Response to a Letter to the Editor Re: Detecting Bile Reflux—the Enigma of Bariatric Surgery

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To the Editor:

We thank Dr Kassir et al. for their knowledgeable comments and interest in our review article. The primary objective of our article was to review techniques currently available for investigating bile reflux, to guide clinicians wishing to evaluate pre- or post-operative symptomatic patients. Recommendations of systematic pre-bariatric surgery investigations were outside of the scope of the article; however, we agree that surgeons should observe common practices of pre-operative work-up, by undertaking endoscopy and other oesophageal function tests as clinically indicated.

Ambulatory pH testing is an effective method of measuring acid reflux, however offers no insight into the presence of bile in the refluxate. Unfortunately, as identified in our review, there is little or no systematic approach to measuring bile reflux after bariatric surgery. A HIDA scan is relatively easy to perform in patients who have undergone any type of bariatric procedure, to document the presence or absence of bile reflux.

We also like to thank the authors of this letter for identifying surgical techniques that may reduce the incidence of bile reflux. With the single-anastomosis gastric bypass (SAGB) procedure gaining popularity, surgeons must consider the

potential risk of bile reflux in their selection of surgical technique. When surveyed, surgeons who do not perform the SAGB voiced concern regarding the risk of bile reflux and the risk of gastric and oesophageal cancers [1].

Studies evaluating bile reflux after bariatric surgery are lacking and there is a need for quantitative data in this cohort.

Author Contributions TAE wrote the response, JM edited the response, and JS and GKK read and approved the final submission.

Compliance with Ethical Standards

Conflict of Interest Thomas A Eldredge, George K Kiroff, and Jonathan Shenfine have no conflicts of interest, financial or otherwise, to declare. Jennifer C Myers provides educational activities for Medtronic Australasia.

Ethical Approval This article does not contain any studies with human participants or animals performed by any of the authors.

Informed Consent Does not apply to this study.

Reference

1. Mahawar KK, Borg C, Kular KS, et al. Understanding objections to one anastomosis (Mini) gastric bypass: a survey of 417 surgeons not performing this procedure. *Obes Surg*. 2017;27(9):2222–8.

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