Routine Pre-Operative Esophagogastroduodenoscopy and its Effect on Bariatric Surgery Planning: A Single Institution Experience

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Introduction

Standard pre-operative endoscopy in bariatric patients is still controversial due to unclear data on benefits

Pre-operative surgical planning is a complex process and determining the appropriate surgery can sometimes be challenging.

Our study aimed to examined our pre-operative endoscopies in our bariatric patients to determine its impact on their surgical planning.

Methods

Retrospective chart review on all patients who underwent pre-operative endoscopy prior to initial bariatric surgery during a two-year period.

Looks at diagnoses made on endoscopy including- esophagitis, gastritis, ulcers, polyps, h. pylori, duodenitis, and hiatal hernia.

Compared hiatal hernia diagnosis on endoscopy compared to the upper GI study in the same patient.

Wanted to determine what impact these endoscopies had on changes in surgical planning.

Results

In total, we had 69 patients included.

Endoscopic findings

Diagnosis	# patients who had diagnosis	Percentage
Esophagitis	16	23%
Gastritis	47	68%
Ulcer/Polyp	11	15.9%
H.Pylori	2	2.9%
Duodenitis	2	2.9%
Hiatal hernia	46	66.7%

Hiatal Hernia's: Endoscopy Vs Upper GI

- 43 patients formally underwent a hiatal hernia repair at time of surgery
- Of these: 9 noted on UGI
- **34 of the 43 of hiatal hernias were found on endoscopy ONLY**
- 79% repairs based on endoscopy

Of the 69 patients, 43 had changes in their surgical planning based on their endoscopy (62%).

Reason for change	# Patients	Percentage (of total pts)
Newly diagnosed Hiatal hernia and need for repair	34	49.3%
Newly diagnosed paraesophageal hernia with need for repair	1	1.5%
Severe GERD- changed from a sleeve to a bypass	9	13/%
Need for H.Pylori Treatment	2	2.9%

Conclusions

Pre-operative planning was greatly impacted by endoscopy
- 79% of repaired hiatal hernias were identified on endoscopy alone
- 62% of patients had their initial surgical plan altered following their endoscopy
- 3% of patients required h. pylori treatments

There is a high utility for endoscopy prior to bariatric surgery in order to optimize surgery and ensure the best possible outcomes.