



ESG in LA

Physicians “officially” trained in-between 2016 and 2023



158 Brasil



06 Chile



07 Dominican Republic



06 Colombia



06 Equador



ESG in LA

Physicians “officially” trained in-between 2016 and 2023



02 Costa Rica



02 El Salvador



01 Cayman Island



? Mexico ?



ESG in LA

- Starts in 2016
- Cases per year (estimated)
- 1300y
- 1000y Brazil



ESG Training in Brazil



1 One-day course

2 Bootcamp

3 Proctoring with technicians

4 MD proctoring

Around 100 MD trained in this methodology

ESG Training in LA



1 Courses abroad (Brazil, US, Europe)

2 Local dry lab

3 MD proctoring

4 Proctoring with technicians

5 Teleproctoring (MD + tech)

Around 25 MD trained in this methodology - LA
Around 50 MD trained in this methodology - BR

ENDOSCOPIC SLEEVE GASTROPLASTY – MINIMALLY INVASIVE THERAPY FOR PRIMARY OBESITY TREATMENT

Gastroplastia vertical endoscópica – terapêutica minimamente invasiva para tratamento primário da obesidade

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ABSTRACT - Background: Less invasive and complex procedures have been developed to treat obesity. The successful use of Endoscopic Sleeve Gastroplasty using OverStitch[®] (Apollo Endosurgery, Austin, Texas, USA) has been reported in the literature. **Aim:** Present technical details of the procedure and its surgical/ endoscopic preliminary outcome. **Method:** The device was used to perform plications along the greater curvature of the stomach, creating a tubulization similar to a sleeve gastrectomy. **Result:** A male patient with a BMI of 35.17 kg/m² underwent the procedure, with successful achievement of four plications, and preservation of gastric fundus. The procedure was successfully performed in 50 minutes, time without bleeding or other complications. The patient presented mild abdominal pain and good acceptance of liquid diet. **Conclusions:** The endoscopic gastroplasty procedure was safe, with acceptable



Article in Press

Endoscopic sleeve gastropasty in the management of overweight and obesity: an international multicenter study

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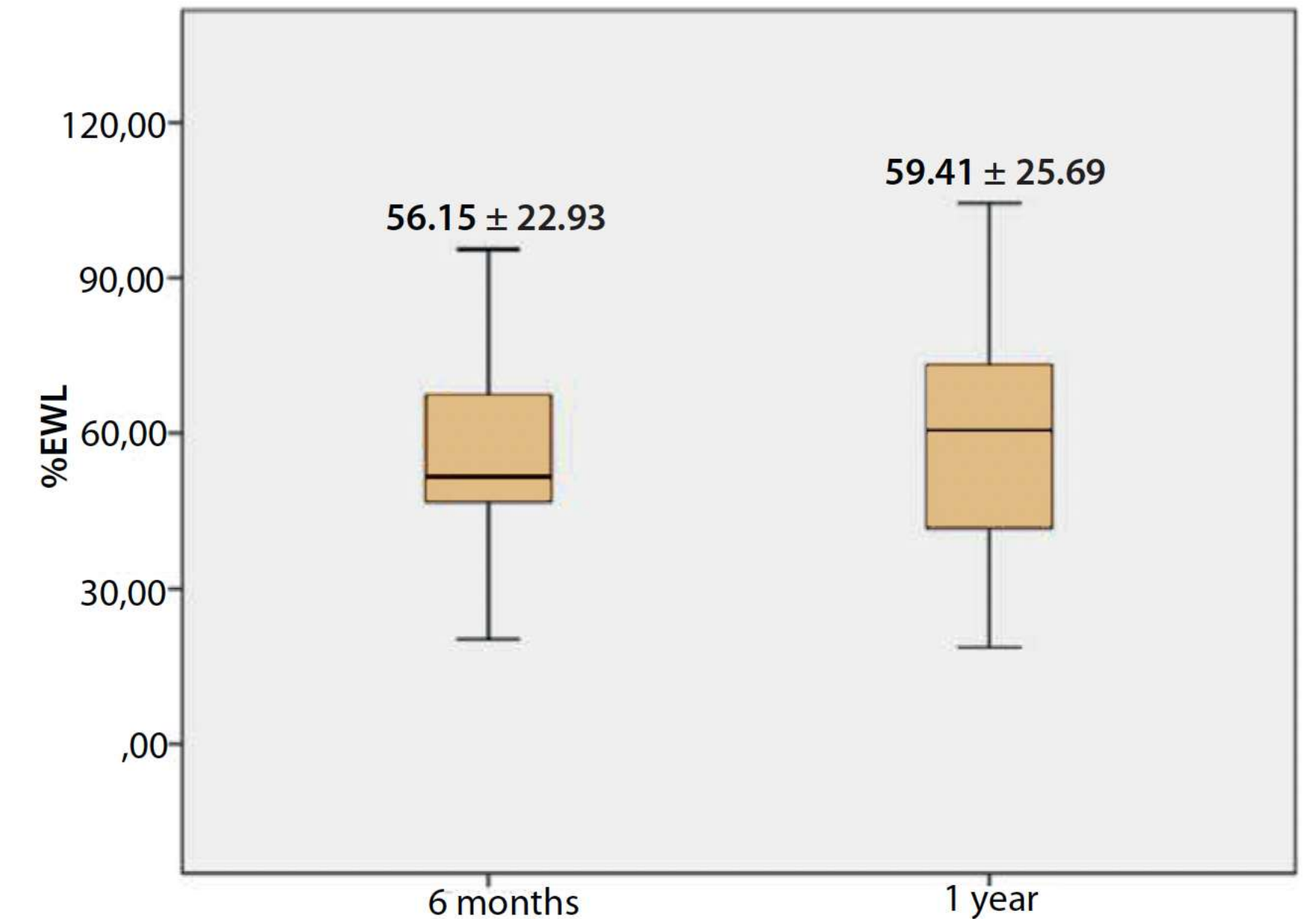
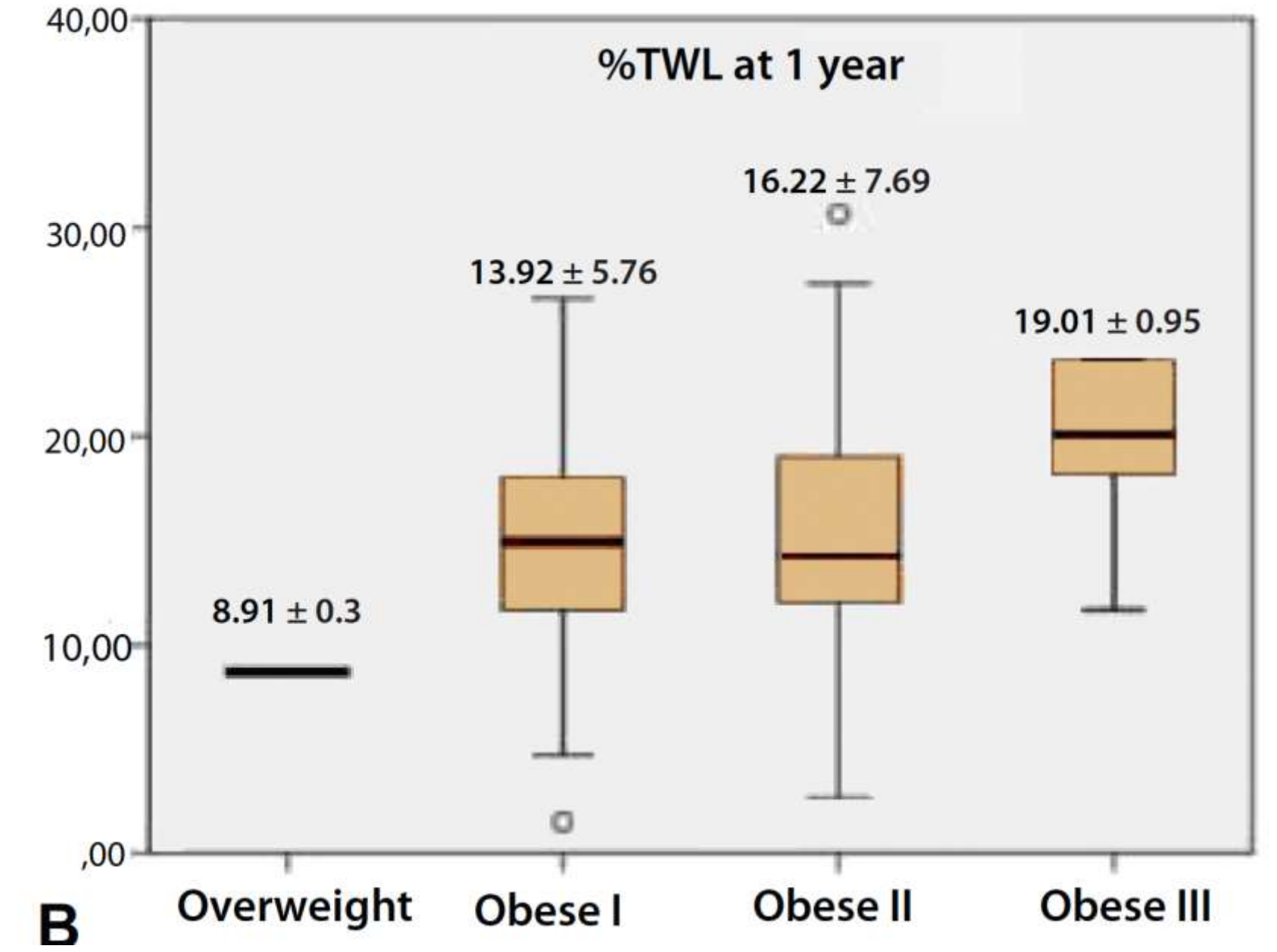
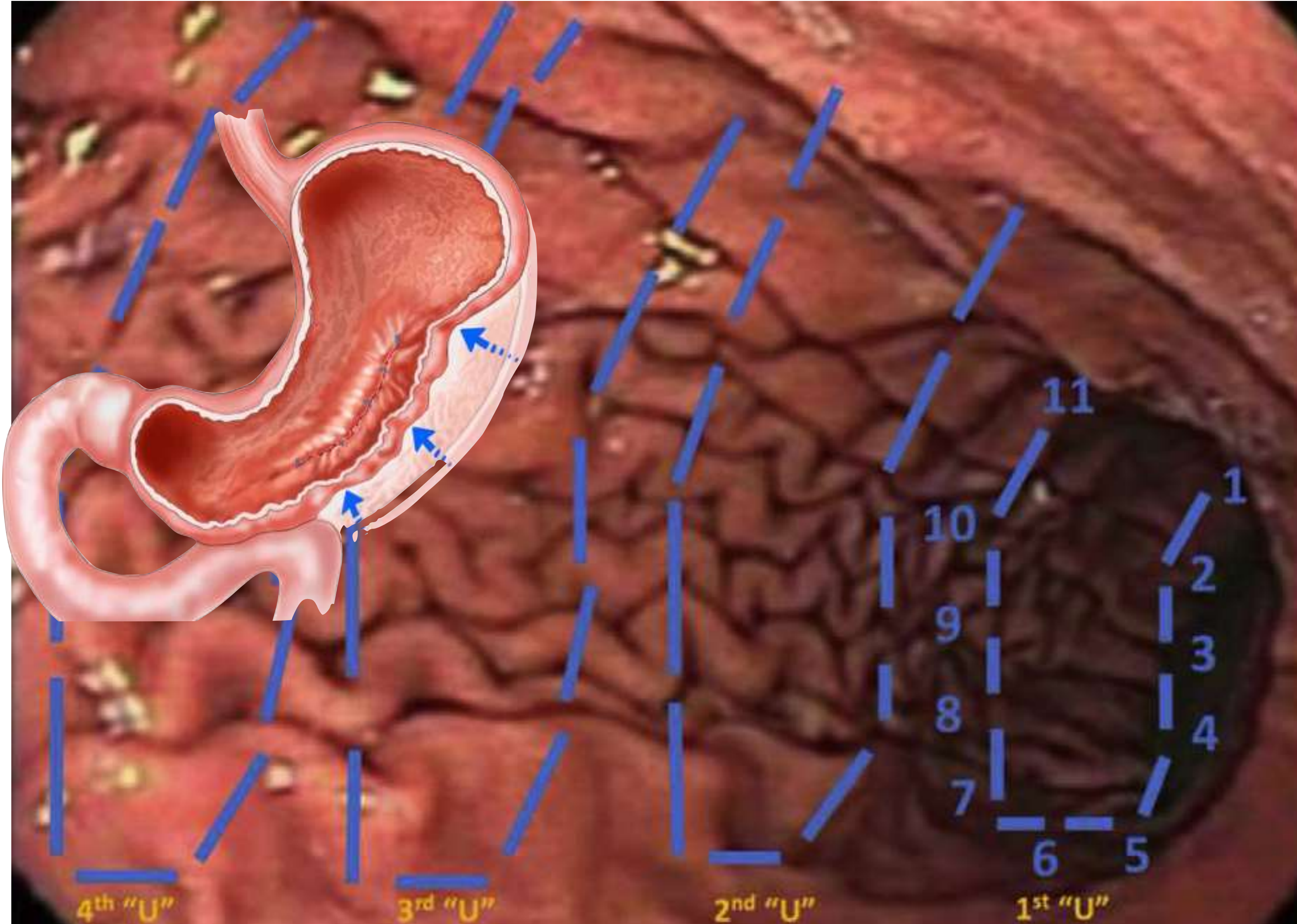
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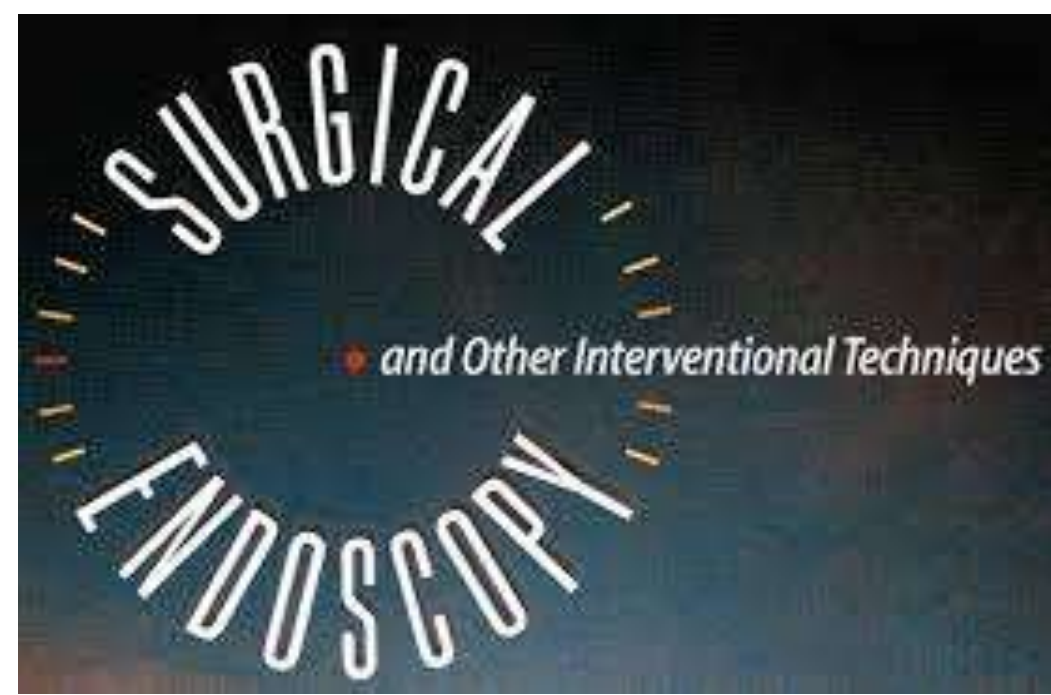
DOI: <https://doi.org/10.1016/j.gie.2019.06.013>

Endoscopic sleeve gastropasty in the management of overweight and obesity: an international multicenter study

15.06% TWL

2.06% SAE






Surgical Endoscopy

<https://doi.org/10.1007/s00464-019-07212-z>

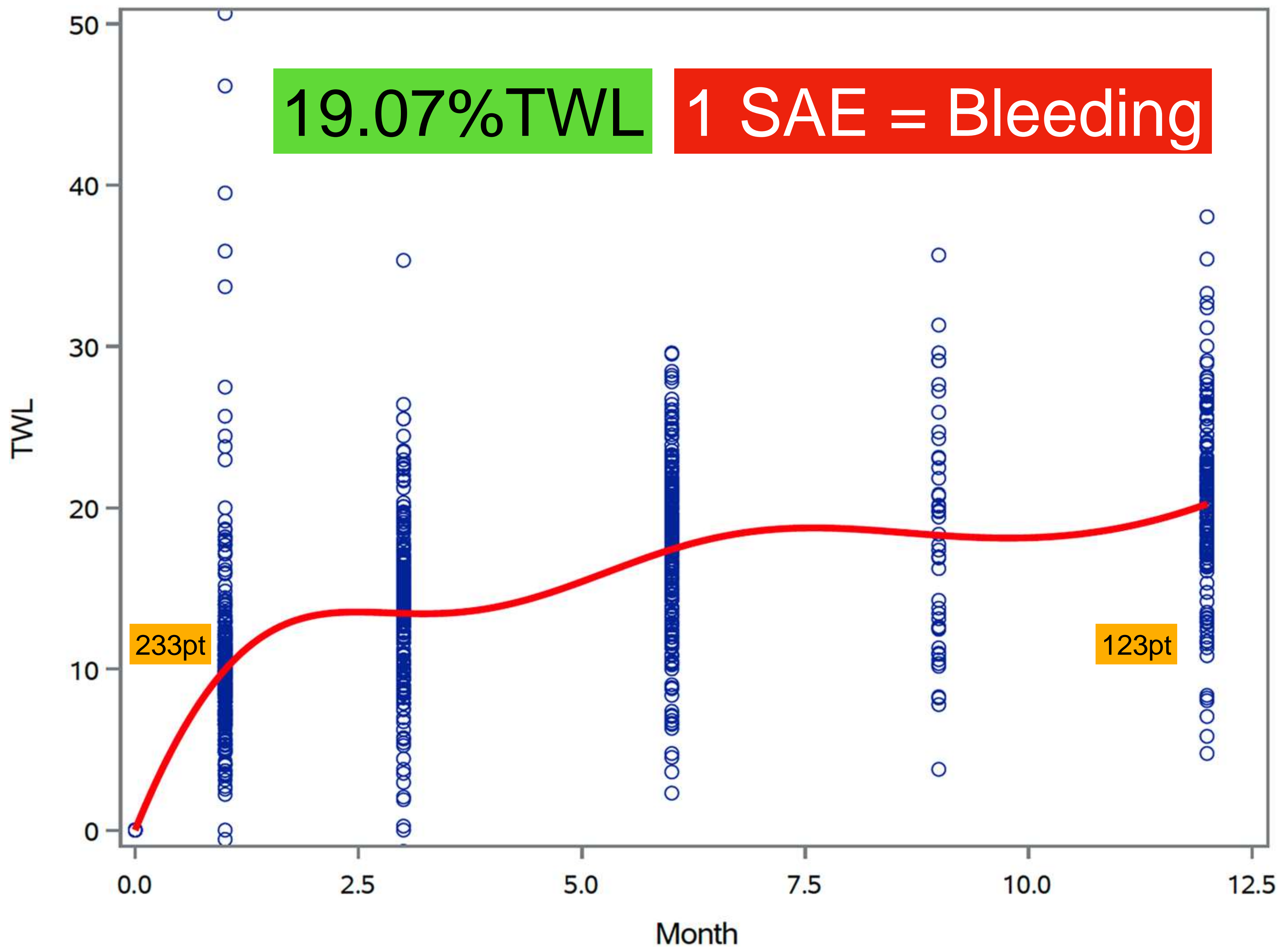


Safety and short-term effectiveness of endoscopic sleeve gastropasty using overstitch: preliminary report from a multicenter study

Manoel Galvao Neto¹ · Rena C. Moon² · Luiz Gustavo de Quadros¹ · Eduardo Grecco¹ · Admar Concon Filho¹ · Thiago Ferreira de Souza¹ · Luis Augusto Mattar³ · Jose Americo Gomides de Sousa³ · Barham K. Abu Dayyeh⁴ · Helmut Morais⁵ · Felipe Matz⁶ · Muhammad A. Jawad² · Andre F. Teixeira² 

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ORIGINAL CONTRIBUTIONS



Brazilian Consensus on Endoscopic Sleeve Gastroplasty

Manoel Galvão Neto^{1,2} · Lyz Bezerra Silva³ · Luiz Gustavo de Quadros^{2,4} · Eduardo Grecco^{1,2} · Admar Concon Filho^{2,5} · Artagnan Menezes Barbosa de Amorim⁶ · Marcelo Falcao de Santana⁷ · Newton Teixeira dos Santos⁸ · Joao Henrique Felicio de Lima⁹ · Thiago Ferreira de Souza^{1,2} · Helmut Wagner Poti de Moraes¹⁰ · Felipe Matz Vieira¹¹ · Rena Moon¹² · André F. Teixeira¹²  · for the Brazilian Endoscopic Sleeve Gastroplasty Collaborative

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1 One-day course

2 Bootcamp

4 MD proctoring

1828pt

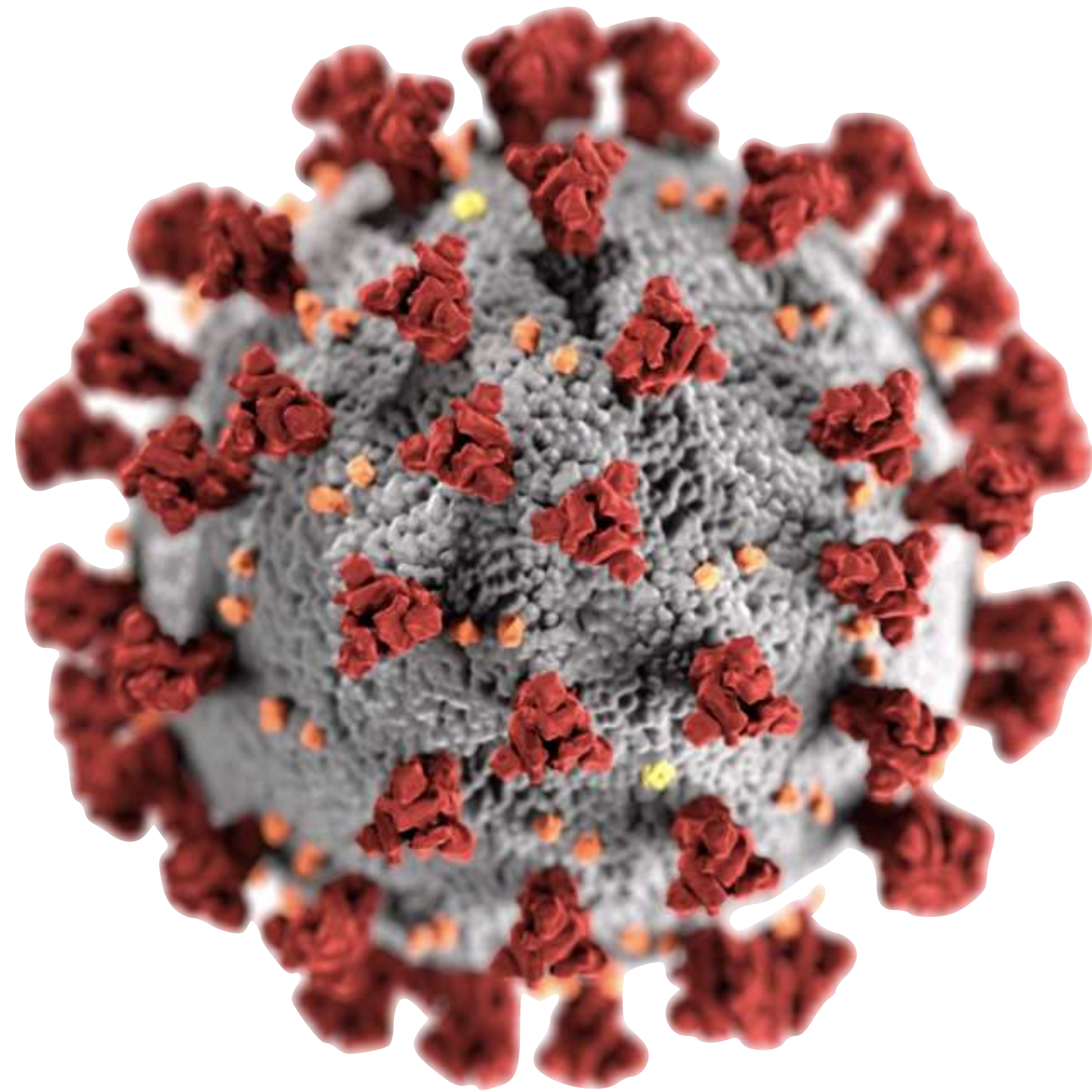
18.2%TBWL

0.8%SAE

Stop

Start

Continue





NEW CONCEPT



Learning Process Effectiveness During the COVID-19 Pandemic: Teleproctoring Advanced Endoscopic Skills by Training Endoscopists in Endoscopic Sleeve Gastroplasty Procedure

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ORIGINAL ARTICLE: Clinical Endoscopy

Endoscopic sleeve gastropasty plus liraglutide versus endoscopic sleeve gastropasty alone for weight loss

CME



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