

Surgical treatment of Morbid Obesity with Vertical Banded Gastroplasty:A comparison between TA90-4.8 and TA90-B in morbid obesity

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摘要

Abstract

BACKGROUND: In this study, we wanted to determine the results of vertical banded gastroplasty for morbid obesity and compare the results of using the TA90-4.8 with using the TA90-B instrument. **METHODS:** Patients with body weight over 100% of or 45 kg above their ideal body weight, body mass index (BMI) over 40 kg/m², or BMI over 35 kg/m² with osteoarthritis, venous stasis, sleep apnoea, or frequent abortion were selected for surgical intervention. They were purposely divided into two groups. Vertical banded gastroplasty was performed in group A with two applications of TA90-4.8 (N = 26) and in group B with one application of TA90-B (N = 24). The outlet of the gastric pouch was 10 to 12 mm and reinforced with a 1.5 cm strip of Marlex to give a circumference of 5.5 cm. The follow-up body weight, BMI, and percentage of weight in excess of the ideal weight were compared between the two groups. The results were classified as excellent (0 to 25% excess weight), fair (26 to 50% excess weight), good (51 to 75% excess weight), poor (76 to 100% excess weight), and worse (> 100% excess weight). A failure was defined as a body weight of greater than 76% excess weight and a repeated operation being needed regardless of the ultimate outcome. **RESULTS:** There were no differences between the two groups regarding age, gender, preoperative body weight, BMI, and excess weight. The operative time was longer for group A (175 +/- 39 min) than for of group B (140 +/- 23 min) (p < 0.0001). In the follow-up period, the postoperative body weight, BMI, and excess weight showed no differences between the two groups. Four patients in group A had poor results, three due to staple disruption and one due to sweet-eating. One patient in group B had stenosis of the stomach pouch and needed another operation to release the stenosis. Thus, five failures (10%)

were found in this study. CONCLUSION: Vertical banded gastroplasty is an effective modality for treating morbid obesity. Two applications of TA90-4.8 are not recommended because they result in frequent staple disruption.