



Case series of bariatric surgeries in Kuwait

Alsharaf K, Alyatama K, Mohammad A, Al ben ali S, Alanzi S, Alshnfari S, Alothman A

Mubarak AlKabeer Hospital, Kuwait



Introduction

The State of Kuwait has one of the highest prevalence of overweight and obese individuals worldwide (1). Bariatric surgery offers successful long-term weight loss in obese patients (2). Gastric banding remains one of the performed bariatric procedures worldwide with the least morbidity and mortality rates (3). Yet, the proportion of patients undergoing gastric banding has decreased in comparison to other bariatric procedures (4).

Objectives

- To assess the 2-year percentage of excess weight loss (EWL %) and BMI difference in patients who underwent gastric banding
- To compare the percentage of excess weight loss (EWL) and BMI difference between patients with a BMI below or equal to 35 and patients with a BMI more than 35
- To assess the effect and correlation between regular follow up after gastric banding and EWL % and difference in BMI

Methods

- A retrospective review was carried out on all patients who had gastric banding done between January 2012 and December 2017.
- We assessed patients' demographics, preoperative BMI, gastric band type (LAGB vs SAGB), average percentage of excess weight loss over the 2 year period.
- The data was tabulated and analysed.

Results

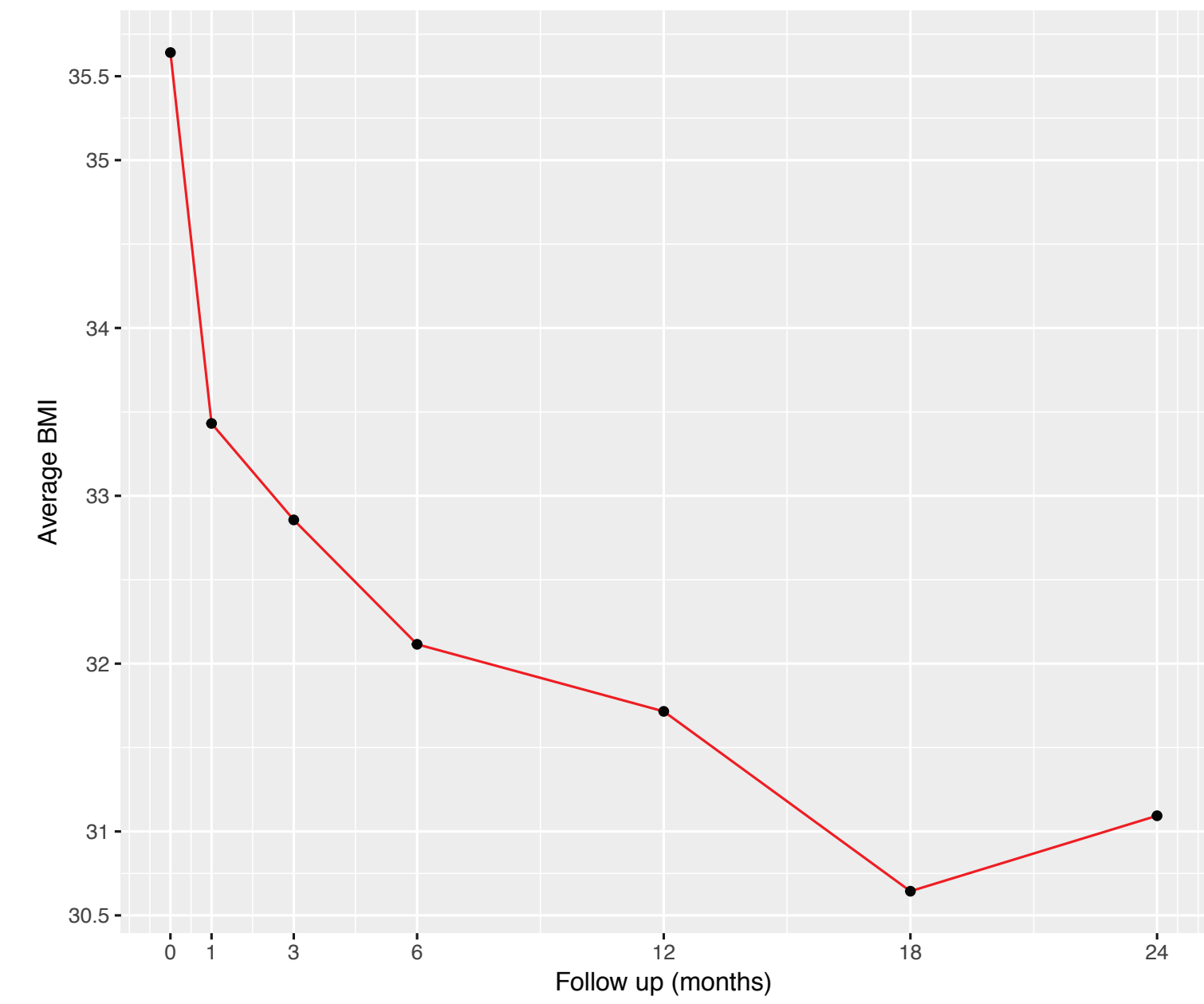
	Mean (sd)	Range
Weight	90.79 (12.4) kg	69-132 kg
Height	159.6 (6.1) cm	142-187 cm
Age	31.1 (8.6) years	13-60 years
BMI	35.6 (4.5)	28.1 -53.6

Band Type	
LAGB	12%
SAGB	88%

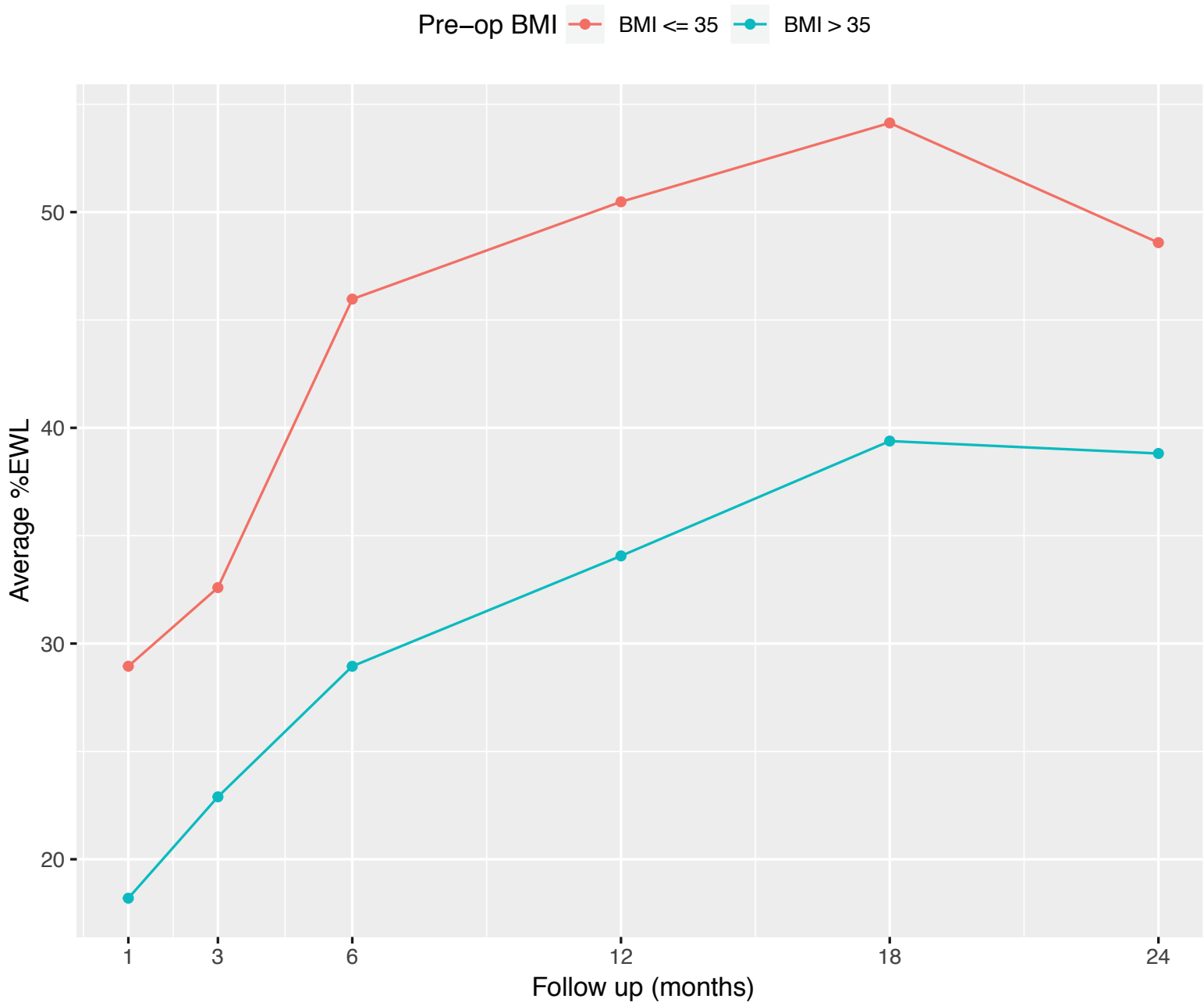
Sample Size (n)	313
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Results

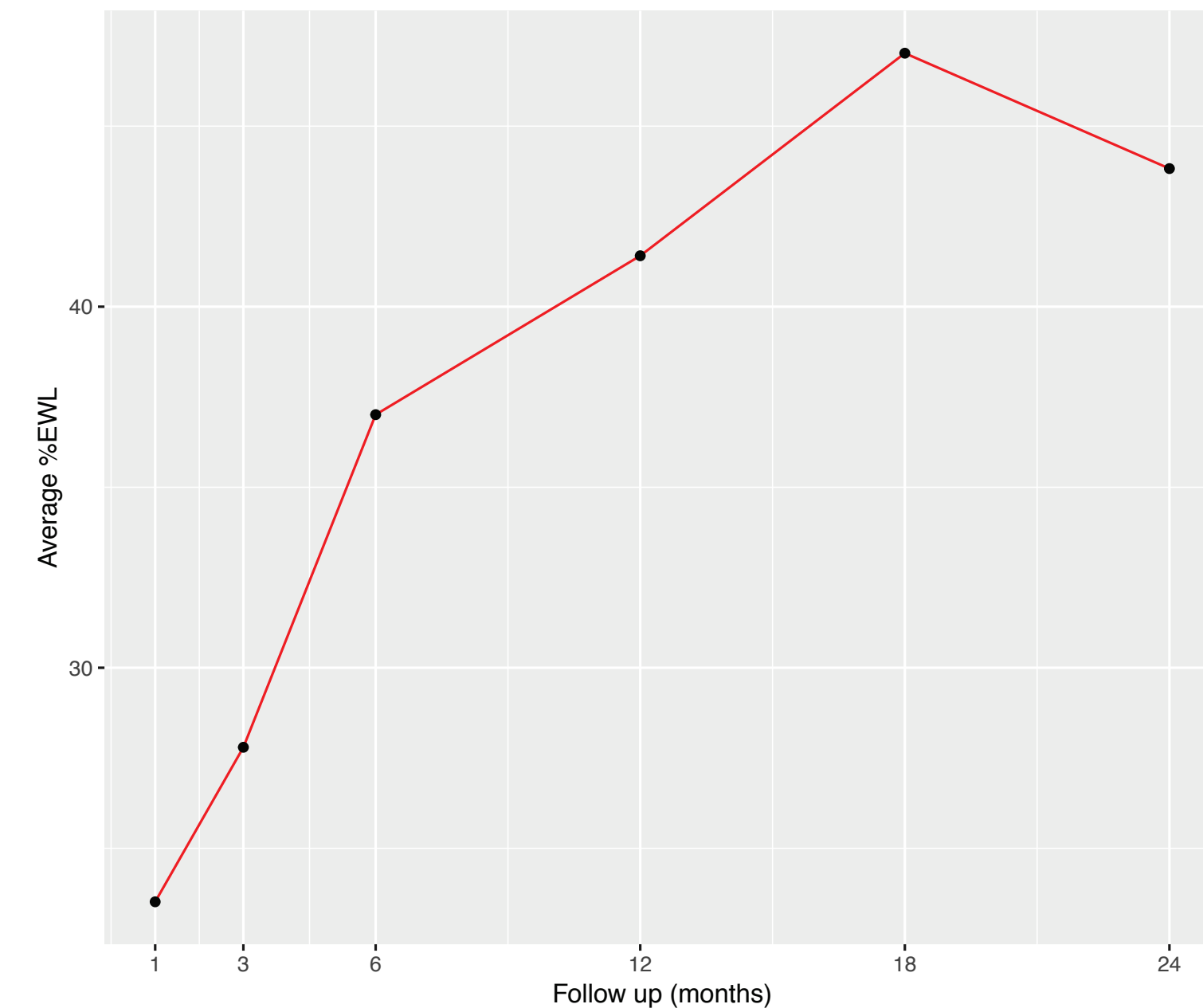


	N	Mean (sd)	Range
0	313	35.6 (4.4)	28.2-53.6
1 month follow up	305	33.4 (4.4)	25.7-50.7
3 months follow up	273	32.9 (4.3)	25.4-50.2
6 months follow up	209	32.1 (4.6)	24.9-51
12 months follow up	143	31.7 (4.3)	22.7-46.3
18 months follow up	85	30.6 (4.4)	20.4-41
24 months follow up	78	31.1 (4.3)	23.4-45.3

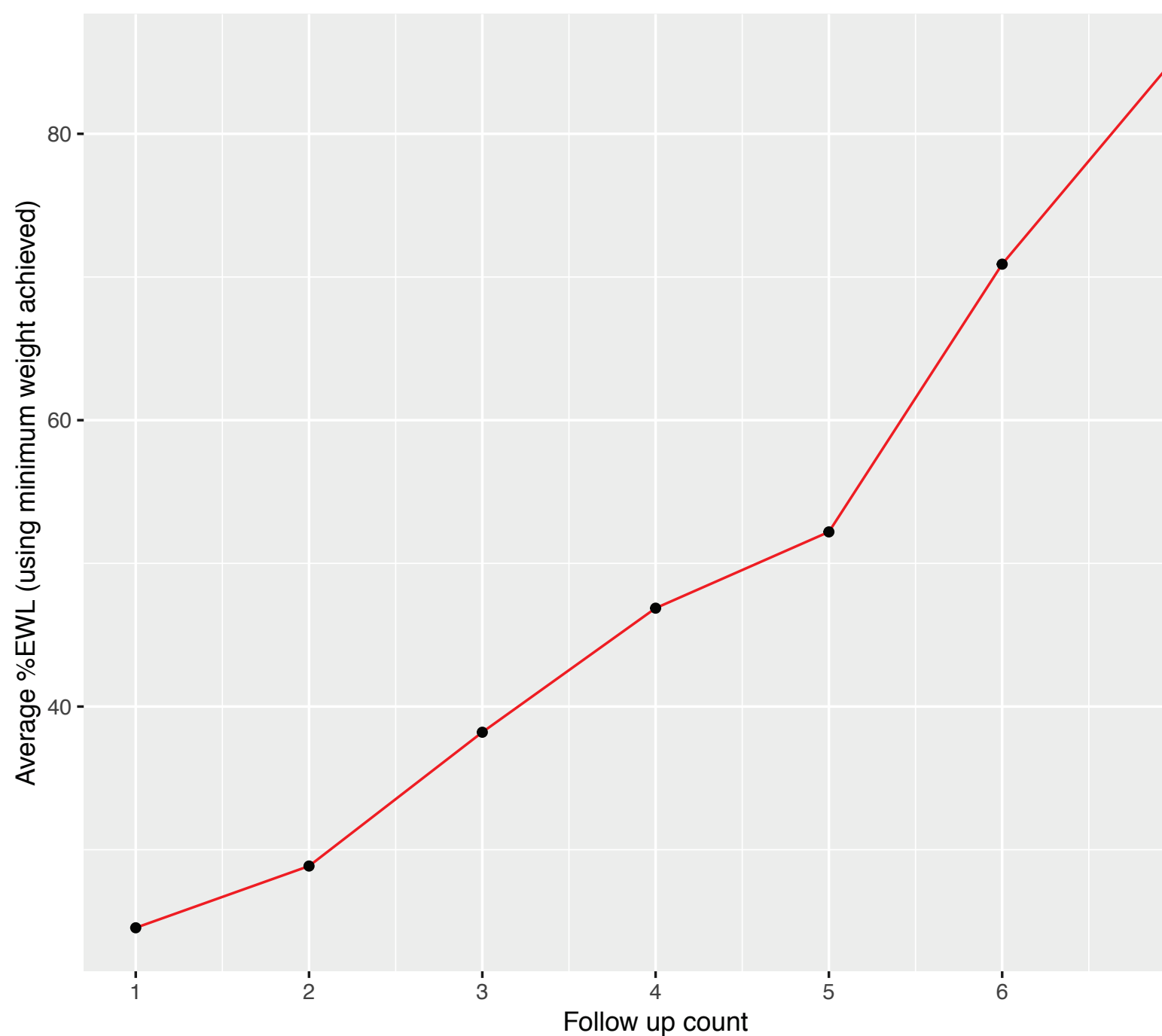


BMI > 35	N	Mean (sd)	Range
1 month follow up	154	18.2 (11.3)	-30.6-79.3
3 months follow up	135	22.9 (15.4)	-10.2-75.9
6 months follow up	110	28.9 (20.1)	-10.2-90.6
12 months follow up	79	34.1 (22.7)	-23.7-90.6
18 months follow up	41	39.4 (31.3)	-27.1-107.2
24 months follow up	38	38.8 (27.8)	-25.6-93.9

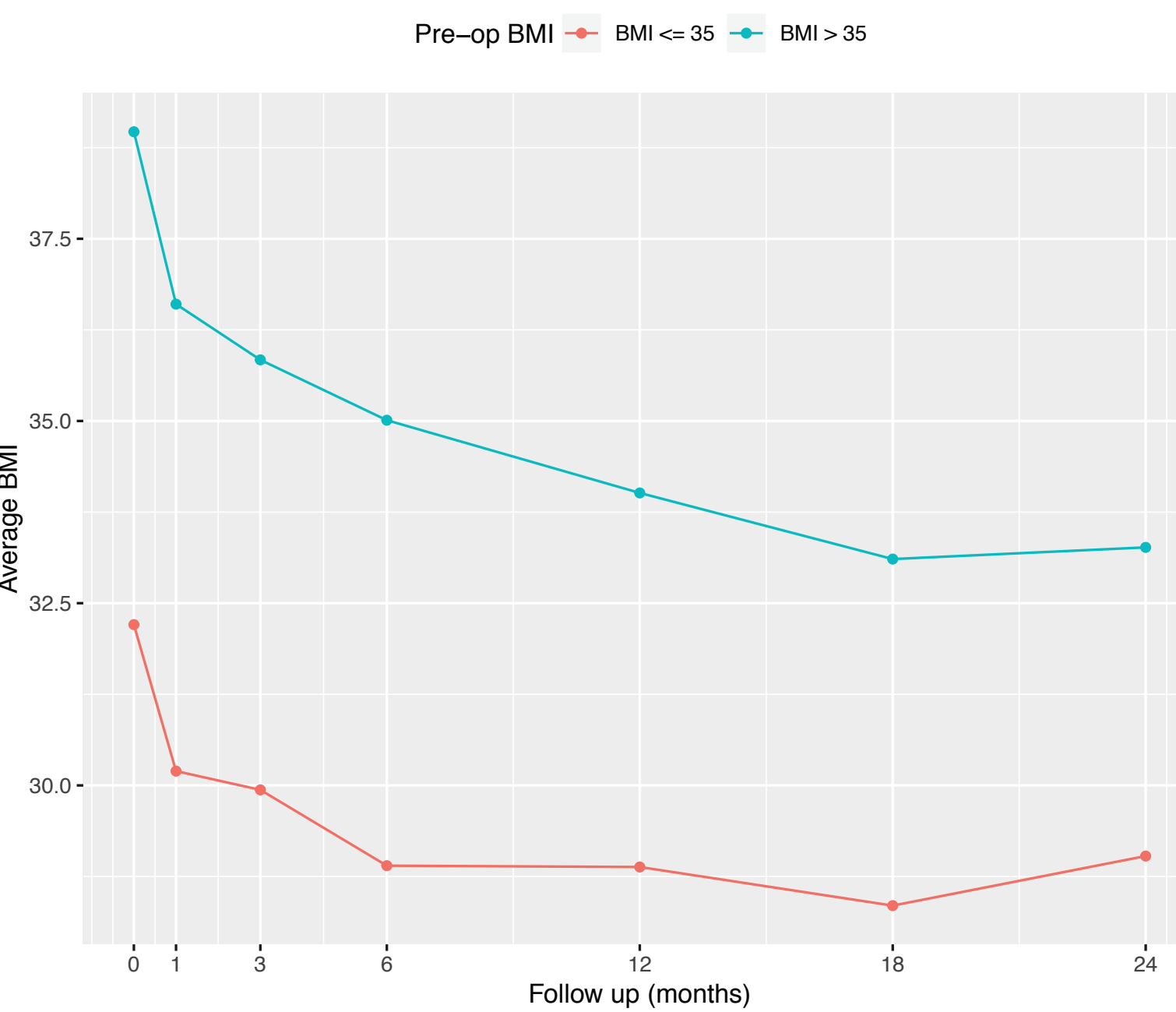
BMI <= 35	N	Mean (sd)	Range
1 month follow up	151	28.9 (16.9)	-16.3-86.1
3 months follow up	138	32.6 (22.2)	-20.2-93.1
6 months follow up	99	46 (26)	-19.8-101.7
12 months follow up	64	50.5 (36.3)	-23.5-147.6
18 months follow up	44	54.1 (42.7)	-39.2-182.9
24 months follow up	40	48.6 (36.4)	-27.3-128.7



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0	313	35.6 (4.4)	28.2-53.6
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Follow up count	N	Mean (sd)	Range
1	13	24.5 (15.7)	0-50.2
2	52	28.9 (16.6)	-11.9-78.3
3	91	38.2 (24)	-10.2-114.3
4	71	46.9 (35.8)	3.4-182.9
5	52	52.2 (25.6)	16.2-116.3
6	25	70.9 (29.9)	21.1-147.6
7	9	85.3 (41.5)	29-142.3



BMI > 35	N	Mean (sd)	Range
Initial	159	39 (3.6)	35-53.6
1 month follow up	154	36.6 (3.9)	27.6-50.7
3 months follow up	135	35.8 (4)	27.9-50.2
6 months follow up	110	35 (4.4)	26.1-51
12 months follow up	79	34 (3.9)	26.1-46.3
18 months follow up	41	33.1 (4.5)	24.2-41
24 months follow up	38	33.3 (4.4)	25.8-45.3

BMI <= 35	N	Mean (sd)	Range
Initial	154	32.2 (1.5)	28.2-35
1 month follow up	151	30.2 (1.8)	25.7-34.6
3 months follow up	138	29.9 (2)	25.4-36.8
6 months follow up	99	28.9 (2.1)	24.9-34.3
12 months follow up	64	28.9 (2.8)	22.7-34.6
18 months follow up	44	28.4 (3)	20.4-35.3
24 months follow up	40	29 (3)	23.4-35.9

Conclusion

Our data has similar outcomes in terms of percentage of excess weight loss to published literature worldwide. The percentage of EWL of the two cohort groups (BMI below 35 and BMI above or equal to 35) shows that gastric banding is still effective in those patients with a higher BMI. The data also reveals that there is a positive correlation between regular follow up and percentage of EWL. Gastric banding is still a recognized procedure for obesity and morbid obesity. In our series, gastric banding had a low rate of morbidity with no mortality. With improved compliance and regular follow-ups, it is possible to achieve a better weight loss.