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Helicobacter pylori in patients undergoing laparoscopic sleeve gastrectomy. Should we really care?

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Background: Obesity is a significant public health priority of the 21st century. Laparoscopic sleeve gastrectomy (LSG) is an effective weight loss strategy for obese patients and is currently the most common type of weight loss procedure in Australia.1 However, the impact of *Helicobacter Pylori* (*H. pylori*) infection on post-operative surgical complications is relatively unknown.

Aims: The aim of this systematic review is to determine whether histological diagnosis of *H. pylori* during examination of excised gastric specimens is associated with post-operative complications including leakage and bleeding in patients undergoing LSG.

Methodology: A search was conducted from inception to mid-January 2019 using electronic databases; PubMed, Medline, Embase and Cochrane library, to identify all studies evaluating the association between *H. pylori* confirmed on histological examination of excised gastric specimens following LSG and post- operative complications including leakage and bleeding. A systematic review was conducted in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) guidelines.

Results: A total of 73 articles were identified through a database search. These articles were screened by title and abstract followed by appraising selected full texted articles for eligibility, which identified the studies for inclusion in the systematic review.

Conclusion: The findings of this systematic review indicate that the presence of *H. pylori* is not associated with post-operative leakage or bleeding following LSG for the management of obesity. Further research, ideally involving studies with a larger sample size is required to support these findings.

References

Australian Institute of Health and Welfare 2017. Weight loss surgery in Australia 2014–15: Australian hospital statistics. Cat. no. HSE 186. Canberra: AIHW.

Biography

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