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Management of leak post sleeve gastrectomy

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Background: The most serious and life-threatening complication after Laparoscopic sleeve gastrectomy (LSG) is the post-operative leak. The purpose of this paper is to discuss the treatment options adopted in our center to treat this serious complication.

Methods: A retrospective analysis was performed for patients with confirmed leak on gastrografen swallow, CT and/or EGD between January 2009 and July 2012 and the treatment plan was reviewed and analyzed to evaluate the role of stenting in the management of this dreadful complication. Eighteen patients was identified with leak post sleeve gastrectomy, both from our center and referred from other hospital. Our policy in management of leak includes CT guided drainage of the collection, TPN, NPO, EGD and stenting.

Results: All eighteen patients with Staple line leaks were treated using the same management plan. All the leaks happened between day 10 & day 21 post-operative, the most common leak location was at the gastro-esophageal junction (seventeen cases 94.4%). 2 patients were taken for laparoscopic drainage due to multiple abscesses 11%. Stenting and non-operative management (total parenteral nutrition, proton pump inhibitor, and antibiotics) was adopted in all cases. Percutaneous abdominal drainage was placed in all patients. Sixteen out of the eighteen patients improved totally with this method and the leak healed completely 88.8%, and two patients didn't benefit from the stent 11.2 % and developed chronic gastric fistula.

Conclusion: Non-operative management (percutaneous drainage with stent) is feasible, safe, and effective in treatment of staple line leaks after LSG; although the number of patients in our paper is low, the healing with the use of the stent was 88.8%, furthermore, it was seen that stenting is a much better alternative to other surgical procedures such as total gastrectomy or conversion to RYGB.

Biography

Moh'd Yasser Kayyal is a Consultant Laparoscopic & Bariatric Surgeon at MIS & Bariatric Surgery Division in the Department of Surgery, Tawam Hospital Al ain, Abu Dhabi, UAE. He is the Vice-President and co-founder of the American College of Surgeons ACS UAE Chapter, Vice president of EOMSIG: Emirates Obesity & Metabolic Surgery Interest group, Co-Founder and Board member of GOSS: Gulf Obesity & Metabolic Surgery Society and Instructor and trainer SSI and CTSC: Laparoscopic and Bariatric surgery. He is also Board Member of IBC: International Bariatric Club and MMESA: Mediterranean and Middle East Endo-laparoscopic Surgery Association. He is the Co-Chairman of the Organizing Committee of Gulf Obesity & Metabolic Surgery Society: GOSS, Fellow of the American College of Surgeons and ATLS Instructor. He is a member of IFSO, ASMBS, Emirates Society for Lapro-Endoscopic surgeons: ESLES, SAGES and EAES.

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