VIDEO SUBMISSION

Laparoscopic Conversion of a Vertical Banded Gastroplasty to a Sleeve Gastrectomy in a Morbidly Obese Patient with a Complicated Medical History

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Abstract

Purpose We present our technique for performing a laparoscopic conversion of vertical banded gastroplasty (VBG) to sleeve gastrectomy (SG) in a morbidly obese patient.

Materials and Methods A 58-year-old female with history of hypertension, diabetes, and morbid obesity (BMI 41). She had initially undergone an open VBG (BMI 58) and cholecystectomy (2002) and subsequently underwent two laparotomies for small bowel obstructions and two open ventral hernia repairs. She initially presented for repair of her large ventral hernia; however, to minimize the risk of recurrence and complications during the abdominal wall reconstruction, she was referred first for surgical weight loss and scheduled for laparoscopic conversion of VBG to gastric bypass.

Results Initial access was obtained using an Optiview trocar and significant amount of adhesions were noted to the omentum, abdominal wall, stomach, and liver, including dense interloop adhesions precluding us from proceeding with a gastric bypass, our initial choice for conversion. Adhesions were taken down with a LigaSure device and sharp dissection. The previous vertical staple line was identified endoscopically. The banded area was narrowed, but intact, so the Marlex ring was divided to allow space for the new SG staple line. Stapler firings were oriented to divide the stomach parallel to the lesser curve and through the middle of the prior EEA opening, then up towards the Angle of His. Using Endo Stitch, the entire staple line was oversewn in a Lember fashion. There was no evidence of narrowing on repeat endoscopy and leak test was negative.

Conclusions This video demonstrates the feasibility and safety of one-step laparoscopic conversion of vertical banded gastroplasty to sleeve gastrectomy.

Keywords Sleeve gastrectomy · Vertical banded gastroplasty · Obesity

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Compliance with Ethical Standards

Conflict of Interest The authors declare that they have no conflicts of interest.

Ethical Approval Studies with human participants: “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.”

Informed Consent Does not apply.