



Albert Einstein College of Medicine



Assessment of Small Bowel Limb Lengths and Weight Loss Outcomes in Revisional Bariatric Surgery: RYGB Distalization Versus Conversion of Sleeve to RYGB

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Background:

- There is no consensus on optimal RYGB limb lengths in revisional bariatric surgery, in the setting of Recurrent Weight Gain (RWG) after initial bariatric surgery.

Methods:

- Retrospective cohort study
- RBS patients for RWG after SG and RYGB (2018-2023).
- To compare limb lengths and weight loss between RYGB distalization (RYGB-D) versus conversion of sleeve to RYGB (SG-RYGB)

Results:

420 patients:

- **RYGB-D:** 42.9% (n=180)
- **SG-RYGB:** 57.1% (n=240)

Limb lengths:

- **RYGB-D:** BPL:180, CC:270 cm.
- **SG-RYGB:** BPL:75, AL:150 cm.

Preoperative BMI:

- **RYGB-D:** 43.6 kg/m²
- **SG-RYGB:** 45.1 kg/m²

Outcomes:

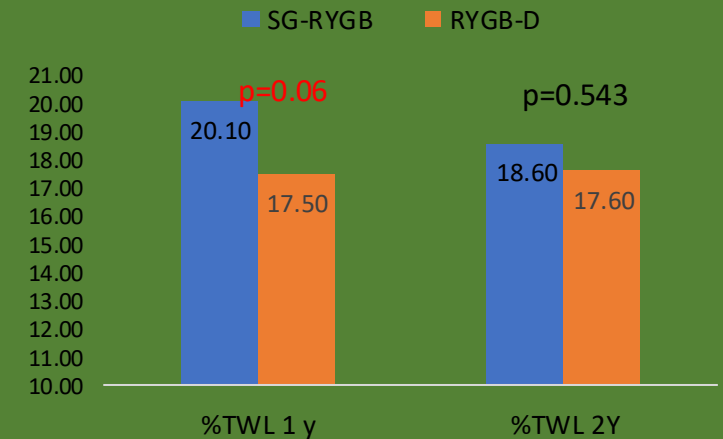
BMI 1 year

- RYGB-D: 35.9 kg/m²
- SG-RYGB: 35.6 kg/m²

BMI 2 year:

- RYGB-D: 35.9 kg/m²
- SG-RYGB: 37.1 kg/m²

%TWL



Safety: Overall complications 3.8%, no difference between groups (p=0.708).

Conclusion: Both procedures are safe and effective. SG-RYGB has greater weight loss at one year, with comparable outcomes by two years.