

Evolution of newer procedures for increased safety and efficacy

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Even after 60 years of bariatric surgery, we still do not have any permanent or perfect solutions for long-term control of obesity. The dilemma still remains, whether to use the least invasive or non-invasive procedures and accept lesser gains or use complex procedures giving greater benefits, along with its accompanying disadvantages. With the gastric band getting abandoned in many centers (68% during its peak in 2008 to 10% in 2013), along with gradual reduction in usage of gastric bypass (52% in 2008 to 32% by 2014), the sleeve as a standalone procedure has garnered a greater following worldwide (0 to 37% of the world total from 2003 to 2013). Many studies and clinical practices have established that in the mid-term, many sleeve patients have regained weight with recurrence of some comorbidities. This led to a search for procedures more effective than the sleeve with much lesser side effects of the duodenal switch (<1.5 % of all bariatric procedures worldwide). Newer procedures like sleeve gastrectomy with transit bipartition or ileal interposition, mini-gastric bypass and gastric plication

are being increasingly used worldwide, especially in South America and Asia, with fewer centers in Europe and North America. These have simpler techniques and/or greater safety and efficacy. Sleeve with bipartition allows ileal stimulation with normal duodenal access; mini-gastric bypass is a technically simpler bypass with fewer complications but more malabsorption, while plication being modestly effective has the advantage of reversibility. Individualization of procedures would make these most effective.

Speaker Biography

Surendra Ugale is the Chief of Bariatric & Metabolic Surgery at Asian Bariatrics Hospital, India and Visiting Professor of Surgery at KLE University, India. He has been passionate about laparoscopic surgery since 1991 and helped in spreading it to many parts of India and abroad. His team is the 2nd in the world to start Laparoscopic Ileal Interposition for Type-2 Diabetes in 2008 and he has introduced a new scoring system, diabetes severity and remission score. His work is now especially focused on metabolic surgery for diabetes & obesity and he is a Proctor at national and international centers.

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