

# Three-year results of comparison between Ringed versus non-ringed Roux-en-Y gastric bypass A Randomized Control Trial

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# Background

**Roux-en-Y gastric bypass (RYGB)** one of the cornerstones of MBS (2013-2014-2023)

**Most common revisional procedure**

**Weight loss failure (WLF)** in terms of weight recurrence (WR) or insufficient WL is not uncommon after laparoscopic RYGB, **reported WLF rates ranges from 20–35%**

**Several factors:** patient's related – anatomical factors.

It may also be attributed to **dilatation** of the gastric pouch and gastrojejunostomy.

Resizing the pouch/gastrojejunostomy +/- ring application has been reported.

Many reports (mid-term and long-term) showed better weight loss with ringed-RYGB

# Objective

Compare outcomes at **6 months** and **3 years**

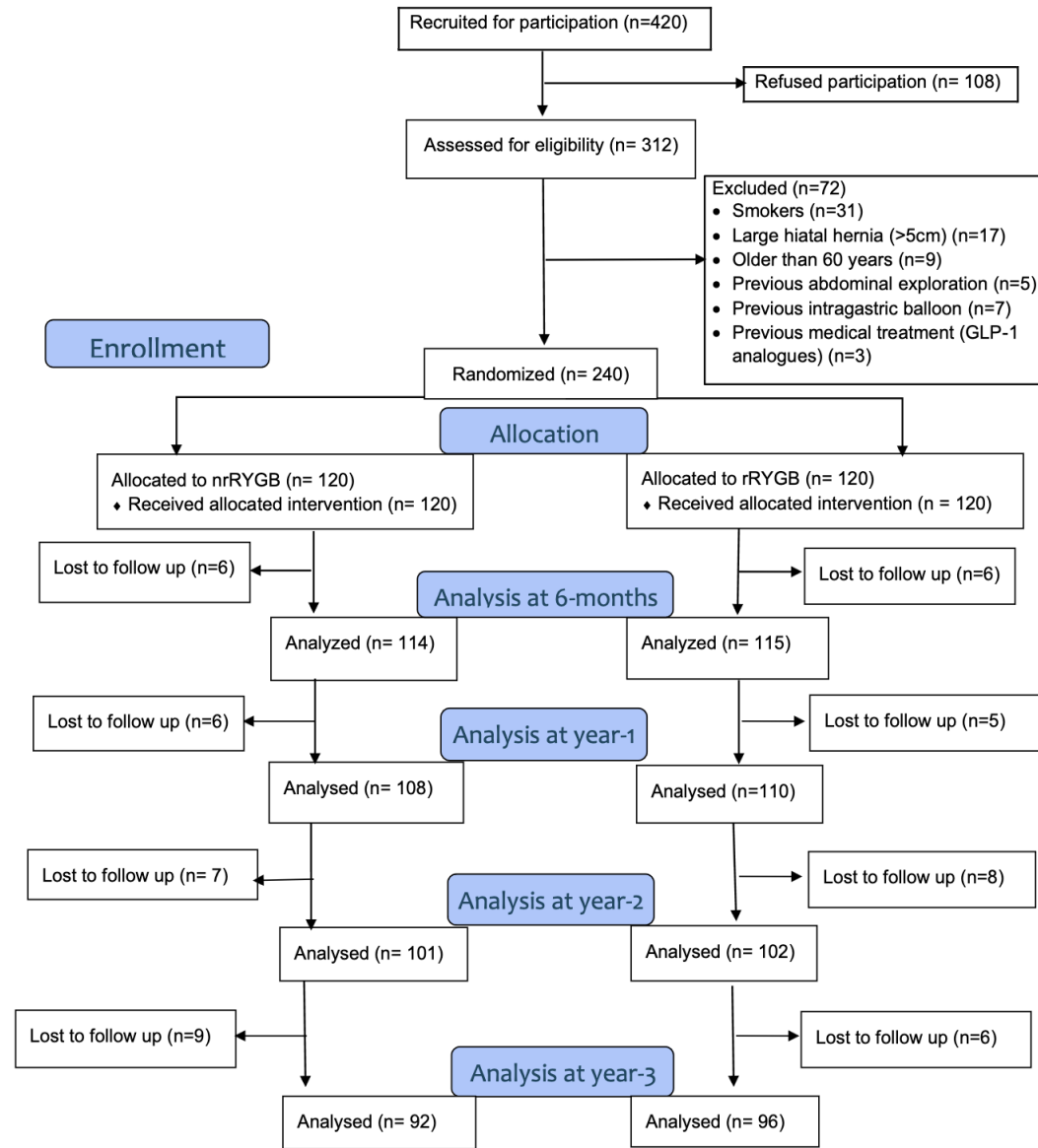
**Non-ringed RYGB (nrRYGB)**

**vs.**

**Ringed RYGB (rRYGB)**

*Several studies are available; however, no studies has a assessed a wide variety of outcomes.*

# Flowchart



# Methods

A single-blinded randomized controlled study (Two centers)

- Weight loss in %TWL and %EWL
- Weight recurrence
- Volumetric changes in the gastric pouch and gastro-jejunostomy anastomosis
- Complications
- RAND 36 QoL
- Food tolerance (FT) & dumping score
- Endoscopy

# Baseline characteristics of the sample cohort

<b>Baseline characteristics</b>	<b>nrRYGB (n = 120)</b>	<b>rRYGB (n = 120)</b>	<b>p</b>
Age, mean±SD	46.4 ± 6.8	45.9 ± 7.7	0.601
Sex (female), n (%)	97 (80.8)	101 (84.2)	0.610
<b>Anthropometrics</b>			
Height (m), mean±SD	1.6 ± 0.1	1.6 ± 0.1	0.920
Weight (kg), mean±SD	118.3 ± 11.3	118.1 ± 9.6	0.873
Ideal body weight (kg), mean±SD	65.8 ± 5.5	65.8 ± 6.0	0.944
Excess weight (kg), mean±SD	52.5 ± 9.3	52.3 ± 8.1	0.884
BMI, mean±SD	45.0 ± 3.7	45.1 ± 3.7	0.937
<b>Imaging</b>			
Hiatal hernia, n (%)	27 (22.5)	25 (20.8)	0.876
Calcular cholecystitis, n (%)	5 (4.2)	7 (5.8)	0.769
<b>Endoscopy</b>			
Hiatal hernia, n (%)	27 (22.5)	25 (20.8)	0.876
GERD grade A, n (%)	10 (8.33)	11 (9.17)	1.000
GERD grade B, n (%)	2 (1.7)	1 (0.8)	1.000
<b>Associated medical problems</b>			
Osteoarthritis, n (%)	18 (15.0)	21 (17.5)	0.726
Dyslipidemia, n (%)	17 (14.2)	18 (15.0)	1.000
Diabetes mellitus, n (%)	14 (11.7)	14 (11.7)	1.000
Hypertension, n (%)	11 (9.2)	12 (10.0)	1.000
Sleep apnea, n (%)	12 (10.0)	13 (10.8)	1.000
Cardiac ischemia, n (%)	2 (1.7)	3 (2.5)	1.000

# Methods

- Key features Surgical techniques **rRYGB** and **nrRYGB**
- **Expanded Pouch**

Bougie size	40 fr
Width of pouch	2-2.5 cm
First stapler fire (Lower pouch limit)	Above the level of incisura angularis (10cm below angle of His)
Last stapler fire	1–1.5 cm lateral to esophago-gastric junction
His angle dissection	Yes
Length of pouch	8-10 cm above the gastro-jejunostomy
Capacity of pouch	35-40 ml
Counting the whole bowel length	yes
Limb lengths	Alimentary limb 100cm Biliopancreatic limb 100cm Always keeping a common limb length of at least 300cm.
Width of gastroenterostomy	2-2.5 cm
Reinforcement	Oversewing invaginating sero-muscular sutures
Hiatal hernia repair	Yes, if pre-operatively diagnosed
Methylene blue test	yes



# Methods

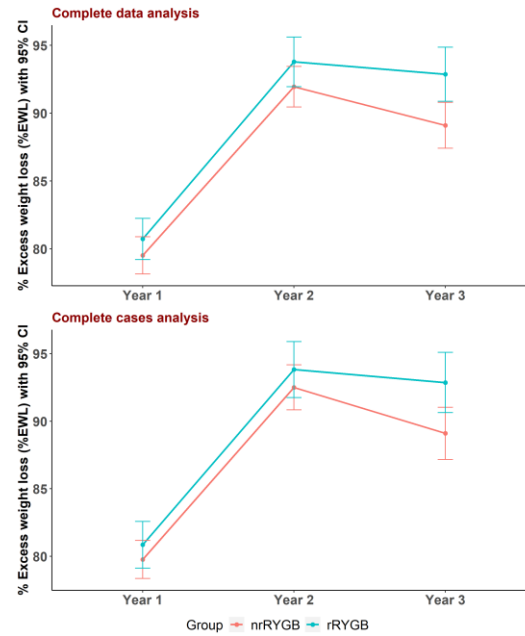
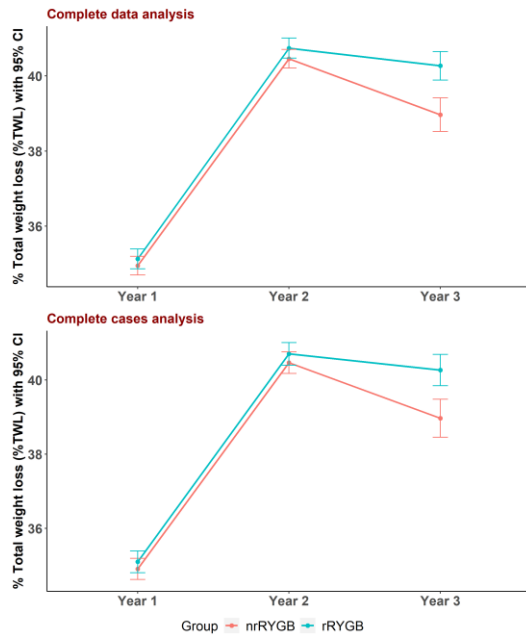
Extra info **rRYGB**:

- MiniMizer Gastric Ring was used
- 3 cm above the gastro-jejunostomy
- Ring was loosely placed around the pouch
- Fixed in place by two non-absorbable sutures

# Results

Weight loss @3years:

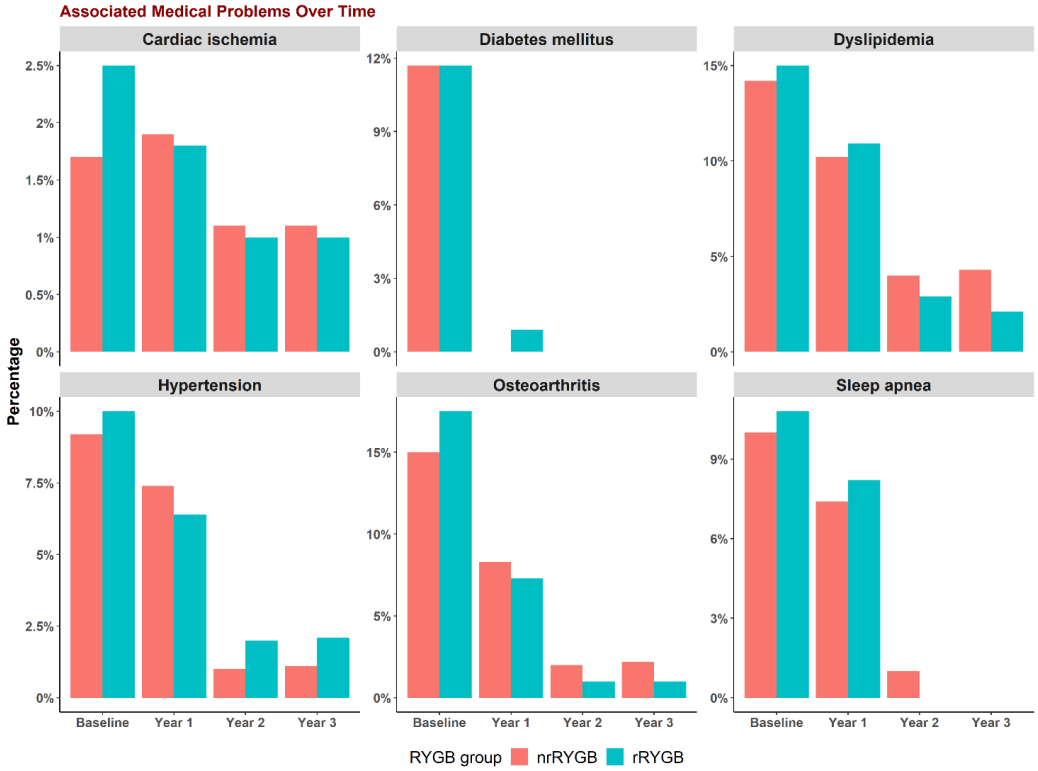
	nrRYGB	rRYGB	Mean difference: rRYGB – nrRYGB (95% CI)	p
%TWL	39.0 ± 2.5	40.3 ± 2.1	1.3 (0.6, 2.0)	< 0.001*
%EWL	89.1 ± 9.5	92.9 ± 11.2	3.8 (0.8, 6.7)	0.012*



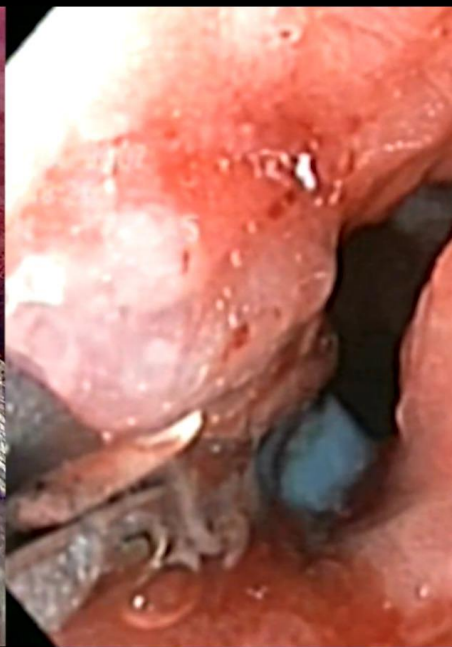
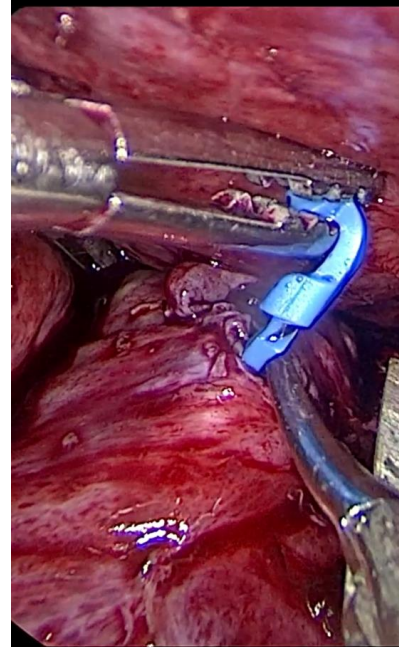
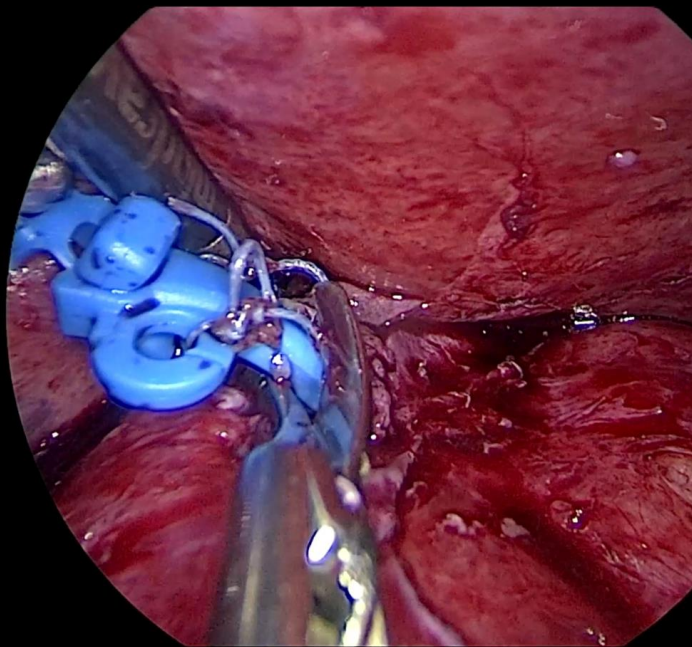
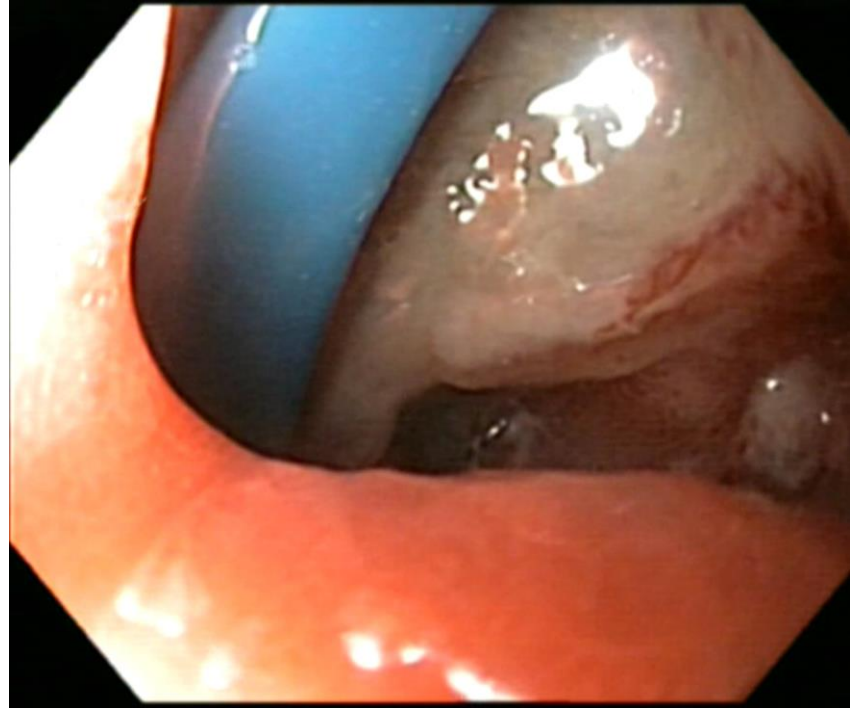
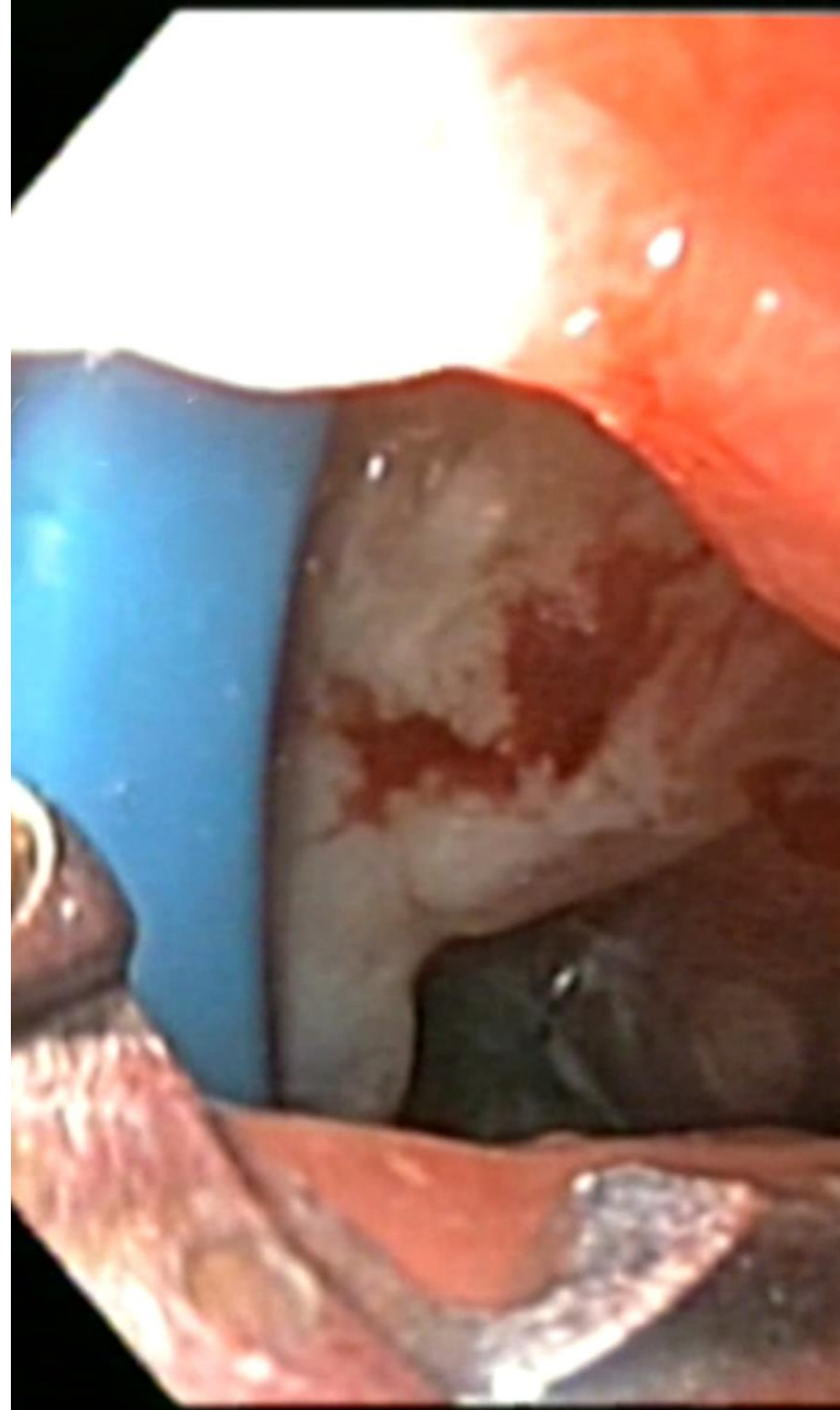
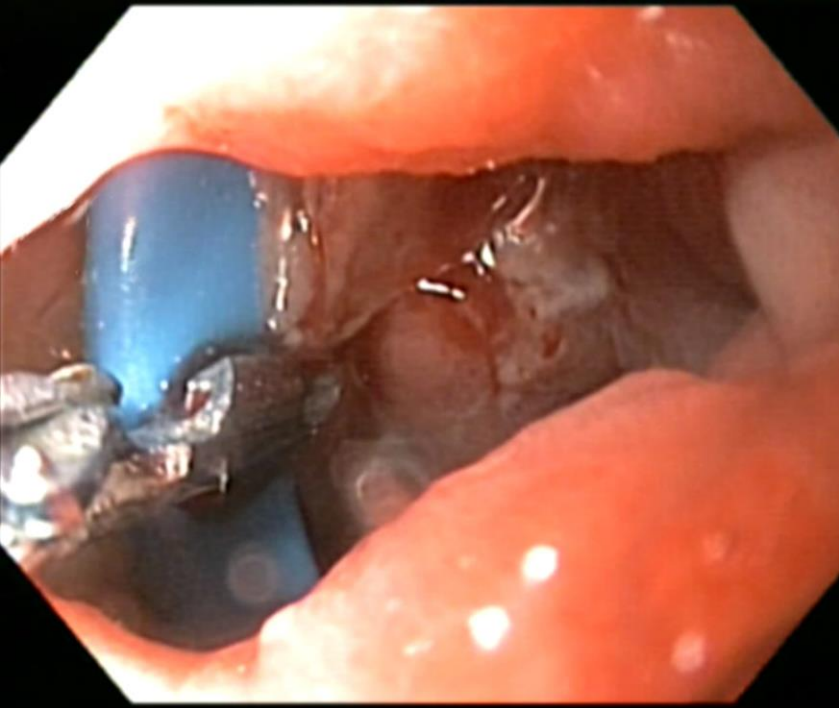
Weight recurrence was significantly lower in rRYGB

# Results

- **No significant differences** in **complications, readmissions, reoperations**
- **No significant differences** between groups for RANDSF36  
But a **significant improvement** in both groups pre vs. 3 years
- Both groups had **comparable significant improvement** in **associated medical problems** at 3-years compared to baseline.



<b>Overall complications</b>	<b>36 (30.0)</b>	<b>38 (31.7)</b>	<b>0.889</b>
<b>Early complications</b>	<b>7 (5.8)</b>	<b>8 (6.7)</b>	<b>1.000</b>
Hemorrhage	1 (0.8)	2 (1.7)	1.000
Melena	2 (1.7)	1 (0.8)	1.000
Vomiting	4 (3.3)	5 (4.2)	1.000
<b>Late complications</b>	<b>29 (24.2)</b>	<b>31 (25.8)</b>	<b>0.882</b>
Hiatal hernia	10 (10.8)	11 (11.5)	1.000
Marginal ulcer	4 (3.3)	3 (2.5)	1.000
Internal hernia	0 (0.0)	1 (0.8)	1.000
Port-site hernia	1 (0.8)	1 (0.8)	1.000
Anemia	3 (2.5)	5 (4.2)	0.722
<b>Denovo GERD</b>	<b>2 (1.7)</b>	<b>2 (1.7)</b>	<b>1.000</b>
Perforation	0 (0.0)	1 (0.8)	1.000
Dysphagia	0 (0.0)	1 (0.8)	1.000
Calcular cholecystitis	<b>15 (12.5%)</b>	<b>14 (11.7)</b>	<b>1.000</b>
<b>Clavien-Dindo classification</b>			
<b>I</b>	<b>4 (3.3)</b>	<b>5 (4.2)</b>	<b>1.000</b>
<b>II</b>	<b>2 (1.7)</b>	<b>1 (0.8)</b>	<b>1.000</b>
<b>III-b</b>	<b>1 (0.8)</b>	<b>2 (1.7)</b>	<b>1.000</b>
<b>Readmission</b>	<b>10 (8.3)</b>	<b>11 (9.2)</b>	<b>1.000</b>
Reoperation	2 (1.7)	4 (3.3)	0.684
Reoperation cause			
Exploration for early complications	1 (0.8)	2 (1.7)	1.000
Exploration for internal hernia	0 (0.0)	1 (0.8)	1.000
Port-site hernia repair	1 (0.8)	1 (0.8)	1.000
<b>Endoscopy year 1</b>			
Denovo hiatal hernia	2 (1.9)	1 (0.9)	0.620
Denovo GERD A	2 (1.9)	1 (0.9)	0.620
Marginal ulcer	1 (0.9)	0 (0.0)	0.495
H pylori	3 (2.8)	4 (3.6)	1.000
<b>Endoscopy year 3</b>			
Denovo hiatal hernia	10 (10.8)	11 (11.5)	1.000
Denovo GERD A	2 (2.2)	2 (2.1)	1.000
Marginal ulcer	4 (4.3)	3 (3.1)	0.716
H pylori	4 (4.3)	5 (5.2)	1.000



# Results

- **Leptin** and **ghrelin** levels were **significantly higher** in the **rRYGB** group

<b>Baseline characteristics</b>	<b>nrRYGB (n = 120)</b>	<b>rRYGB (n = 120)</b>	<b>p</b>
Leptin, fasting (ng/ml), mean±SD	30.7 ± 1.4	30.5 ± 1.4	0.319
Ghrelin, fasting (pg/ml), mean±SD	327.6 ± 41.1	321.2 ± 43.7	0.241

<b>Post-op Lab investigations</b>	<b>nrRYGB N = 92</b>	<b>rRYGB N = 96</b>	<b>p</b>
Leptin, fasting (ng/ml), mean±SD	14.3 ± 1.5	<b>14.8 ± 1.4</b>	0.020*
Ghrelin, fasting (pg/ml), mean±SD	228.4 ± 42.5	<b>243.8 ± 42.3</b>	0.014*

# Results

## Volumetry@3 years:

- rRYGB had **significantly lower**
  - Total gastric pouch volume,
  - Gastrojejunostomy diameter
  - Alimentary limb diameter

Volumes	nrRYGB	rRYGB	<i>p</i>
Total pouch Volume (ml)	72.4 ± 6.1	<b>55.7 ± 6.9</b>	< 0.001*
Anastomosis size (cm)	3.2 ± 0.5	<b>1.8 ± 0.5</b>	< 0.001*
ITM, n (%)	37 (30.8%)	45 (37.5%)	0.341
Migration distance of ITM (cm)	1.2 ± 0.5	1.2 ± 0.5	0.522
Diameter of alimentary limb (cm)	3.3 ± 0.6	<b>2.1 ± 0.5</b>	< 0.001*

# Results

## Volumetry

Specific in rRYGB:

<b>Volumes</b>	<b>6 months</b>	<b>3 years</b>	<b><i>p</i></b>
Volume of the pouch above the ring (ml)	25.7 ± 3.9	41.9 ± 5.5	< 0.001*
Volume of the pouch below the ring (ml)	16.9 ± 3.1	14.3 ± 3.3	< 0.001*
Distance between the band and the anastomosis (cm)	2.4 ± 0.5	1.5 ± 0.5	< 0.001*



# Results



# Results

Food Tolerance (up to 27, higher indicate excellent eating quality)

Dumping (>7 Sigstad score was considered positive for dumping syndrome)

	<b>nrRYGB</b>	<b>rRYGB</b>	<i>p</i>
<b>At 3-years of follow-up</b>	<b>N = 92</b>	<b>N = 96</b>	
Patients with Sigstad score $\geq 7$ , n (%)	51 (55.4)	38 (39.6)	0.042*
FT score at 3 years, mean $\pm$ SD	24.0 $\pm$ 1.4	22.5 $\pm$ 2.5	< 0.001*

# Conclusion

## The ringed RYGB @ 3 years

Better WL in terms of higher %EWL and %TWL

Less Weight recurrence

Maintained smaller volumes of the pouch

Lower incidence of dumping

**Nevertheless,**

**Worse** food tolerance score

**Higher** leptin and ghrelin levels

# Thank you

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