SADI-S Initial experience in Chile

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Background:

In 2007, Sánchez Pernaute and collaborators published a surgical alternative called duodeno-ileal bypass with vertical gastrectomy or Single Anastomosis Duodeno-Ileal Bypass with Sleeve Gastrectomy (SADI-S). This was described as a technical solution to simplify a complex surgical technique, the duodenal switch, transforming it into a restrictive and derivative procedure, highly useful in patients with severe obesity (BMI > 50) or poorly controlled Diabetes Mellitus.

Objective:

To evaluate the safety of SADI-S surgery, its metabolic and anthropometric effects, in patients with high BMI, undergoing the procedure at Clinica Las Condes, Santiago between 2019-2023.

Methods:

Retrospective, descriptive, single-center, study on patients operated with the SADI-S technique in the Bariatric Surgery Unit of Clinica Las Condes between 2019-2023, with at least 1 year of post-surgery follow-up.

Results:

Of a total n=24, at 1-year follow-up: 14 patients (58%), Female: 8 (57%), Male: 6 (43%), Average BMI (50.5 kg/m2), %TWL 41%, %EWL 84%, remission of comorbidities: T2 DM (80%), HTN (75%), Hyperlipidemia (100%), Dyslipidemia (80%), Complications: 4,2%, one patient with an anastomotic leak resolved

Conclusion:

SADI-S is a safe and effective procedure in high BMI patients. Its weight loss and metabolic benefits outperforms other derivative techniques, such as gastric bypass, with superior resolution of comorbidities. A larger number of patients and longer follow up is needed.

MAIN RESULTS

- **%TWL 41%**
- **%EWL 84%**
- **Complication: 4,2% leak**
- **No Mortality**





