

Laparoscopic sleeve gastrectomy in Japan

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In Japan, laparoscopic bariatric surgery was introduced in 2000, and laparoscopic sleeve gastrectomy (LSG) has been performed since 2005. Since gastric cancer is a frequently-occurred disease in Japan and the excluded distal stomach after laparoscopic Roux-en-Y gastric bypass (LRYGB) cannot be checked by usual endoscopy, LRYGB is probably not so suitable for Japanese patients. Therefore, a number of LSG is rapidly increasing. Japan Research Society for Endoscopic and Laparoscopic Treatments of Obesity (JELTO) which was organized 5 years ago carried out a nationwide survey on laparoscopic bariatric surgery in 2010. From 2000 to 2009, total 340 laparoscopic bariatric operations were performed by 9 Japanese institutes, and 102 of the operations (30%) were LSG. In 2009, 70 morbidly obese patients underwent laparoscopic bariatric surgery, and 50 of the 70 patients (71%) did LSG. There was no mortality and the postoperative complication rate was 7.8% in the 102 cases. Major complications were staple-line leakage in 4 cases (3.9%) and intra-abdominal bleeding (reoperation required) in 3 (2.9%). Percent excess weight loss after LSG was 66% at 12 months and 68 % at 24 months, respectively. According to the weight loss, 91% of patients with type 2 diabetes achieved remission, hypertension were resolved in 62% of patients, and dyslipidemia were resolved in 53%. This survey showed the safety and effectiveness of LSG in Japanese morbidly obese patients. In addition, LSG has been approved as a special advanced technique in some Japanese institutes by the Ministry of Health, Labour and Welfare since this year, which is partly covered by the government health insurance. Now, LSG has been rapidly spread in Japan and will play an important role in treatments for morbid obesity.