

Complications after laparoscopic sleeve gastrectomy for morbid obesity

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Background: Laparoscopic sleeve gastrectomy (LSG) is a quick and relatively simple type of bariatric surgery which shows good resolution of co-morbidities and good weight loss. We report on complications after LSG as a single-stage bariatric surgery and the results of a survey on LSGs conducted by the Japan Research Society for Endoscopic and Laparoscopic Treatments of Obesity.

Methods: Data were collected on all patients undergoing bariatric surgery between January 2005 and December 2009, which included 340 patients from nine hospitals in Japan. We evaluated short-term morbidity in 102 patients undergoing LSG and excluded patients undergoing LSG with duodenojejunal bypass.

Results: A total of 102 LSGs were successfully performed without conversions to an open surgery. In 2004, there were no LSGs reported. In 2009, the most commonly-performed procedures were LSG (50 patients), laparoscopic gastric bypass (8), LSG with duodenojejunal bypass (8), and laparoscopic adjustable gastric banding (4). Approximately 8% of patients had perioperative complications. The most common complications were staple line leaks (4%). Reoperation occurred in seven patients (7%), four with bleedings and three with staple line leaks. No mortalities occurred. In our eight LSG patients, late gastric leak occurred in one patient; and it was treated with an endoscopic mucosal closure after failed attempts to treat the percutaneous abdominal drainage.

Conclusion: The frequency of serious complications among patients undergoing LSG was relatively low. It is a safe single-stage bariatric surgery for Japanese morbid obesity.

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