

# **Weight loss and improvement of obesity-related illness following laparoscopic adjustable gastric banding procedure for morbidly obese patients in Taiwan**

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摘要

## **Abstract**

### Background/Purpose

Laparoscopic adjustable gastric banding (LAGB) is a newly developed minimally invasive surgical procedure for the treatment of morbid obesity. This study was conducted to evaluate body weight loss, surgical complications, and comorbidities after LAGB surgery.

### Methods

Ninety-one morbidly obese patients (mean age, 31.2 years; mean preoperative weight, 120.8 kg) underwent LAGB in a private Taiwan hospital setting within a comprehensive multidisciplinary bariatric program. Patients were followed up to 36 months. Comorbidities were assessed in 55 patients who completed more than 12 months of follow-up by comparing each comorbid condition before surgery and during follow-up.

### Results

All procedures were performed laparoscopically with no conversion. Mean operation time was  $88.7 \pm 32.9$  minutes. There were no intraoperative or major postoperative complications. Minor complication of stoma stenosis occurred in three (3.3%) patients. At 36 months after surgery, mean body mass index had decreased from 42.7 to 33.9 kg/m<sup>2</sup>, and mean percentage of excess weight loss was 44.8%. Late complications were as follows: intractable vomiting requiring band removal in one (1.1%) patient, tubing problems requiring revision surgery in four (4.3%), and stoma obstruction in two (2.1%). There was no mortality. Resolution or improvement of comorbidities was significant for hyperglycemia

and diabetes-related index, dyslipidemia, abnormal liver function, hyperuricemia, sleep apnea, and arthralgia, but not for hypertension.

#### Conclusion

LAGB provides good weight loss and significant reduction in comorbidities with few minor complications