

Swallowable Intra-gastric Balloon

First Argentinian Experience

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Dr. MARIANO PALERMO

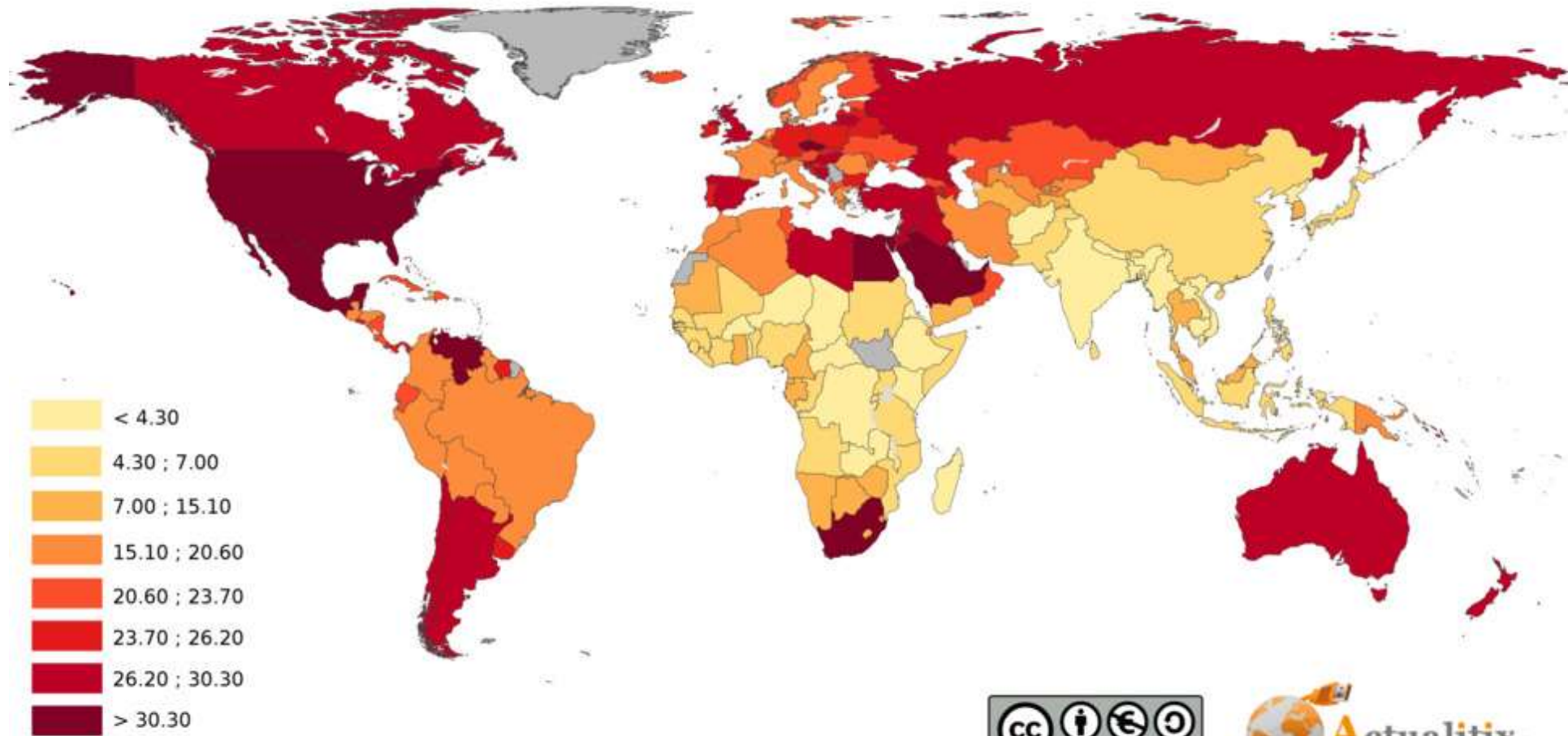
MD, PhD, FACS

University of Buenos Aires

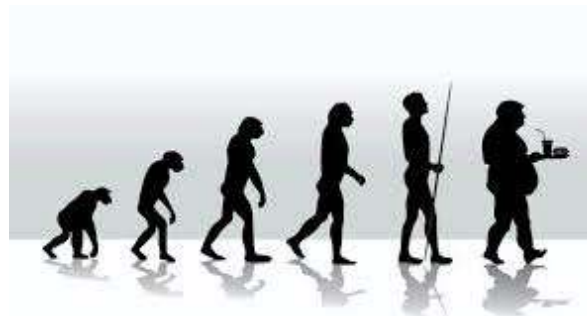
Bariatric Surgeon. Buenos Aires, Argentina.



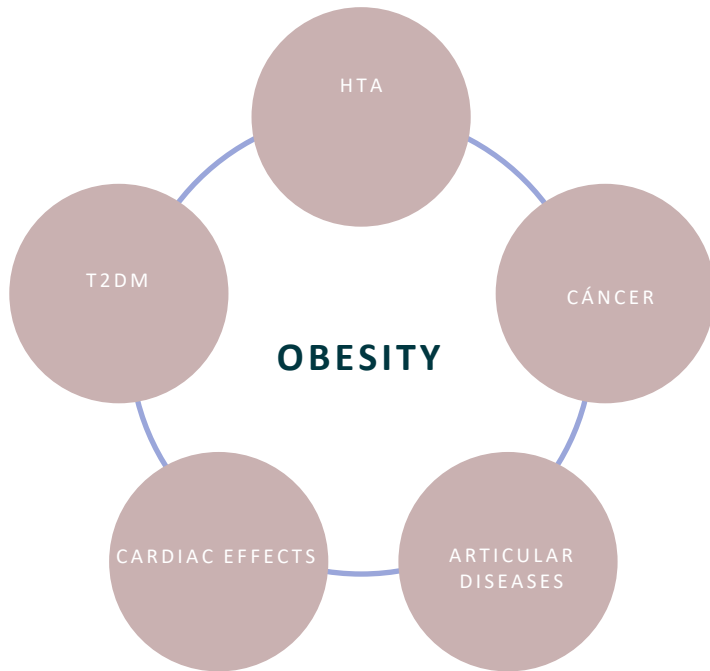
Obesidad en los adultos (%)



Fuente : CIA - 2013
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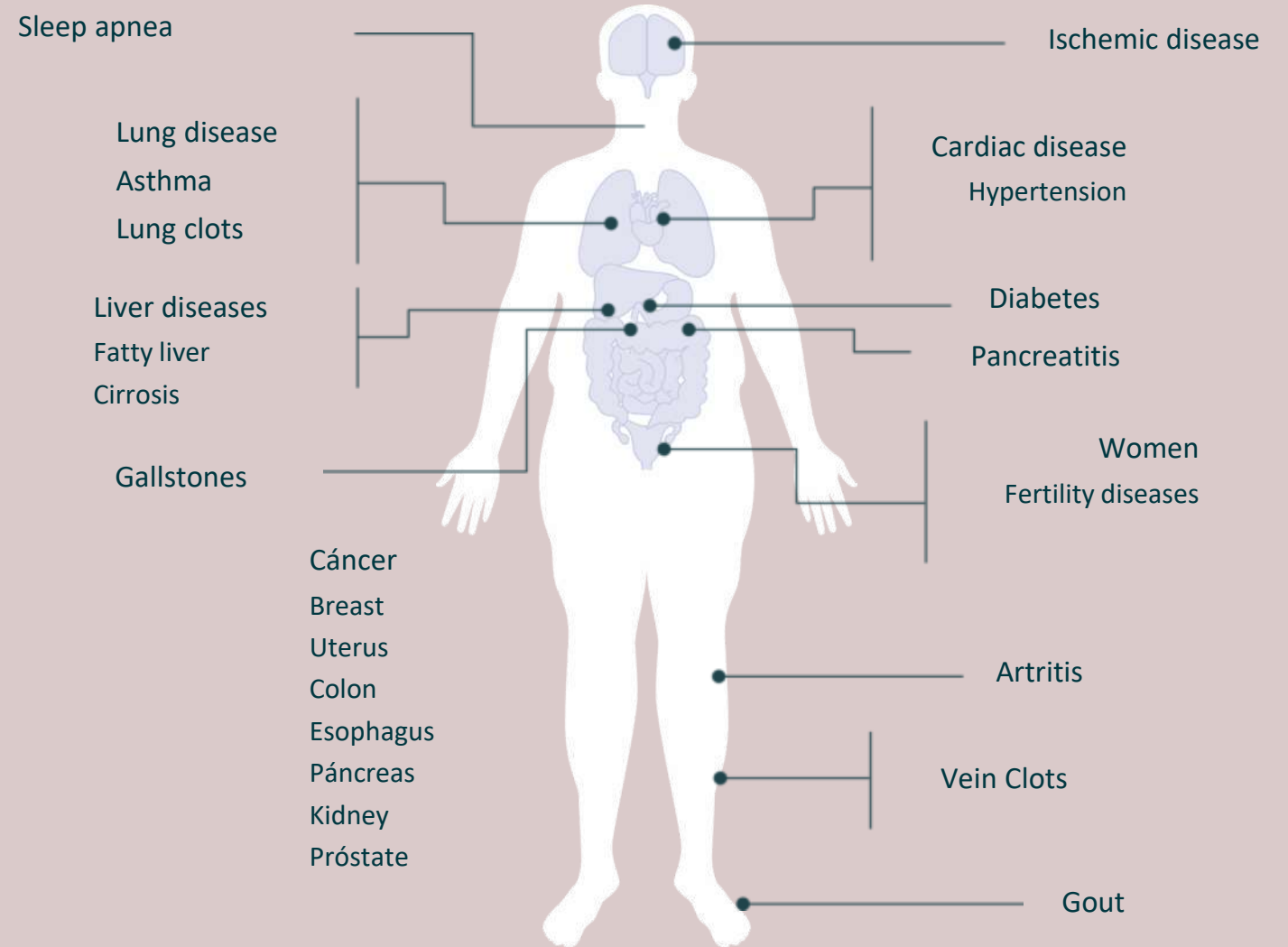


Effects of the overweight



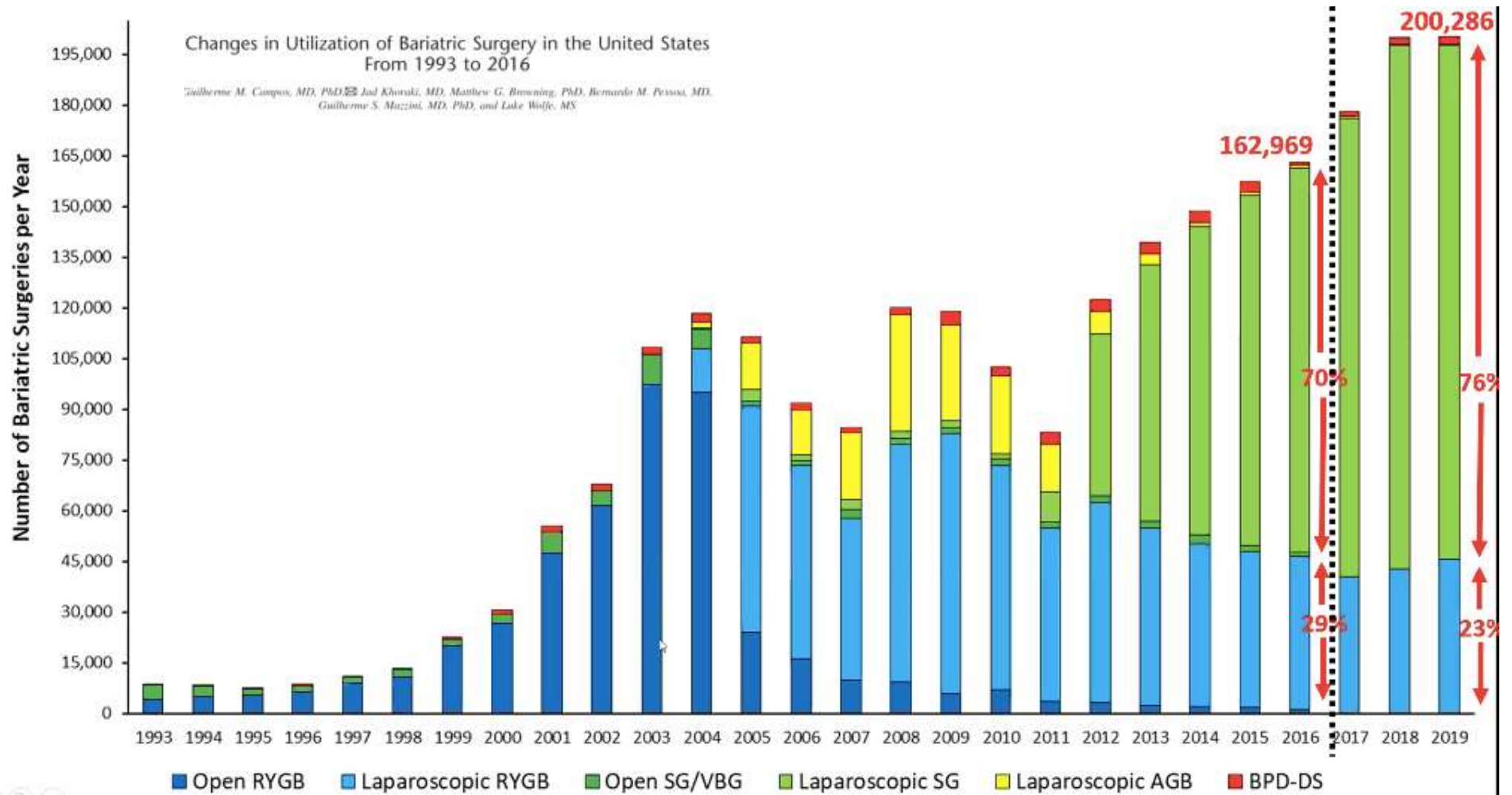
1. Efectos del sobrepeso y la obesidad en la salud
<https://www.cdc.gov/healthyweight/effects/index.html>

COMORBIDITIES RELATED TO OBESITY AND OVERWEIGHT

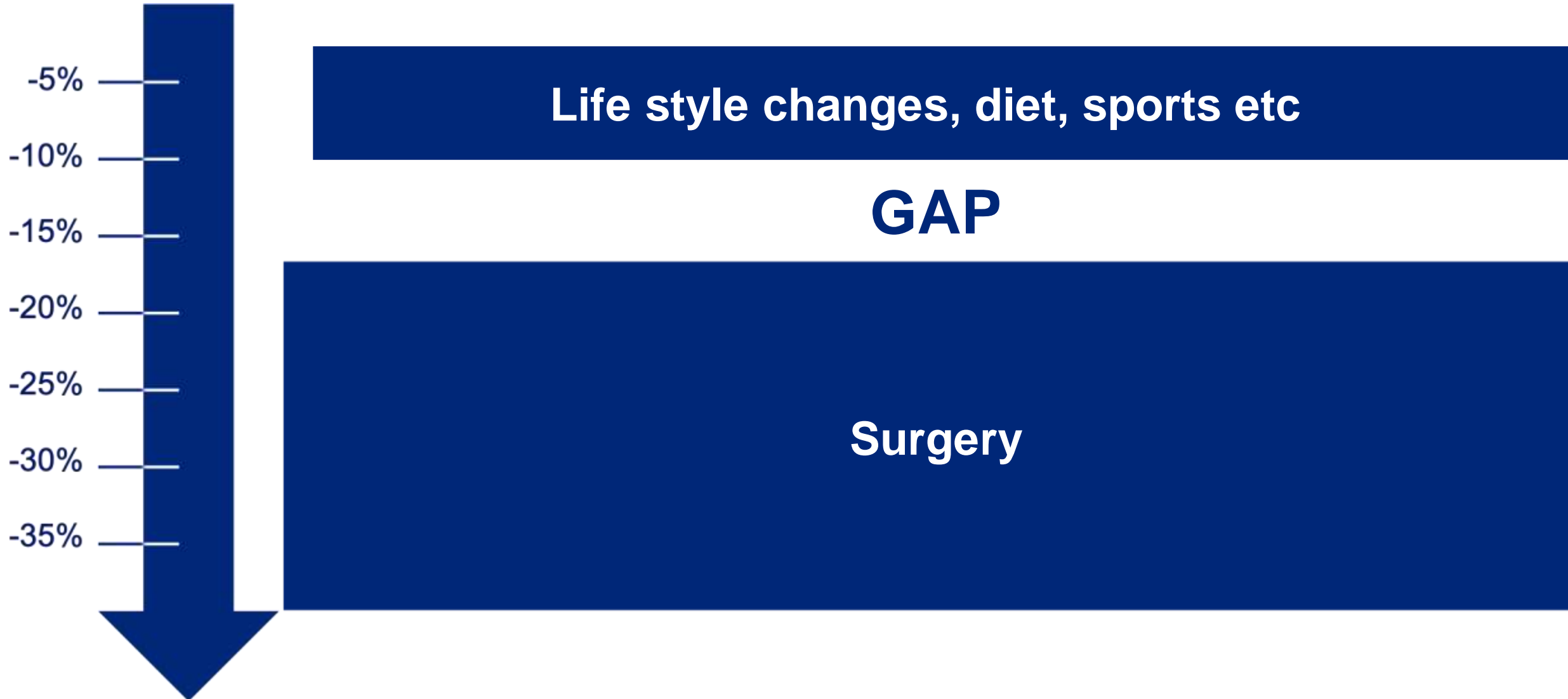


Fuente: Adaptado del Centro Rudd para Política Alimentaria y Obesidad de la Universidad de Yale

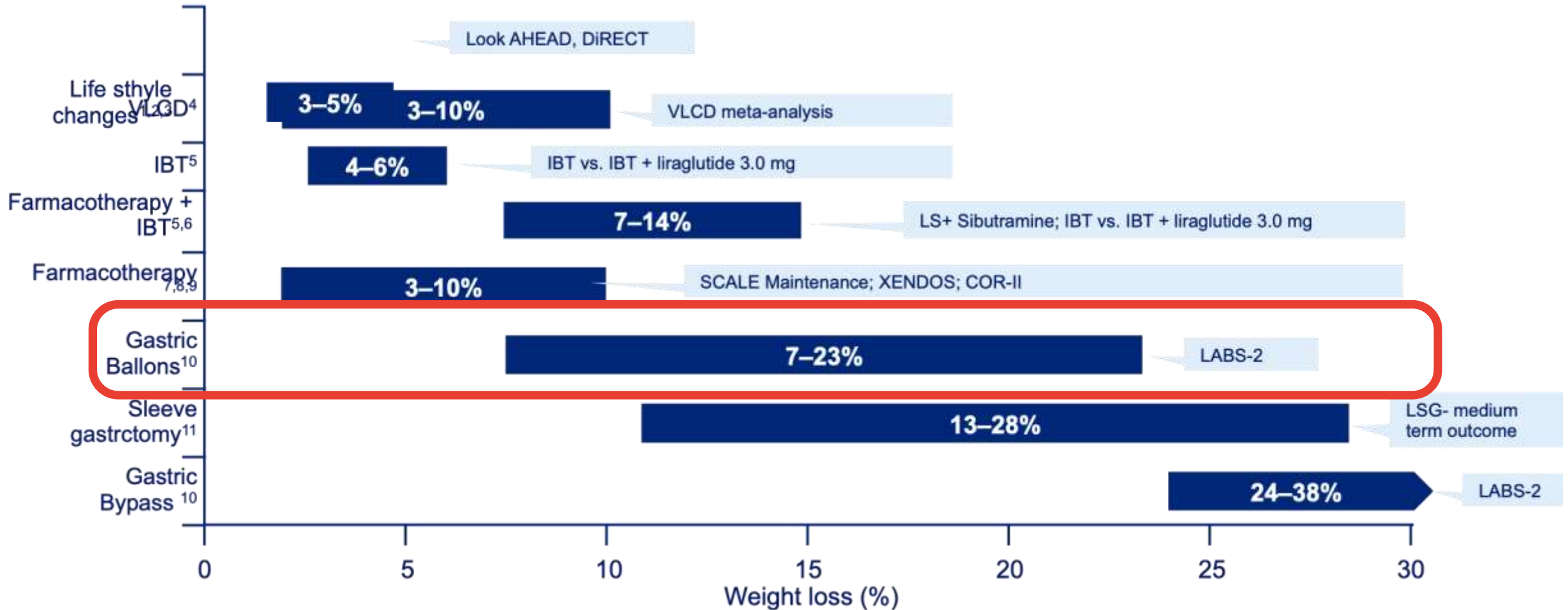
ASMBS. Number of bariatric surgeries 2017-2019 (Published 2021)



There is a Gap in the weight control treatment



Efficacy of different loose weight methods



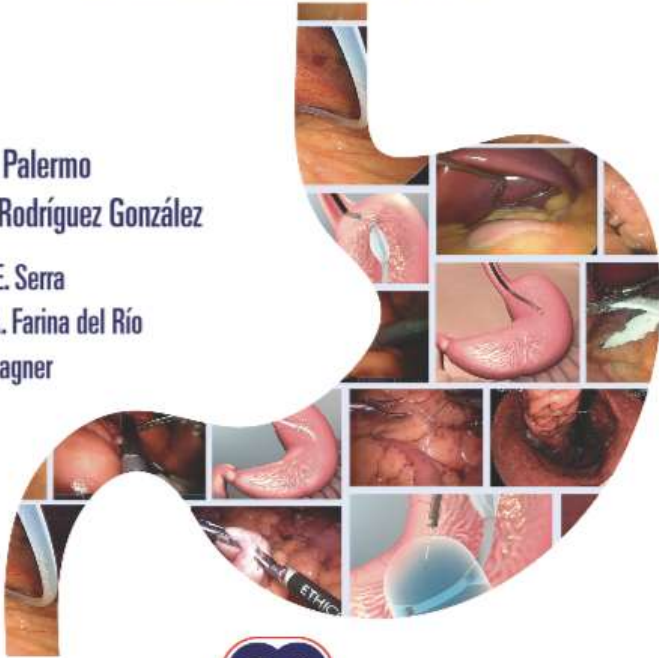
IBT, intensive behavioural therapy; LABS, Longitudinal Assessment of Bariatric Surgery; LS, lifestyle; VLCD, very low calorie diet.

1. Look AHEAD. *Arch Intern Med* 2010;170:1566–75; 2. Wing RR et al. *Diabetes Care* 2011;34:1481–6; 3. Lean MEJ et al. *Lancet Diabetes Endocrinol* 2019;7:344–55; 4. Tsai AG and Wadden TA. *Obesity* 2006;14:1283–93; 5. Wadden TA et al. *Obesity (Silver Spring)* 2019;27:75–86; 6. Wadden TA et al. *N Engl J Med* 2005;353:2111–20; 7. Wadden TA et al. *Int J Obes (Lond)* 2013;37:1443–51 8. Torgerson JS et al. *Diabetes Care* 2004;27:155–61; 9. Apovian CM et al. *Obesity* 2013;21:935–43; 10. Courcoulas AP et al. *JAMA* 2013;310:2416–25; 11. Berry MA et al. *Obes Surg* 2018;28:649–55.

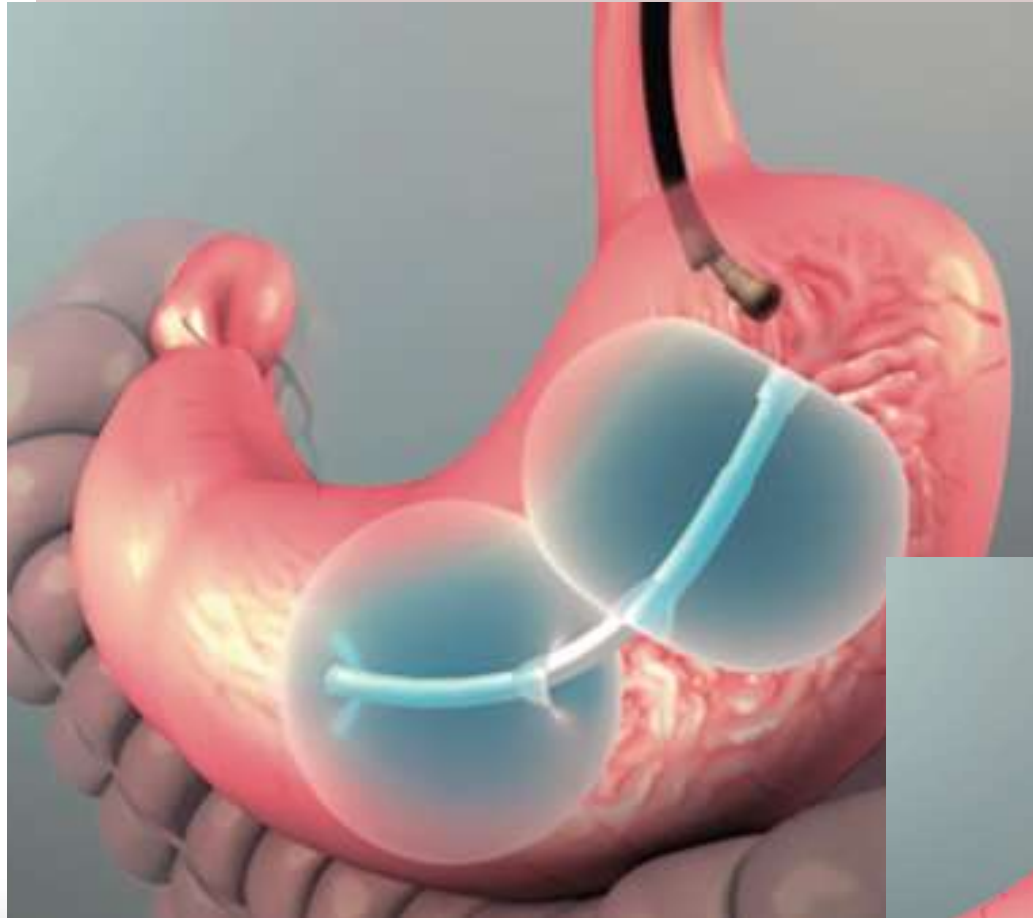
ATLAS DE CIRUGÍA BARIÁTRICA Y METABÓLICA

Abordaje laparoscópico, endoscópico y técnicas miniinvasivas

Mariano Palermo
Agustín Rodríguez González
Edgardo E. Serra
Miguel A. Farina del Río
Michel Gagner



Endoscopic Balloons



Balón intragástrico

Jaime Ponce, Gontrand López Nava

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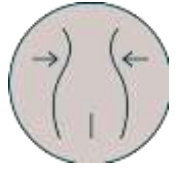
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Swallowable Intragastric Balloon: First Consecutive Experience in Argentina

Mariano Palermo, MD, PhD^{1,2} and C. Federico Davrieux, MD¹

Swallowable intragastric balloon PROGRAM



Average of weight loose: **10-15 %**^{1,2}



The program is into a **multidisciplinary** team.*

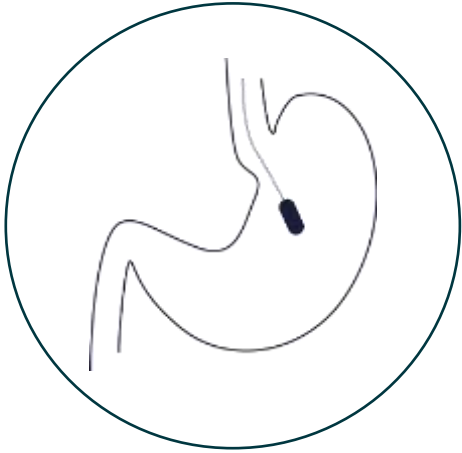


Placement:
Without surgery, endoscopy and anesthesia

1. Ienca et al. Obes Surg. 2020 2. Vantanasiri et al. Obes Surg. 2020

*El Balón Elipse de Allurion debe combinarse con un programa supervisado de nutrición y modificación de la conducta. Allurion recomienda un seguimiento de 6 meses. La duración del programa es a discreción del médico y puede variar en función del perfil del paciente. **En casos aislados, el Balón Elipse de Allurion puede requerir endoscopia u otra intervención quirúrgica para su extracción

A



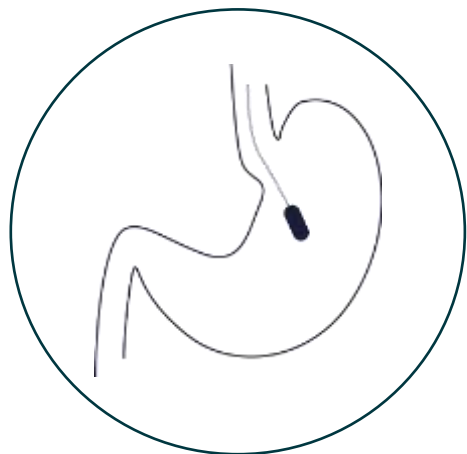
01 - Swallow

First X Ray



15 MIN

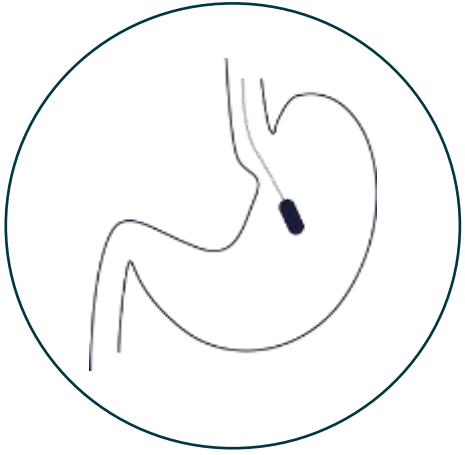
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01 - Filling the balloon

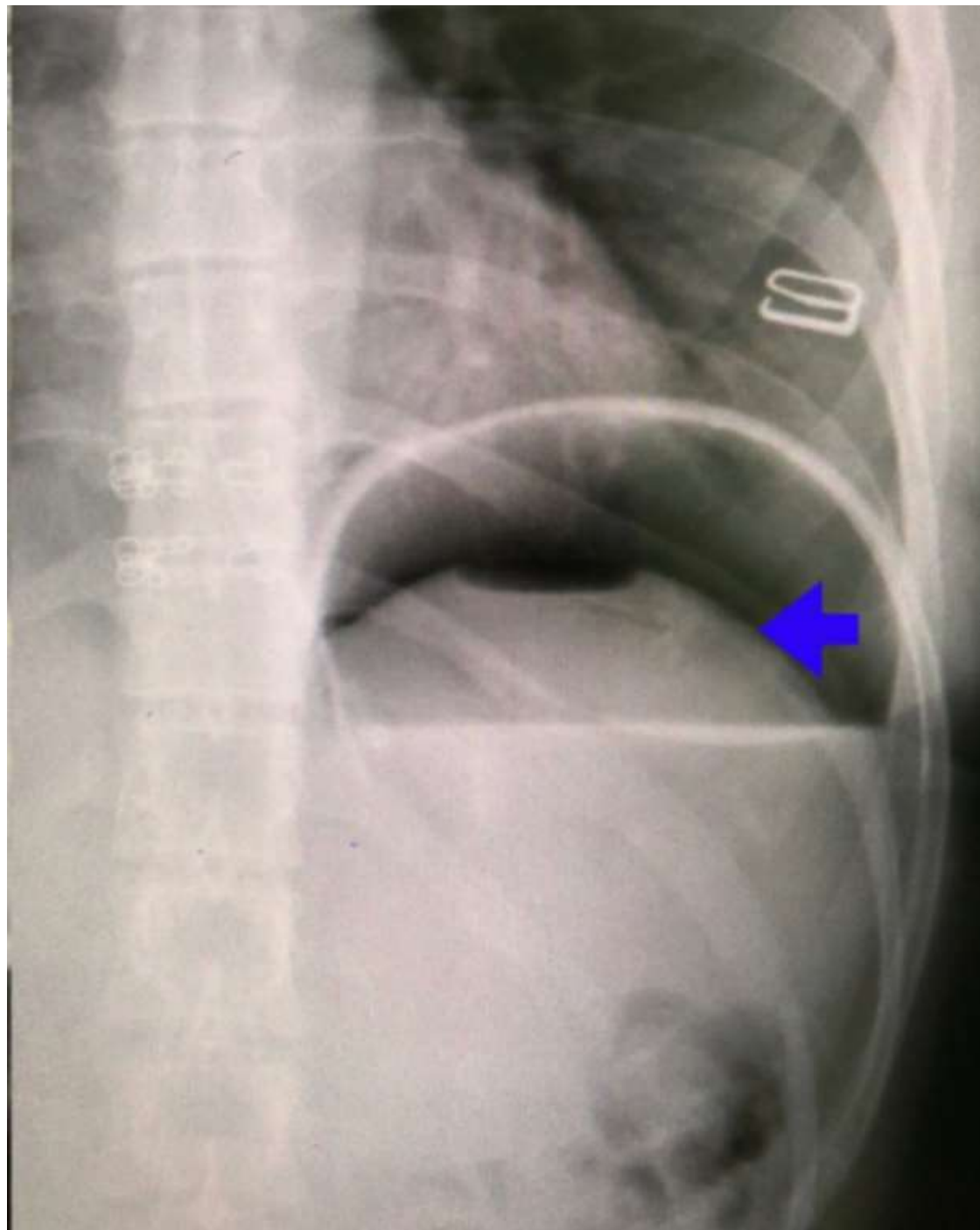


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01 - Balloon insufflated

2nd X Ray control



A



Body composition Scale





Health tracker

APP



Siga perdiendo peso después de 6 meses con un segundo Balón Elipse de Allurion

1 Year

	 Balloon			Average (% lost weight/kg)	MAX lost (% lost weight/kg)
Change habits	1 1st Balloon		-12,4 %	-14,4 % -14,7 kg	-22,3 %
Nutricionist	2 Pause			+1,4 kg	
F/U	3 2nd Balloon			-10,0 % -8,8 kg	-20,9 %
				Total (2 balloons in a row) -22,8 % -22 kg	-40,9 % -48,7 kg

* Para los siguientes balones, es fundamental que el paciente siga cumpliendo los requisitos de las instrucciones de uso

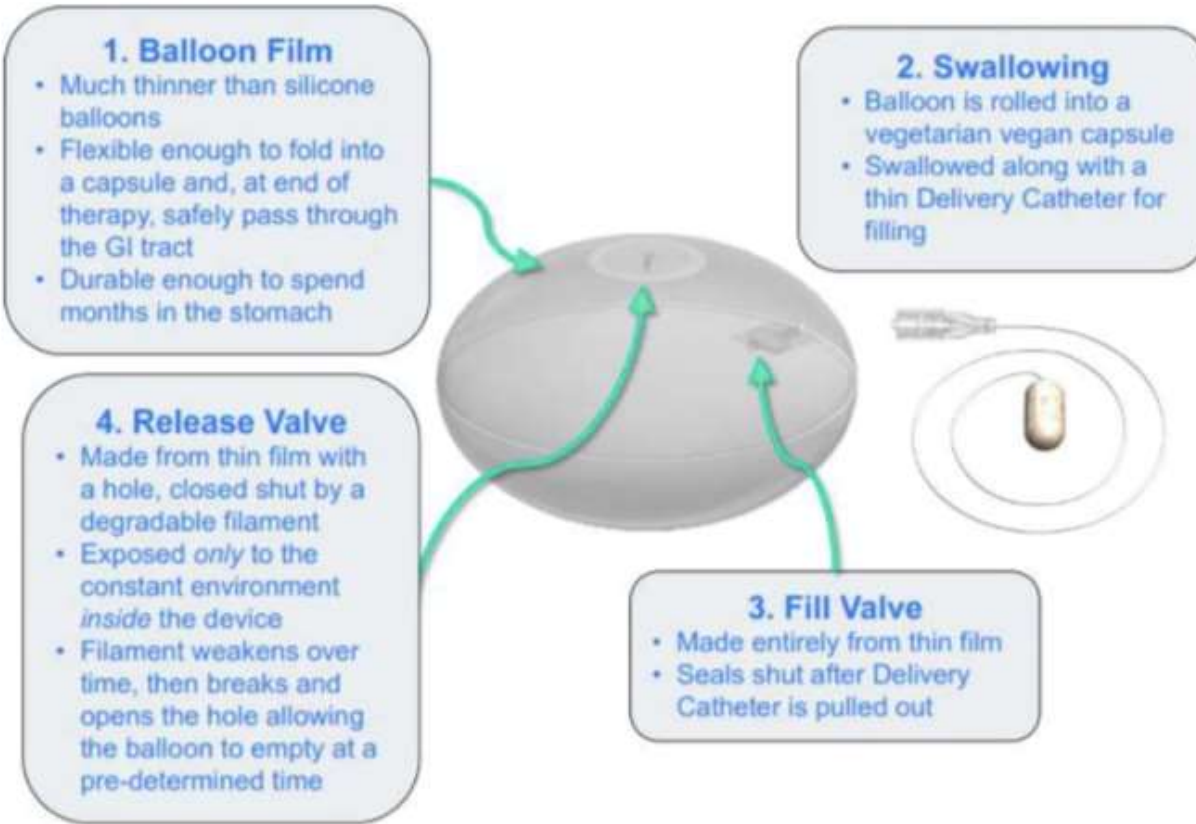
Side effects

- ▶ Sickness
 - ▶ Vomits
 - ▶ Epigastric abdominal pain
 - ▶ Headache
-
- ▶ This Symptoms are observed for 3/4 days



Evidence

Key innovations



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Mariano Palermo, MD, PhD^{1,2} and C. Federico Davrieux, MD¹

ORIGINAL CONTRIBUTIONS



The Procedureless Elipse Gastric Balloon Program: Multicenter Experience in 1770 Consecutive Patients

R. Ienca¹ · Mohammed Al Jarallah² · Adelardo Caballero³ · Cristiano Giardiello⁴ · Michele Rosa⁵ · Sébastien Kolmer⁶ · Hugues Sebbag⁷ · Julie Hansoulle⁸ · Giovanni Quartararo⁹ · Sophie Al Samman Zouaghi¹⁰ · Girish Juneja¹¹ · Sébastien Murcia¹² · Roman Turro¹³ · Alberto Pagan¹⁴ · Faruq Badiuddin¹⁵ · Jérôme Dargent¹⁶ · Pierre Urbain¹⁷ · Stefan Paveliu¹⁸ · Rita Schiano di Cola⁴ · Corrado Selvaggio⁵ · Mohammed Al Kuwari¹⁹



Surgery for Obesity and Related Diseases 13 (2017) 1174–1182

SURGERY FOR OBESITY AND RELATED DISEASES

Original article

The Elipse Balloon, a swallowable gastric balloon for weight loss not requiring sedation, anesthesia or endoscopy: a pilot study with 12-month outcomes

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^aDepartment of Surgery, Iatriko Medical Center, Palaio Faliro, Greece

^bWeight Management Program, Holyoke Medical Center, Holyoke, Massachusetts

Received October 4, 2016; accepted February 16, 2017

OBES SURG
DOI 10.1007/s11695-017-2877-1



ORIGINAL CONTRIBUTIONS

Safety and Efficacy of a New Swallowable Intra-gastric Balloon Not Needing Endoscopy: Early Italian Experience

A. Genco¹ · I. Ernesti² · R. Ienca² · G. Casella¹ · S. Mariani² · D. Francomano² · E. Soricelli¹ · M. Lorenzo³ · M. Monti¹

First and initial experience in Argentina

n = **377 patients** were recruited

- 79% were women / 21% were men (± 0.42).

- The mean age was 39 (range 16 to 77, ± 20.01).

- The average BMI was 31.5 (range 27 to 45, ± 3.17).

- 8 % Secuencial balloons



The associated **co-morbidities** were:

- hypertension (HT) 48%
- dyslipidemia (DLP) 46%,
- diabetes (DM) or insulin resistance 44%.

Regarding the procedure, the **time** required was **19 minutes** (range 11 to 37 minutes, ± 7.02)



Implantation in 100% of the patients.

- Swallowing by the patients: 19,4 %
- Operator Assistance: 55.5 %
- Stylet: 25 %



Complications reported were:

- Abdominal pain (in epigastrium) (28, 8%, ± 0.40),
- Sickness (31, 60%, ± 0.49),
- Vomiting (23, 38%, ± 0.49),
- Headache (12, 36%, ± 0.48).
- Gastroesophageal reflux (19, 29%, ± 0.45).

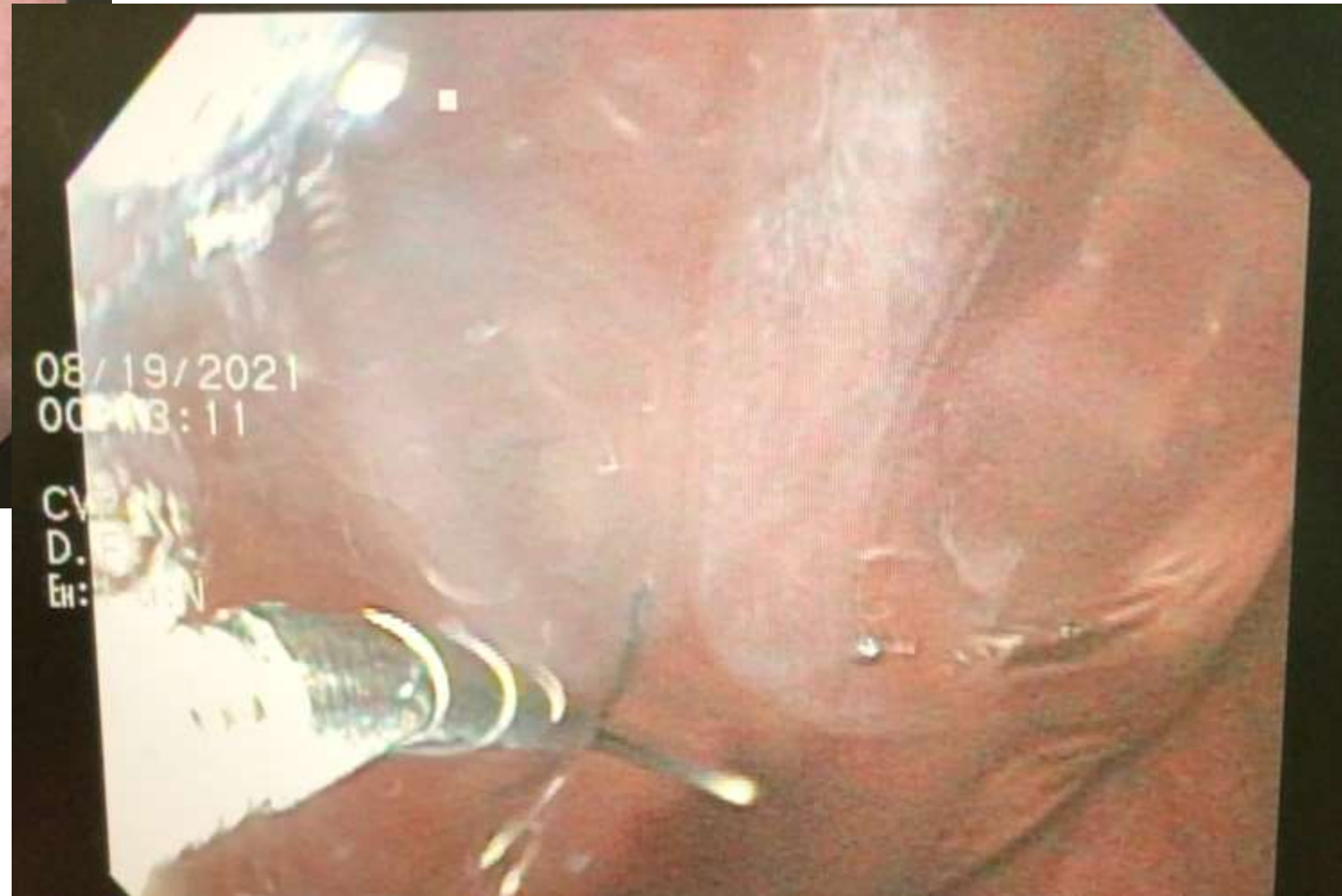
The duration of symptoms was 48 hours on average.

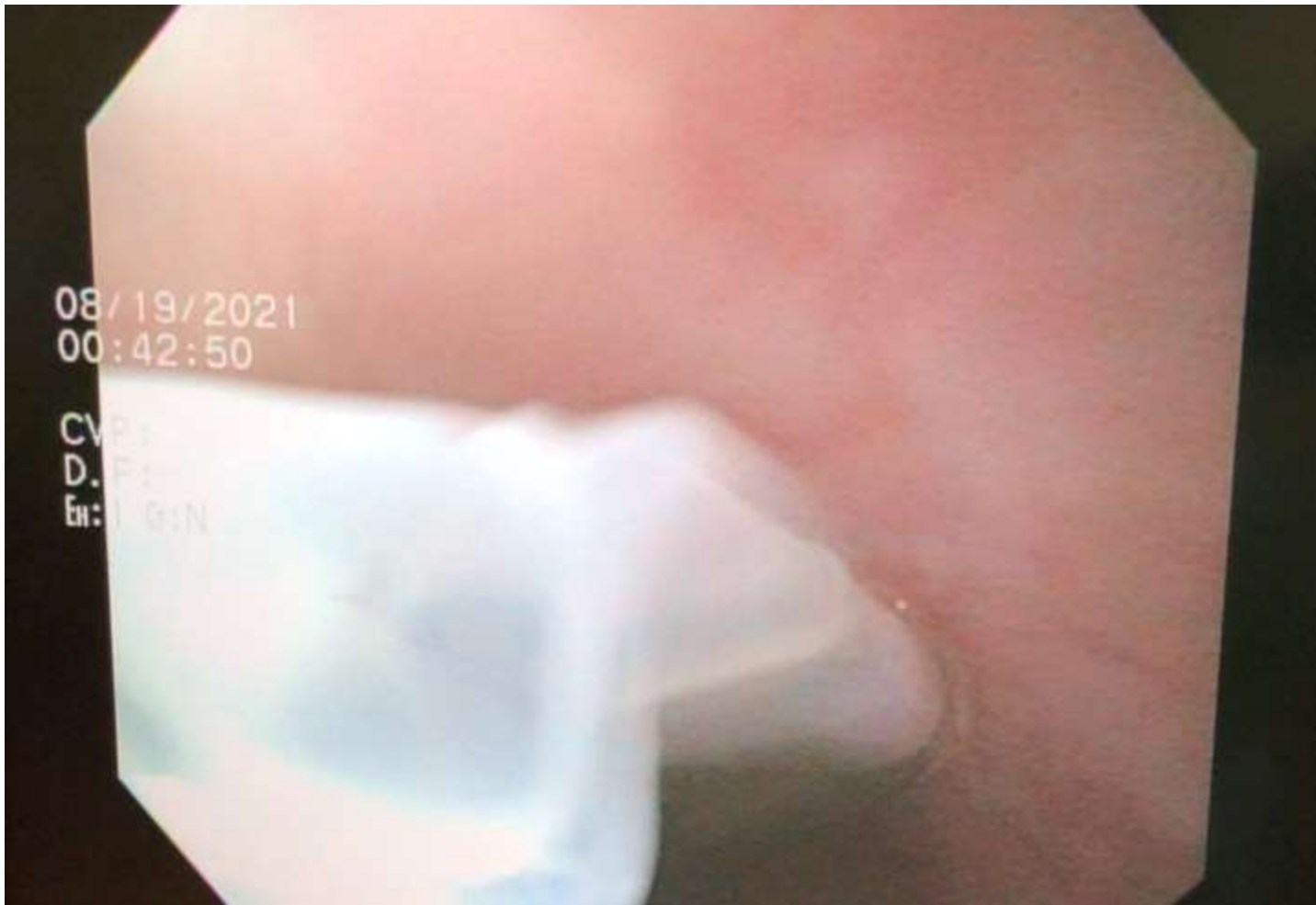


Complications reported were:

- 4 cases, the balloon was removed due to intolerance.
- 1 case Hyperinsufflation
- 2 cases the catheter was broke during the extraction
- No mortality was reported.











Conclusions

- **Intragastric balloons** have a role in the treatment of overweight and obesity.

In the gap between **BMI 27 - 35** and over (Secuencial balloons)

- Its allows to WL between 10-15% (of total weight)
- Low complications rate



Conclusions II

- **Intra-gastric Balloon: The come back?**
- **YES:** Due to:
 - Easy placement
 - No endoscopy
 - No anesthesia
 - No surgery
 - Outpatient





GRAZIE



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