Letter to Editor Concerning the Article: Early Postoperative Progression to Solid Foods is Safe After Roux-en-Y Gastric Bypass Published as Obesity Surgery (2016) 26: 296-302

Masood Amini1, 2, Leila Vafa3, Seyedeh Leila Poorbaghi3 and Masood Sepehrimanesh4*

1Laparoscopy Research Center, Shiraz University of Medical Science, Shiraz, Iran
2Obesity Specialized Clinic, Ghadir Mother and Child Hospital, Shiraz University of Medical Sciences, Shiraz, Iran
3Health Policy Research Center, Shiraz University of Medical Science, Shiraz, Iran
4Gastroenterohepatology Research Center, Shiraz University of Medical Science, Shiraz, Iran

*Corresponding author: Masood Sepehrimanesh, Gastroenterohepatology Research Center, Shiraz University of Medical Science, Po.Box: 71935-1311; Shiraz, Iran; Tel: +98(71)36281442; E-mail: sepehrimaneshmasood@gmail.com

Received date: July 07, 2016; Accepted date: July 11, 2016; Published date: July 14, 2016

Copyright: © 2016 Amini M, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Letter to Editor

In the mentioned article, Theunissen et al., evaluated all 30-days complications, readmissions and reoperations of 936 patients who underwent a primary or redo laparoscopic Roux-en-Y gastric bypass (RGB). Finally, they concluded early progression to solid foods after RGB is safe due to lack of increasing any surgery complications [1]. Although their findings are interesting and applicable, but we have three criticisms about this study. First, the use of liquid or soft foods in such patients is an educational behavior in addition to possible intolerance of solid foods in the first few weeks. Therefore, patients must change their eating-style and advise to eat soft food to induce this change. Second, the authors expressed that patients must chew all solid foods 15-20 times per mouthful for enhanced recovery after bariatric surgery. Chewing the solid foods as time as they said is equal to eat liquid food. Their foods are chopped and mixed very well with saliva and must not consider as solid food. So using solid phrase cannot change the nature of swallowed foods. Third, the leakage complication is more important and common after laparoscopic sleeve gastrectomy (LSG) in comparison to RGB. Because the food outlet is approximately narrow in LSG but is wide enough in RGB, therefore this suggestion for using solid foods is more applicable after RGB not LSG.

Conflict of Interest

Author 1 declares that there are no conflicts of interests. Author 2 declares that there are no conflicts of interests. Author 3 declares that there are no conflicts of interests.

Informed Consent and Human and Animal Rights

This manuscript is just a letter to editor and no studies on animal or human subjects were performed.

Reference