

Laparoscopic Sleeve Gastrectomy in CENTEA Patient with Situs Invertus Totalis

METABOLIC & BARIATRIC

Mohammed Al Sibani MD,FRCSC

Senior consultant
Bariatric & Metabolic Surgery Unit
Armed Forces Hospital- Oman



Nothing to Disclose



Clinical History

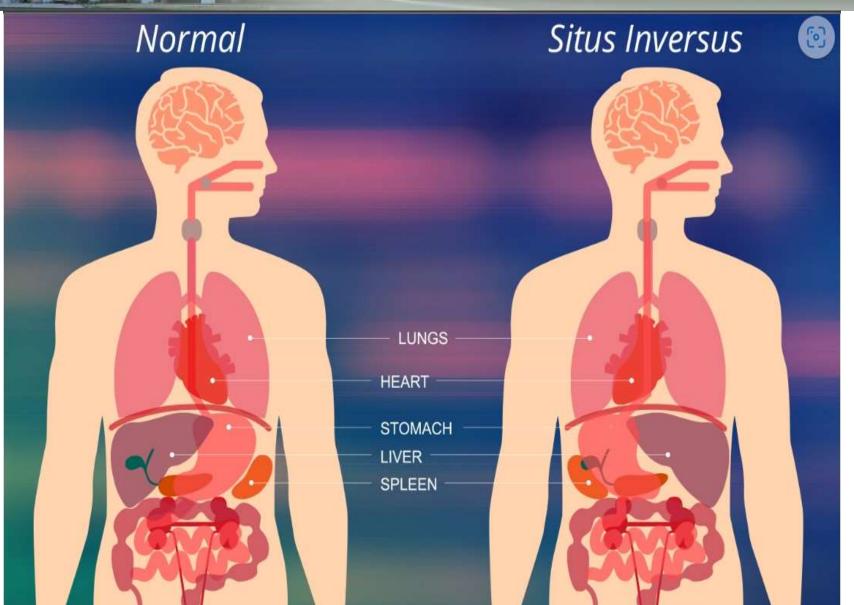
- ➤ 40 years old, Female
- ightharpoonup BMI: 45 kg/m²
- ➤ PMH:
 - ✓ <u>Situs Invertus Totalis</u>
 - ✓ Diagnosed during investigation for renal calculi



Situs Invertus Totalis

- > Rare genetic condition (autosomal recessive gene)
- > Prevalence: 1 in 10,000
- Characterized by Inverted anatomy and possible aberrant structures
- ➤ Difficulty in performing laparoscopic procedures with inverted anatomy







Preoperative Evaluation









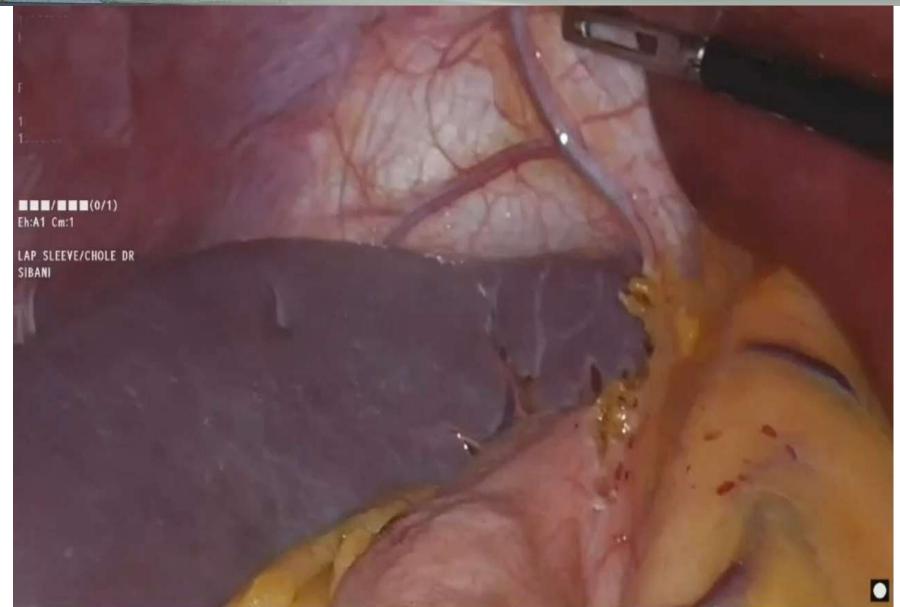
Perioperative Preparation





Operative Procedure







Postoperative

- Close Monitoring and Follow-up
- Manage the postoperative pain which might be at unusual location.

- ➤ Uneventful postoperative course
- > Significant weight loss at one-year follow-up



Conclusion



LSG in SIT

- > Preopertive planning and imaging
- Modification of surgical technique: ports position, patient position, instruments use, traction etc
- Care and attention to the inverted anatomy and aberrant structures



Thank You