FEASIBILITY OF ROUX-EN-Y GASTRIC BYPASS FOR MASSIVE PARAESOPHAGEAL HERNIA IN OBESE PATIENTS

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INTRODUCTION

- The objective of this study is to demonstrate the safety and feasibility of robotic assisted laparoscopic Roux-en-Y gastric bypass for the treatment of massive paraesophageal hernias in the obese population.
- Paraesophageal hernias are particularly prevalent in the obese population and obesity adversely affects the long-term outcomes of all anti-reflux procedures.

METHODS

- Single center retrospective review of 16 obese (BMI > 30) adults between September 2019 and October 2020.
- Paraesophageal hernias greater than 5 cm in a singular direction on pre-operative imaging.

RESULTS

- 15 of 16 subjects reviewed were female.
- Median age was 46 years old and median BMI was 39.5 (30 – 49.26).
- Average size of paraesophageal hernias on pre-operative imaging was 5.55 x 6.41 x 6.19 cm.
- Post-operative symptom follow-up was available on 14 of 16 patients.
- Median excess body weight loss percentage at 1 and 3 months were 15.6% and 36.3%, respectively.
- Three patients experienced adverse events requiring additional intervention.
- There were no hernia recurrences or mortality.

Symptoms	Pre-operative (%)	Post-operative (%)
Heartburn	93.75%	7.14%
Regurgitation	56.25%	0%
Dysphagia	43.75%	0%
Cough	6.25%	0%
Dyspnea	18.75%	0%
Chest pain	37.5%	0%
Nausea/emesis	31.25%	7.14%

METHODS CONTINUED

- Patients underwent robotic assisted laparoscopic Roux-en-Y gastric bypass for massive paraesophageal hernia.
- Patient demographic data, postoperative symptom relief, weight loss, and postoperative complications were analyzed.

CONCLUSIONS

- This study demonstrates that robotic assisted laparoscopic paraesophageal hernia repair with Roux-en-Y gastric bypass in obese patients is safe and feasible.
- Further investigation is needed to determine efficacy and long-term outcomes compared to standard surgical repair.

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