

Single Port Sleeve Gastrectomy : Experience after 3000 procedures

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Conflict of Interest Disclosure

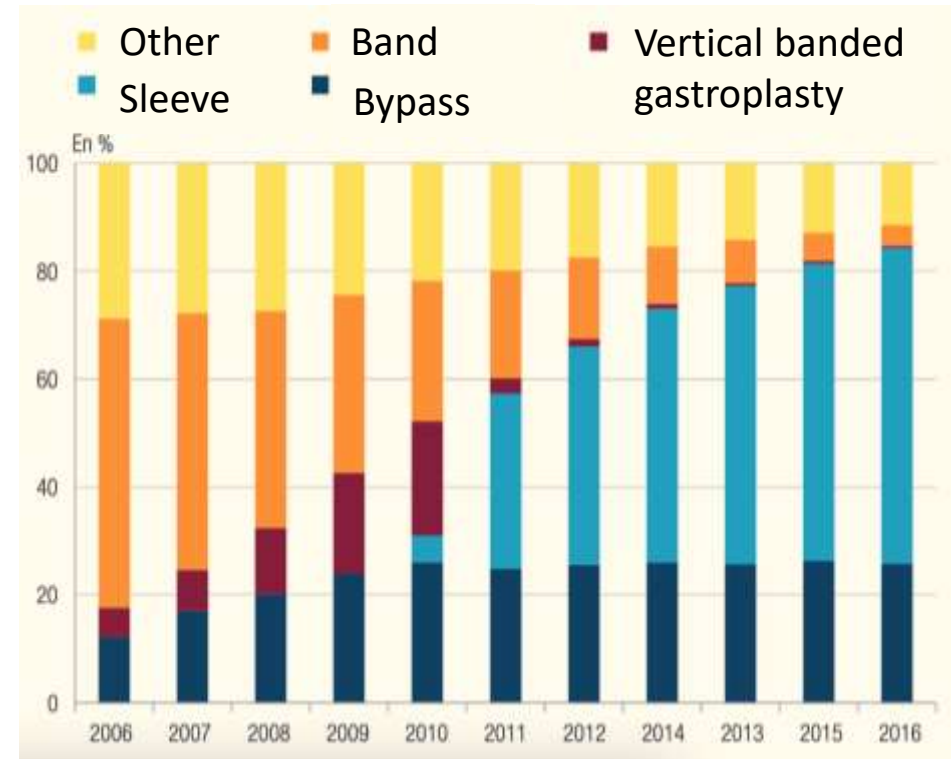
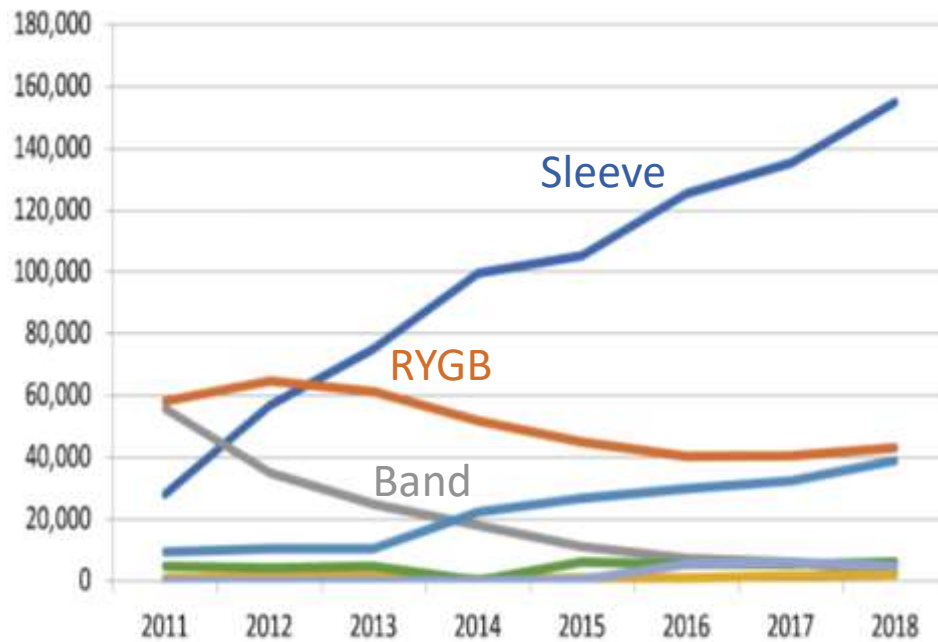
I have no potential conflict of interest to report :

transparence.sante.gouv.fr

Introduction

Sleeve gastrectomie

Procedure numbers



ASMBS
English WJ. SOARD 2020

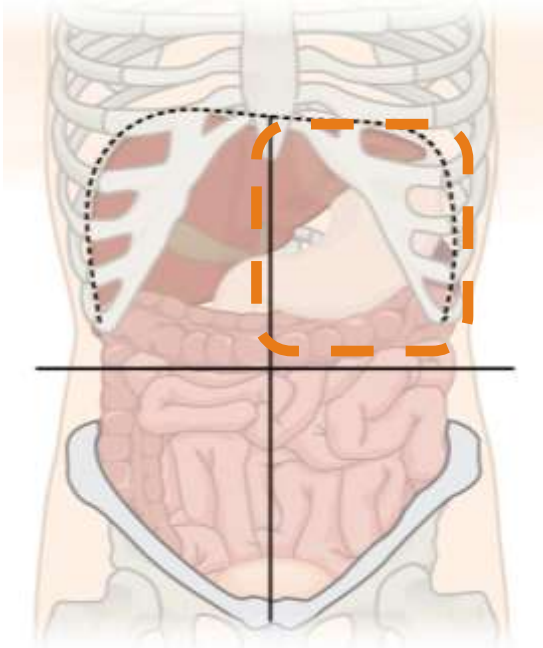


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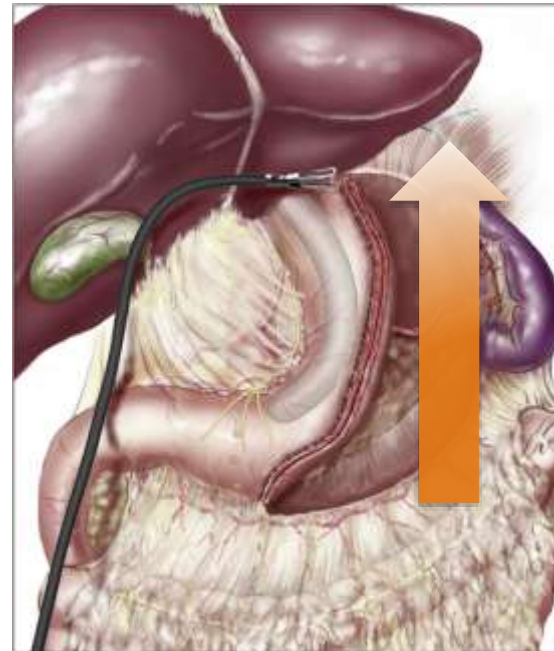


Introduction

Single Port Sleeve gastrectomie (SPSG)



One abdominal quadrant



Limited movements



Requires specimen extraction

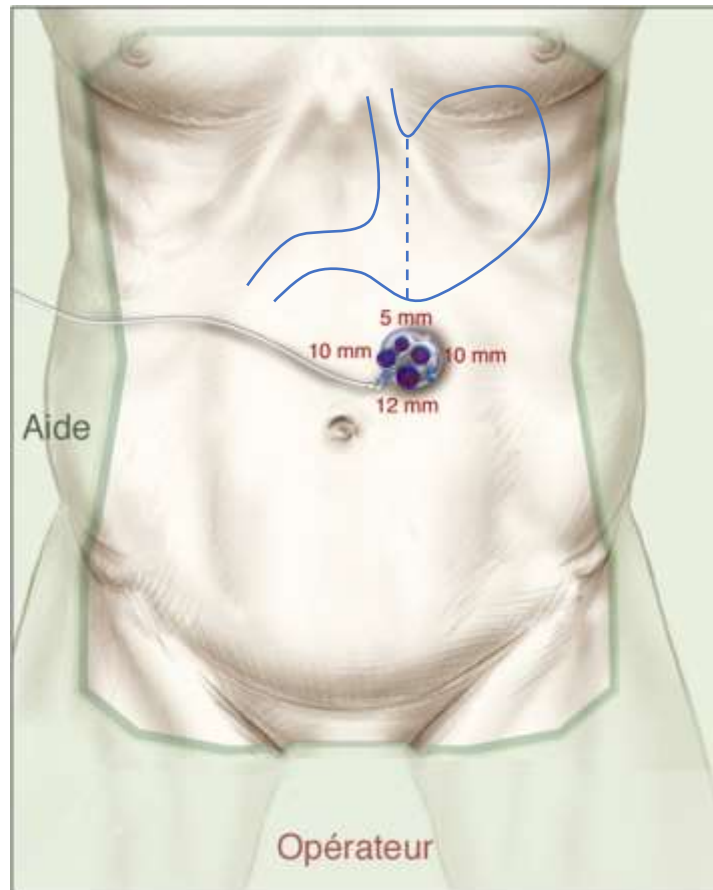
Criticisms

Complexity of triangulation
Difficult exposure
Suboptimal sleeve construction?
Incisional hernia ?



Methods

Surgical procedure



> 3500 patients

Standardized and reproducible technique (left hypochondrium)

Transumbilical approach in selected patients

Tranchart H. Surg Endosc 2022

Lainas P. Obes Surg 2021

Tranchart H. Surg Endosc 2020

Lainas P. Obes Surg 2018

Gaillard M. SOARD 2016

Pourcher G. SOARD 2013

Methods

Surgical procedure



Results

August 2010 to December 2022

3000 consecutive patients

Demographics

Age (years) \pm SD	40.1 \pm 12.3
Gender (F/M)	2535/465

Données morphologiques

Weight (kg), median [95%CI]	118 [84-222]
BMI (kg/m ²), median [95%CI]	45 [34-88]
BMI > 50 kg/m ²	513 (17.7%)

Surgical history

Total	1485	49.5%
UGI procedure	657	21.9%

Comorbidity

Diabetes	444	14.8%
Hypertension	1080	36.0%
Dyslipidemia	582	19.4%
OSAS	1683	56.1%

Results

3000 consecutive patients

Operative outcomes		
Single port	2853	95.1%
Additional trocar	147	4.9%
Reason		
Exposure	99 / 147	67.3%
Adhesiolysis	37 / 147	25%
Bleeding	11 / 147	7.7%
Conversion to laparotomy	1	0.03%
Operative duration (median and [95%CI])	86 min	[45 – 180]

Results

3000 consecutive patients

Postoperative outcomes < 30 days		
Mortality	1	0.03%
Postoperative morbidity	225	7.5%
Reintervention	67	2.2%
Bleeding / Hematoma	45	1.5%
Staple line leak	57	1.9%

Results

2305 patients follow-up > 1 year

	1 year	3 years	5 years
Weight loss			
%EWL, mean \pm SD	71% \pm 27%	68% \pm 26%	59% \pm 29%
Comorbidity remission			
Diabetes (%)	36%	-	-
Hypertension (%)	45%	-	-
Dyslipidemia (%)	25%	-	-
OSAS (%)	41%	-	-
Incisional hernia, n (%)	90 (3.9%)	-	-

Discussion

What have we learned?

Decrease of operative duration

2010-2015 : 112 min [50-360]
2016-2022 : 75 min [45-150]

+ 15 minutes



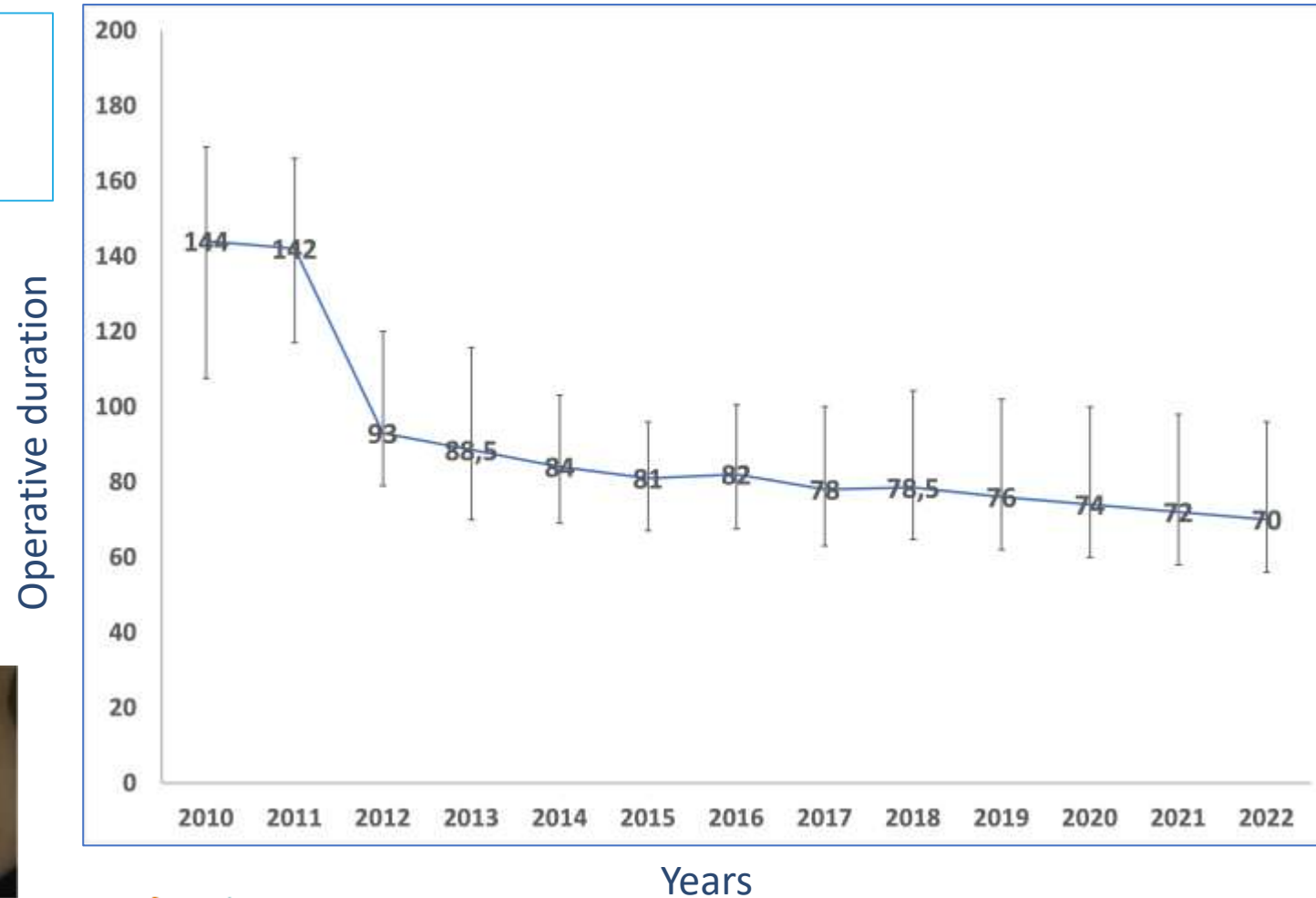
Antoine Béclère

VS.



Amiens

Tranchart H. Surg Endosc 2020



Discussion

What have we learned?

Interest in multi-operated patients

Obesity Surgery (2018) 28:874–876
<https://doi.org/10.1007/s11695-017-3080-0>

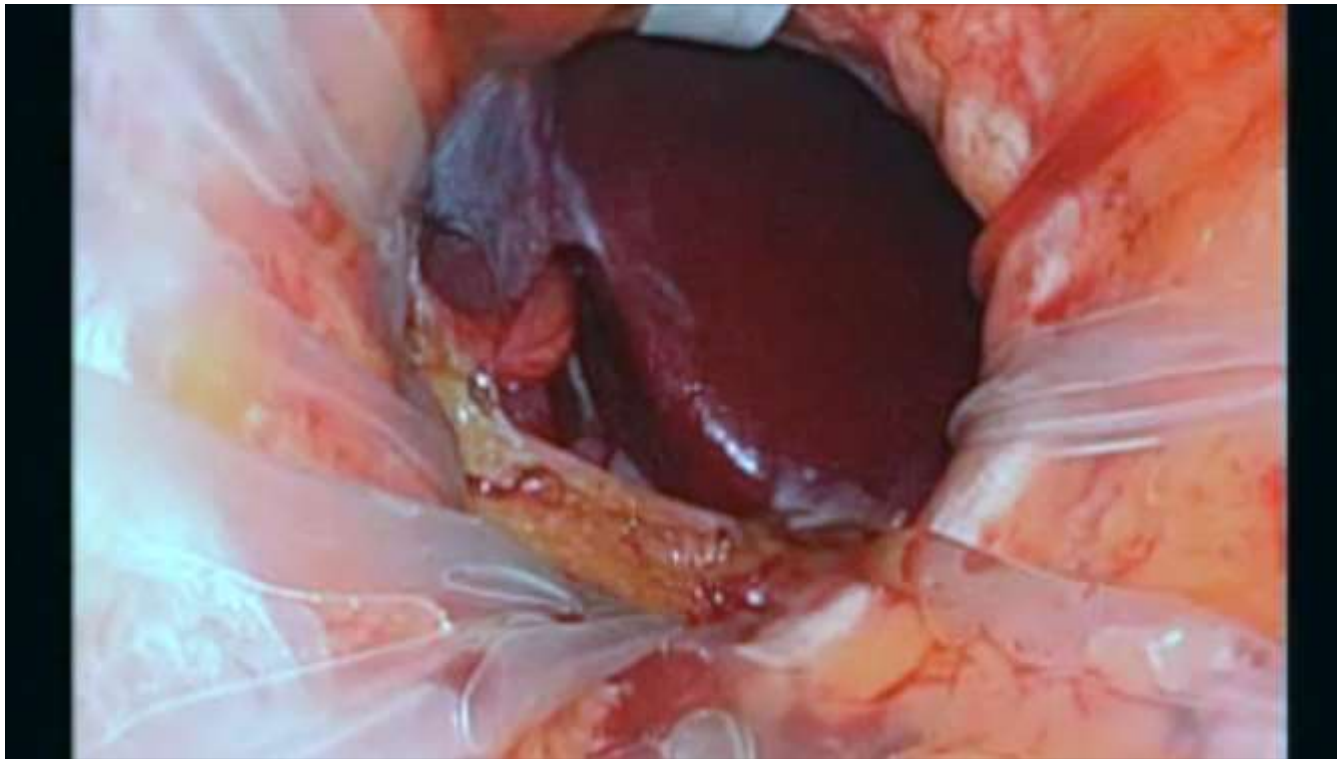


BRIEF COMMUNICATION



Safety and Feasibility of Single-Port Sleeve Gastrectomy Following Liver Transplantation

Panagiotis Lainas^{1,2,3} · Adrien Dupond-Athenor¹ · Hadrien Tranchart^{1,2} · Ibrahim Dagher^{1,2}



Discussion

What have we learned?

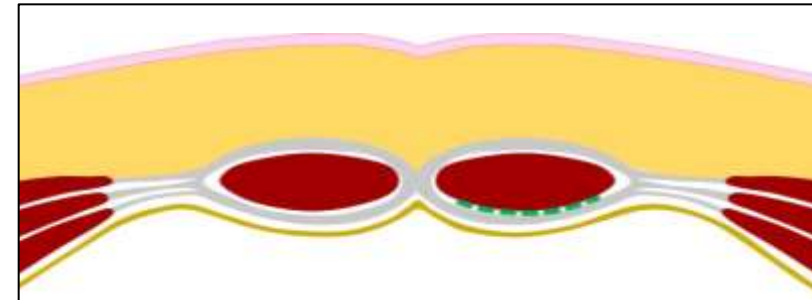
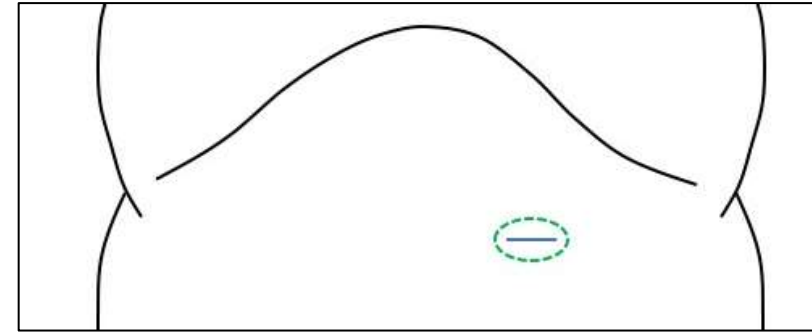
Parietal wall

Systematic CT-scan one year after surgery
Research of any abdominal wall gap
184 hernias / 1000 patients (18.4%)

**Trocar Site Hernias in Bariatric Surgery—an Underestimated Issue:
a Qualitative Systematic Review and Meta-Analysis**

Pooled incidence of 24.5%

Karampinis I. Obes Surg 2019



Reinforcement with prosthetic patch:
6% incisional hernias on 1-year CT scan
PRISM (ISRCTN 52462725)

Tranchart H. Surg Endosc 2022

Discussion

What have we learned?

Umbilical approach

25% of patients since 2018

Selection criteria:

- theoretical site and umbilicus < 5cm
- female gender (gynoid obesity)
- height < 1m70

Use of long instruments

More difficult left crus dissection, but easier stapling on antrum



No difference in postoperative results
Incisional hernia rate being explored

Discussion

Advantages over laparoscopy

70 articles

1 small trial :

Morales-Conde S. SOARD 2017

15 patients per group

ONESLEEVE study (PI: Hadrien Tranchart)

Non-randomized prospective comparative study

Primary endpoint:

Multimodal score (aesthetics, pain, QOL) at 1 month

Inclusions completed, final results pending

Conclusions

- SPSG routinely feasible in all patients through left hypochondrium
- Results at least comparable to conventional laparoscopy
- Benefits yet to be demonstrated
- Trans-umbilical approach feasible in selected patients ($\approx 25\%$)
- Incisional hernia risk by umbilical approach remains to be explored

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