

## Early Resolution of Type 2 Diabetes Mellitus by Laparoscopic Ileal Transposition with Sleeve Gastrectomy Surgery in 23 to 35 BMI Patients

<sup>1</sup>Bombay Hospital <sup>2</sup>Center of Metabolic Surgery, Levioza Clinic, Pushpanjali Building, Santacruz(W), Mumbai, India

Ramen Goel<sup>1</sup>, Pravin Amin<sup>1</sup>, Madhu Goel<sup>2</sup>, Sanjeet Marik<sup>1</sup>

**Introduction:** Diabetes is considered a life style disease. 56% diabetic patients with BMI greater than 7 are at high risk of diabetes related complications. Bariatric surgery results in diabetes resolution in over 84% patients. Based on hindgut hypothesis suggesting role of incretins like GLP-1, early trials of ileal interposition surgery have displayed consistent HbA1c levels below 7 in over 80% patients with over 30 kg/m<sup>2</sup> BMI. In developing countries majority of T2DM patients are not morbidly obese and surgical procedures are to be evaluated for their efficacy in this group. In this study we have assessed the efficacy of ileal transposition with sleeve gastrectomy (SGIT) in 23 to 35 BMI T2DM patients. **Method:** After institutional ethical committee approval & Indian Council of Medical Research registration (CTRI/2008/091/00206), selected T2DM patients [HbA1c over 7, C Peptide more than 1] underwent Lap SGIT by a single surgeon. Data of first five patients with minimum 6 months follow up was analyzed for glycemic control, reduction/ discontinuation of diabetes medication. **Results:** The study target (HbA1c less than 7) was achieved in 60 % patients within 1 month , and in 100% patients within 6 months. Requirement of medicines reduced significantly within 6 months and their HbA1c levels reduced from 9.65% to 6.22%. **Conclusion:** Laparoscopic SGIT represents a new paradigm, for the treatment of T2DM even in non morbidly obese patients. **Conflict of Interest:** None. **Funding:** Research related to this study was funded by Bombay Hospital trust, Mumbai, India.