Management of Barrett's Esophagus after vertical gastrectomy

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Abstract

There is a great controversy in the management of Barrett's esophagus (BE) after sleeve gastrectomy (SG). During last decade, some cases of esophageal adenocarcinoma after SG have been published and there is a serious concern about this issue. Many studies have pointed out that 30-40% of patients showed esophagitis 5 years after SG. However, there is discrepancy in the rate of BE after SG (5-18 %) and how to deal with. Some surgeons advocate for offering Roux-en-Y gastric bypass to all patients with BE after SG, with or without symptoms of gastroesophageal reflux. However, other surgeons believe that management of BE after SG should be tailored based upon patients characteristics: symptoms, age, weight, comorbidities. Close follow-up of BE patients with IBP therapy could be a reasonable option for asymptomatic patients with successful weight loss after SG.

Biography

He is working as the Associate professor in the subject of Surgery of the Degree in Human Nutrition and Dietetics at the Complutense University of Madrid. He worked as Professor of the subject "Surgical Pathology II" at the Fernando Pessoa University of Las Palmas de Gran Canaria from October 2004 to September 2005. He worked as an Associate Professor in the subject of Surgery and Morphology, Structure and Function of the Human Body at the Faculty of Dentistry of the Alfonso X el Sabio University from October 1998 to September 2003.



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