

# INITIAL OUTCOMES FOLLOWING LAPAROSCOPIC SLEEVE GASTRECTOMY AS A SINGLE-STAGE PROCEDURE FOR MORBID OBESITY

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**Background:** Laparoscopic sleeve gastrectomy (LSG) is still considered a controversial operation when it is chosen as a single-stage procedure to treat patients suffering from morbid obesity. The present study evaluates our initial outcomes using this technique as a single surgical approach for morbid obesity.

**Methods:** We conducted a retrospective review of 229 consecutive patients undergoing a single-stage LSG from October 2006 to February 2009. The technique involved the use of linear staplers loaded with bovine pericardial strips and a 40Fr to 42Fr bougie.

**Results:** This study comprises 189 females and 40 males with a mean age of 42 years (range, 18 to 66), a mean body mass index (BMI) of 48kg/m<sup>2</sup> (range, 35 to 69), and a mean weight of 297lbs (range, 198 to 477). The mean follow-up was 7 months (range, 1 to 24). No conversions to laparotomy were necessary. The mean hospital stay was 1.7 days (range, 1 to 4). One patient developed a trocar site infection, 2 patients suffered from postoperative bleeding, 1 patient suffered from deep venous thrombosis, and 1 patient was diagnosed with pulmonary embolism. There were no gastric leaks or deaths in this study. The average percentage weight loss was 23% (n=176), 36% (n=130), 49% (n=87), 57% (n=37), and 60% (n=44) at 1, 3, 6, 9, and 12 months, respectively.

**Conclusions:** These data suggest that LSG is a safe and effective treatment that results in significant weight loss at 1 year when offered as a single-stage procedure.