



Revision with Totally Hand-Sewn Gastrojejunostomy and Vagotomy for Refractory Marginal Ulcer after Laparoscopic Roux-en-Y Gastric Bypass

Po-Chih Chang^{1,2,3,4} · Chih-Kun Huang^{1,2} · Mahendra Rajan¹ · Ming-Che Hsin^{1,2}

Published online: 21 March 2016
© Springer Science+Business Media New York 2016

Abstract

Background Marginal ulcer is not infrequent after laparoscopic Roux-en-Y gastric bypass and could result in undesirable complications, such as intractability, bleeding, or perforation. Those patients who failed medical therapy, regarded as refractory marginal ulcers, may be considered as candidates for revisional surgery. Herein, we make a video presentation of a laparoscopic revisional procedure for refractory marginal ulcer.

Methods A 29-year-old morbidly obese woman (initial body mass index 37.1 kg/m²), a non-smoker, presented with persistent epigastric pain 3 months after initial laparoscopic Roux-en-Y gastric bypass at another institution. After an exhaustive work-up there, only the gastroendoscopy revealed a marginal ulcer and she underwent medical treatment (proton pump inhibitor and sucralfate) for 3 months, but the patient's symptom aggravated and the serial gastroendoscopies still confirmed the marginal ulcer without obvious resolution after a

total of 4 months proton pump inhibitor therapy, suggesting failure of medical treatment and intractability. Laparoscopic revisional procedure with totally hand-sewn gastrojejunostomy and vagotomy was performed to relieve her intractable condition.

Results The procedure took 130 min, without any intraoperative complications. Blood loss was 80 mL. The patient had an uneventful postoperative course, and the postoperative hospital stay was 3 days. She was relieved of her symptoms after this revisional surgery, and a subsequent gastroendoscopy 15 months later showed no marginal ulcers.

Conclusions Though long-term follow-up is needed to draw a definite conclusion, totally hand-sewn gastrojejunostomy and vagotomy remains a practicable revisional procedure to relieve refractory marginal ulcers.

Keywords Laparoscopic Roux-en-Y gastric bypass · Marginal ulcer · Total hand-sewn gastrojejunostomy · Revisional surgery · Vagotomy

Electronic supplementary material The online version of this article (doi:10.1007/s11695-016-2129-9) contains supplementary material, which is available to authorized users.

✉ Po-Chih Chang
dr.changpochih@hotmail.com

Compliance with Ethical Standards

Conflict of Interest The authors declare that they have no competing interests.

Funding There is no external source of funding.

Statement of Informed Consent Informed consent was obtained from all individual participants included in the study.

Statement of Human and Animal Rights All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

- ¹ Bariatric and Metabolic International Surgery Center, E-Da hospital/ I-Shou University, Kaohsiung City, Taiwan
- ² Division of General Surgery, Department of Surgery, E-Da hospital/ I-Shou University, Kaohsiung City, Taiwan
- ³ Department of Sports Medicine, Kaohsiung Medical University, Kaohsiung City, Taiwan
- ⁴ No. 1, Yi-Da Road, Jiao-Su Village, Yan-Chao District, Kaohsiung City 824, Taiwan