

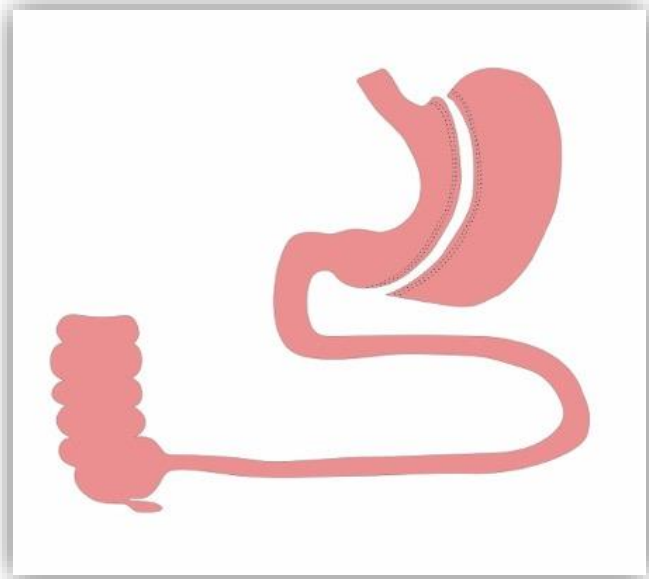
# SG+TB(OATB,SASI) vs SG :A Randomized Clinical Trial One Year Outcome

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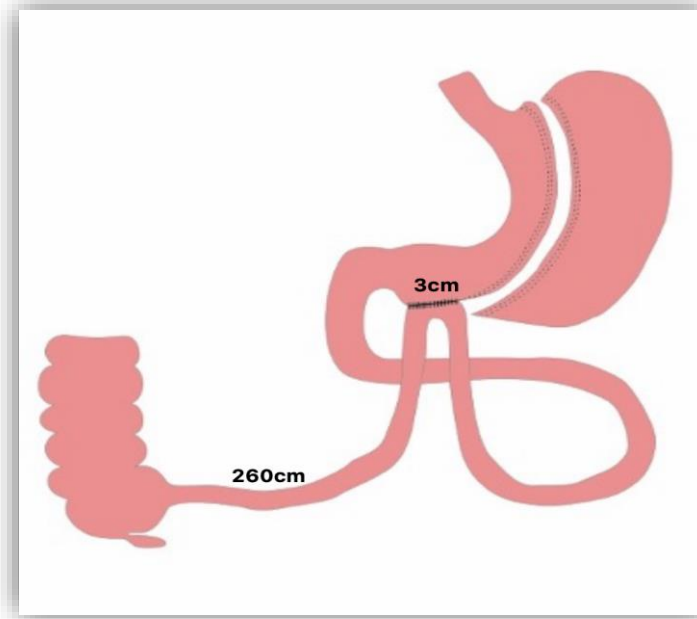
I have no potential conflict of interest to report

# Surgical procedures



Sleeve gastrectomy (SG)  
36 Fr

VS



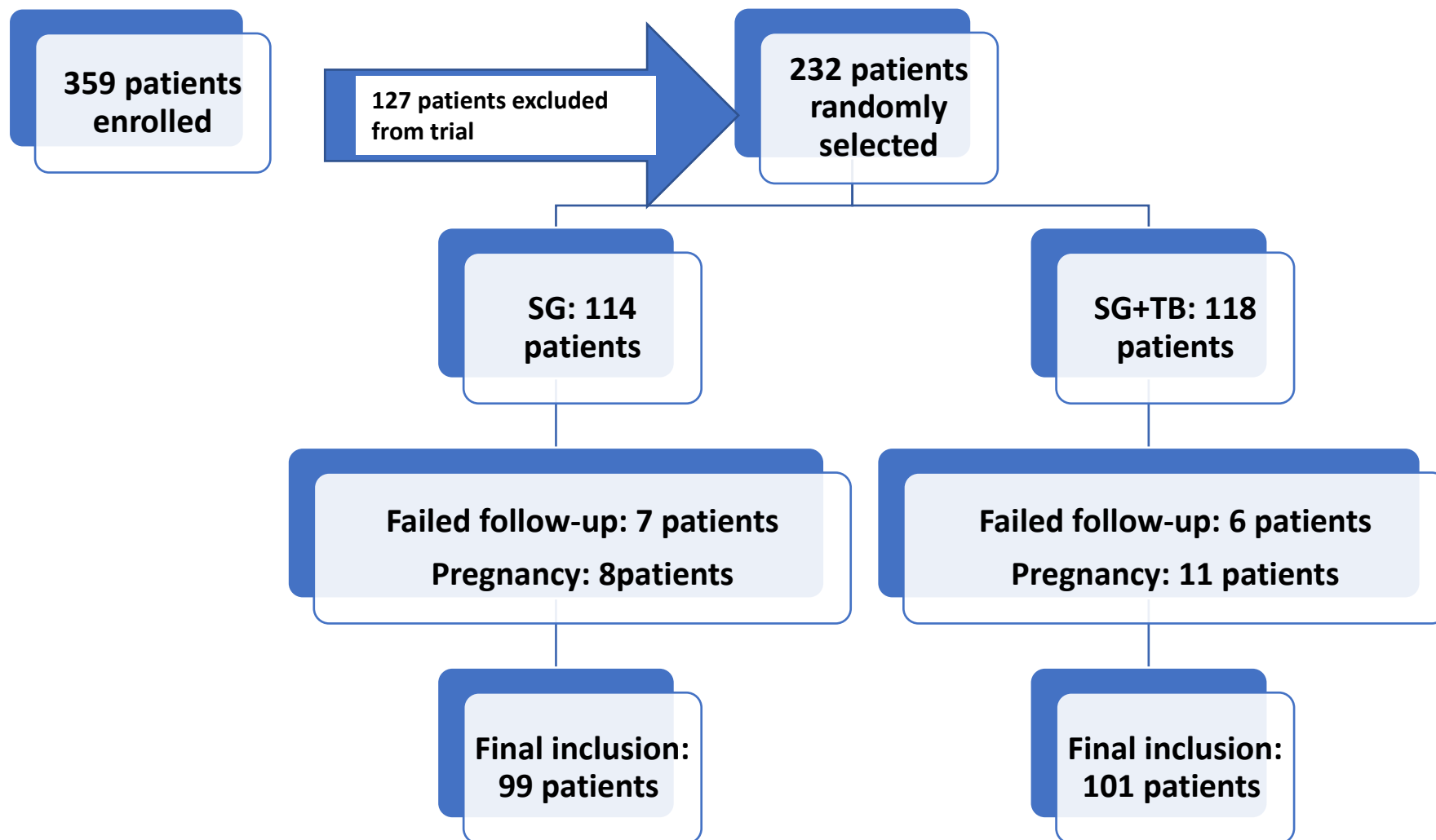
SG+TB (OATB ,SASI)

36 Fr sleeve  
GI anastomosis: 3 cm  
Common limb: 260 cm

# Inclusion criteria

1. Patients age: 18 - 65 year
2. BMI: obesity only  $>32.5 \text{ kg/m}^2$   
or BMI  $>27.5 \text{ kg/m}^2$  with T2DM
3. Good compliance with postoperative follow-up.

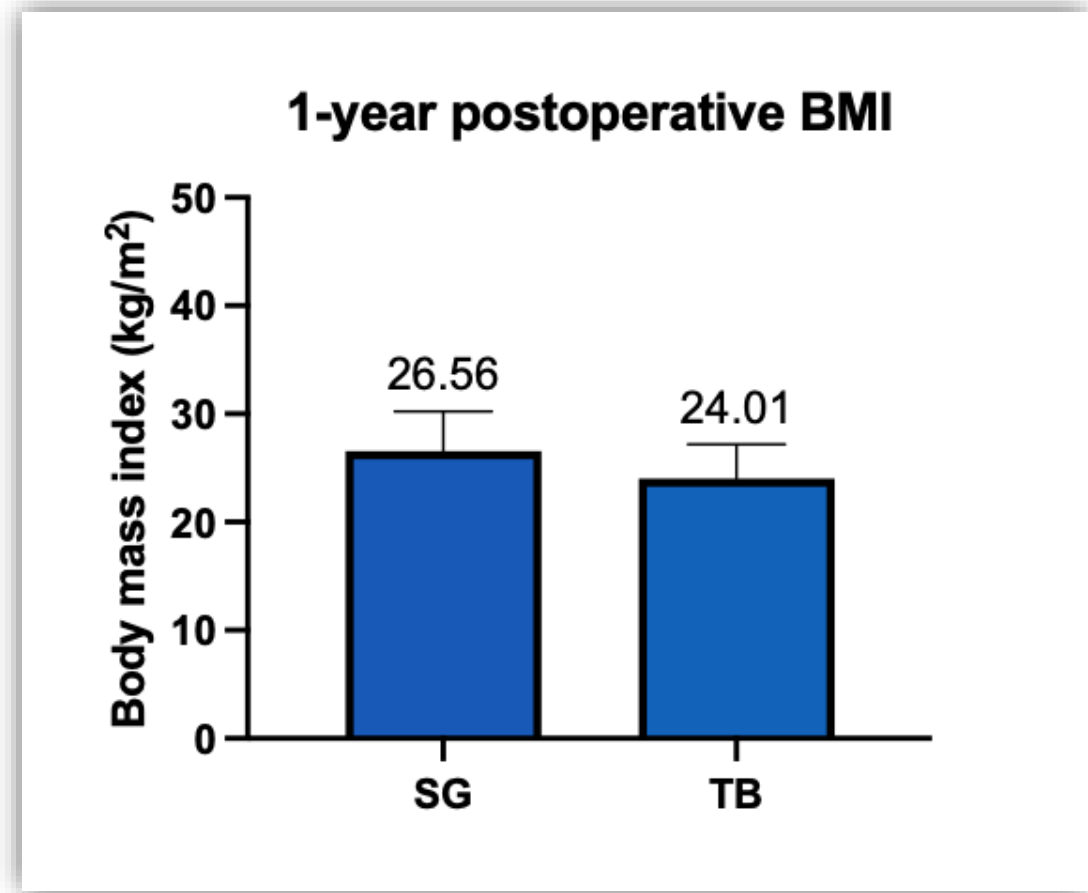
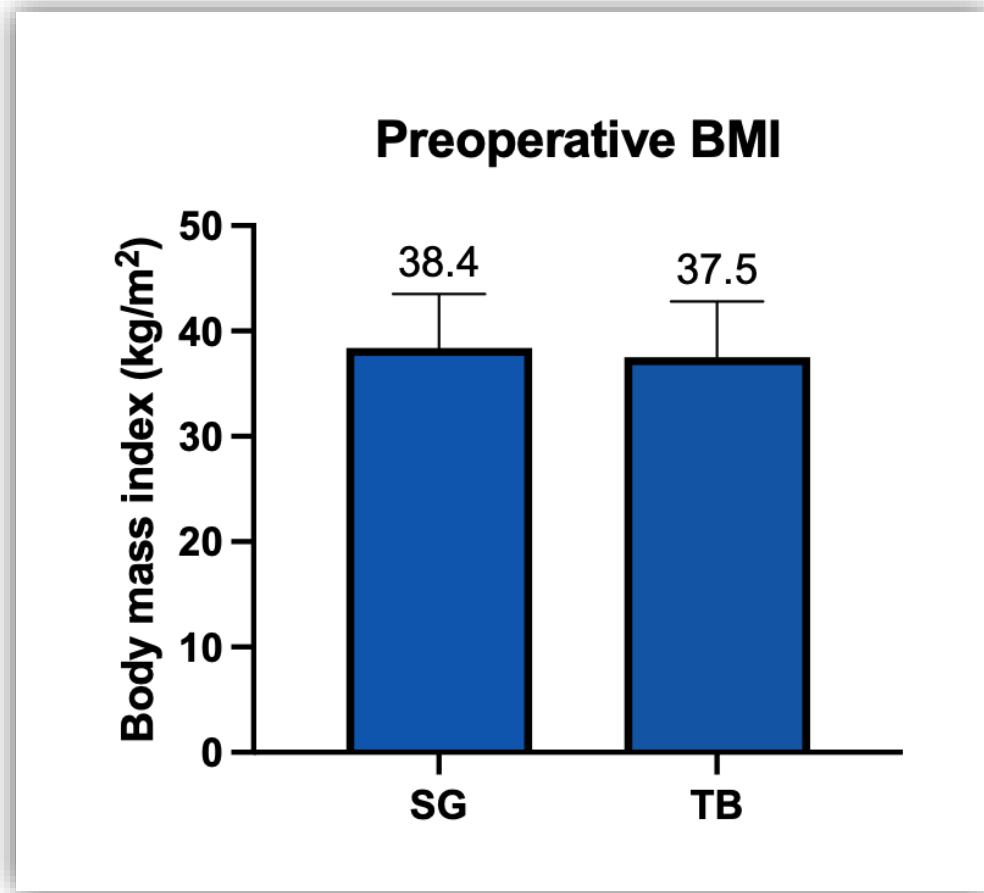
# SG vs OATB enrolment status(May19-Nov21,2022)



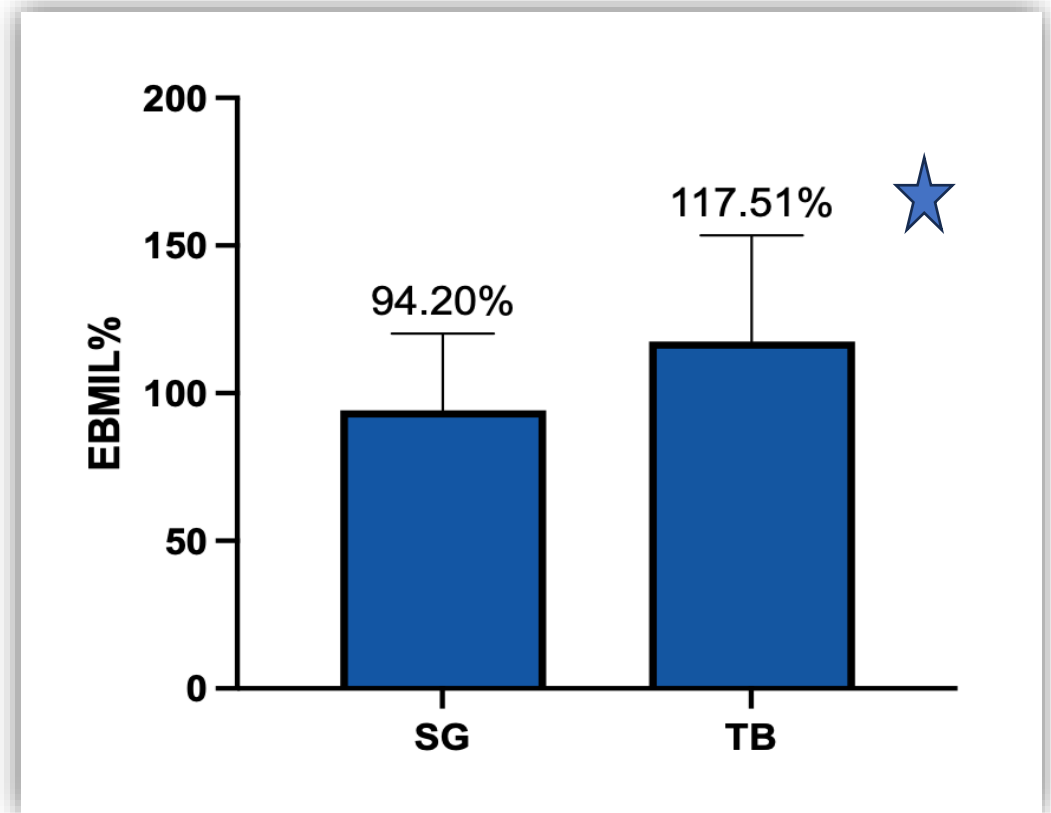
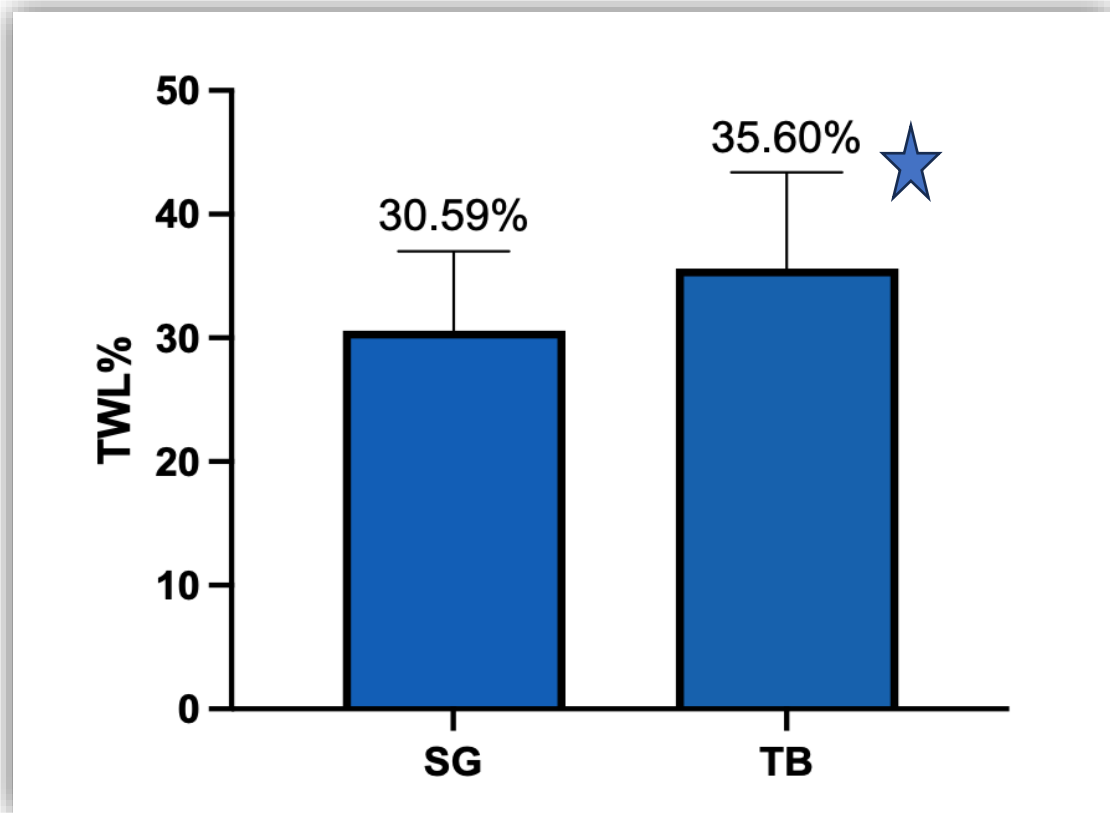
# Baseline characteristics SG vs OATB

Characteristics	Sleeve Gastrectomy (SG=99)	Sleeve Gastrectomy with Transit Bipartition (SG-TB=101)
Age, (mean±SD, y)	32.13±7.51	33.51±7.50
Sex (Female/male)	72/28	71/30
Weight, (mean±SD, kg)	108.99±20.57	106.19±20.79
BMI, (mean±SD, kg/m <sup>2</sup> )	38.40±5.10	37.50±5.30
Type 2 diabetes(n,%)	27 (27.27%)	47(46.53%)
Hypertension(n,%)	29 (29.29%)	30 (29.70%)
Dyslipidemia(n,%)	50 (50.50%)	63 (62.37%)
OSAHS(n,%)	73 (73.73%)	77 (76.23%)
Pcos(n,%)	13 (13.13%)	14 (13.86%)
Hyperuricemia(n,%)	67 (67.67%)	65 (64.35%)
GERD(n,%)	10 (10.17%)	20 (19.80%)

# BMI changes SG vs OATB

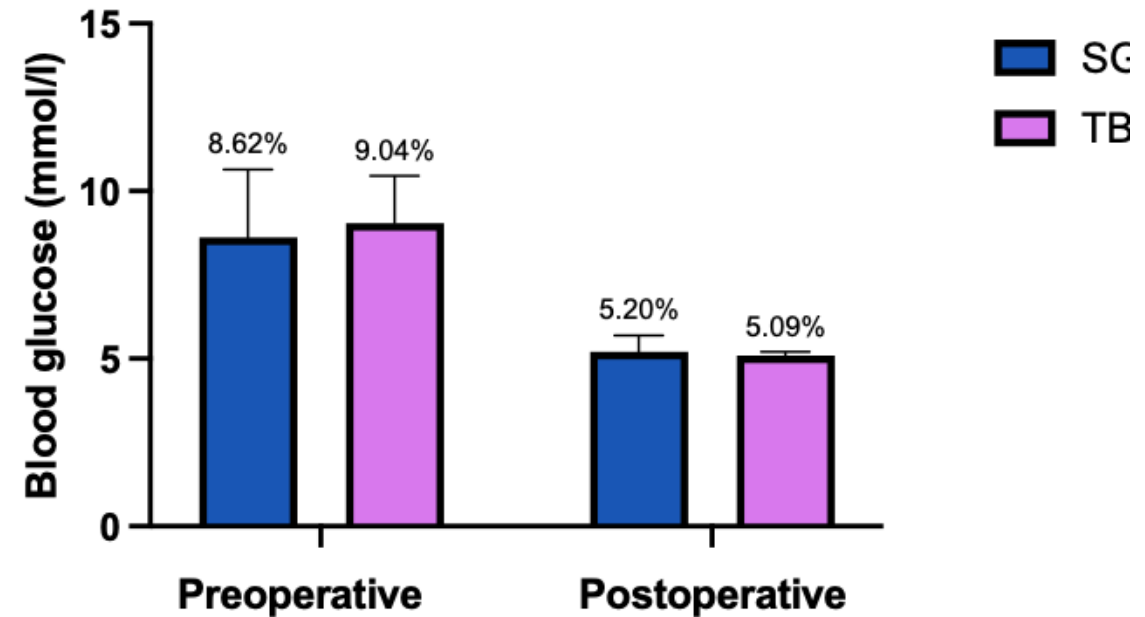
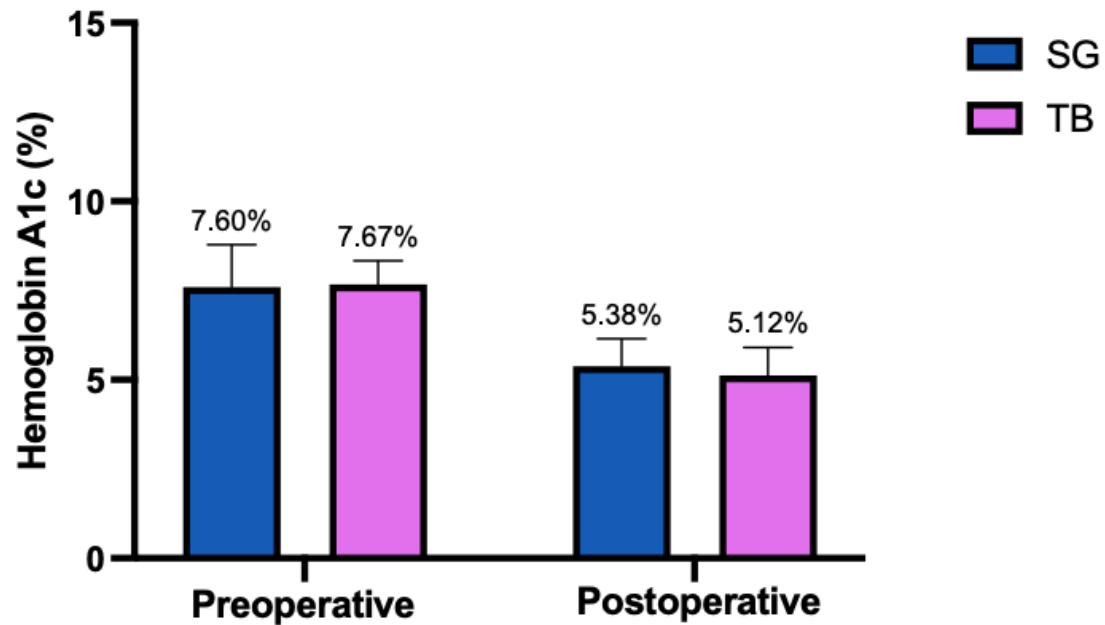


# 1-year Postoperative TWL%, EBMIL% SG vs OATB

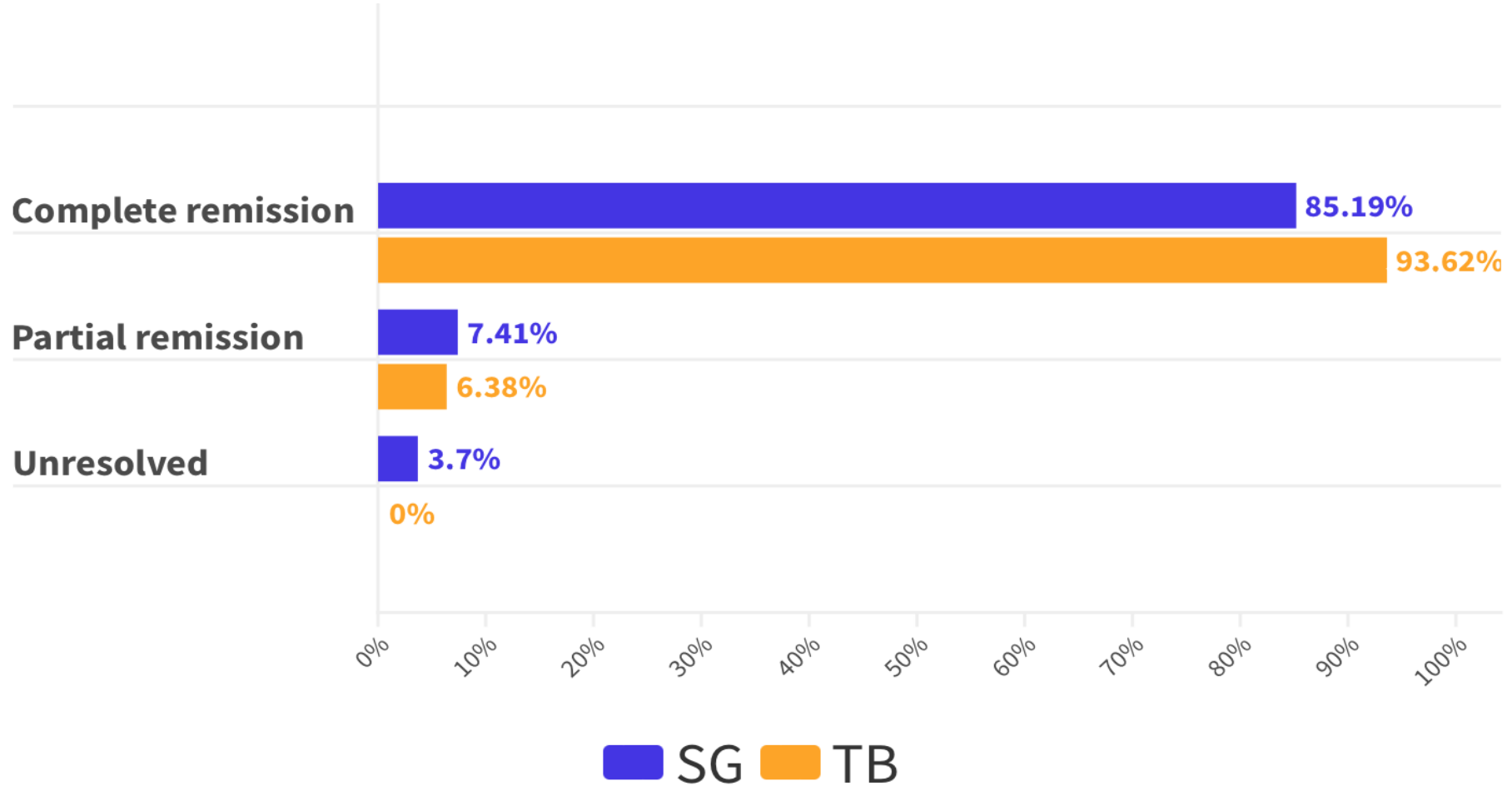




# Changes in fasting blood glucose, HbA1C



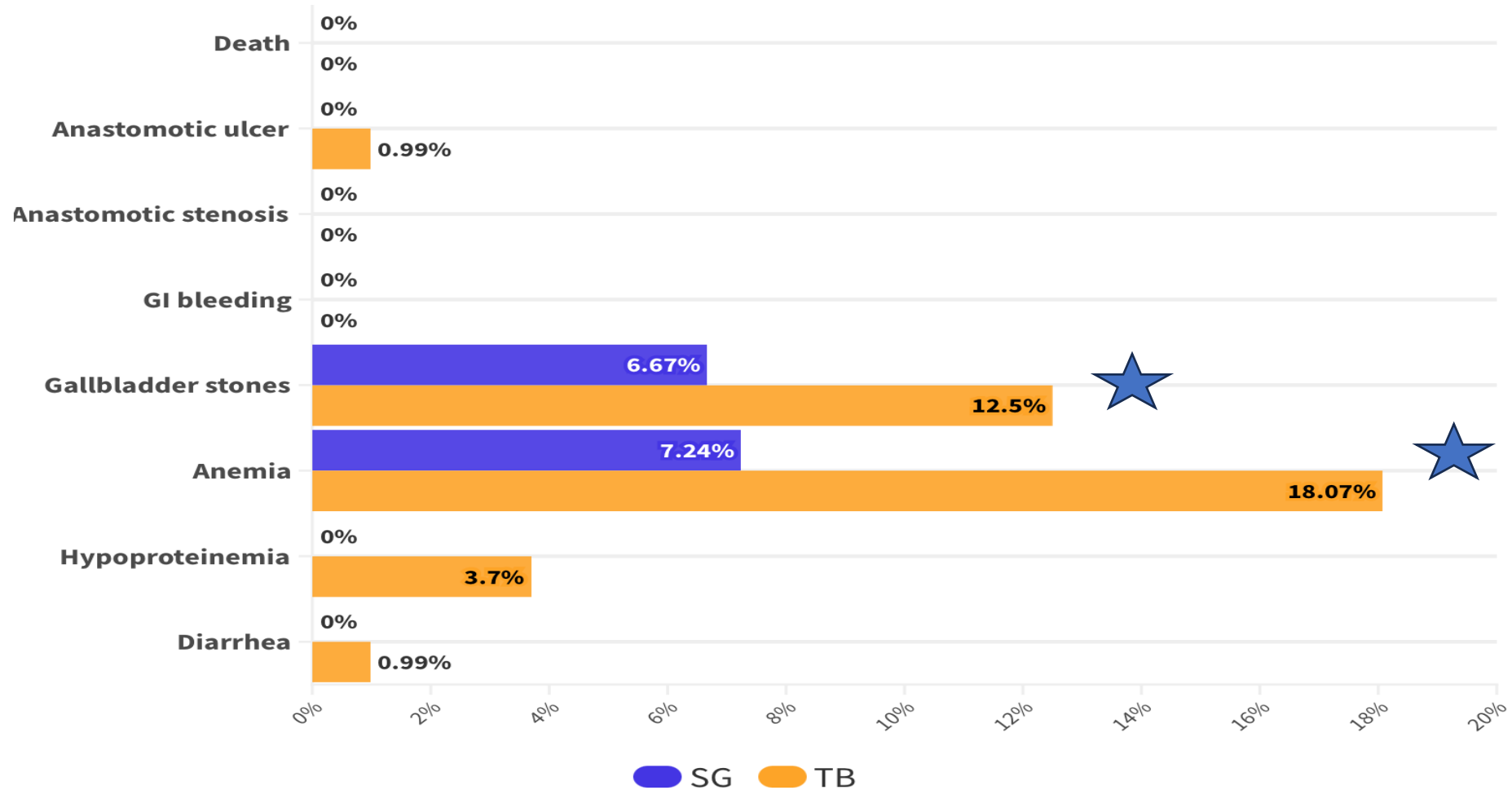
# Diabetes remission



# 30-day readmission SG vs OATB

SG (n=99)	TB (n=101)
<b>1 (1.01%)</b>  (1) Abdominal pain and distension. Second readmission, fluid replacement therapy.	<b>3 (2.97%)</b>  (1) Dehydration, fluid replacement therapy. (2) Incomplete intestinal obstruction, fluid replacement therapy. (3) Black stool, hematemesis, anastomotic(ieal) ulcer, Strong PPI , and fluid replacement therapy.

# Late Postoperative complications



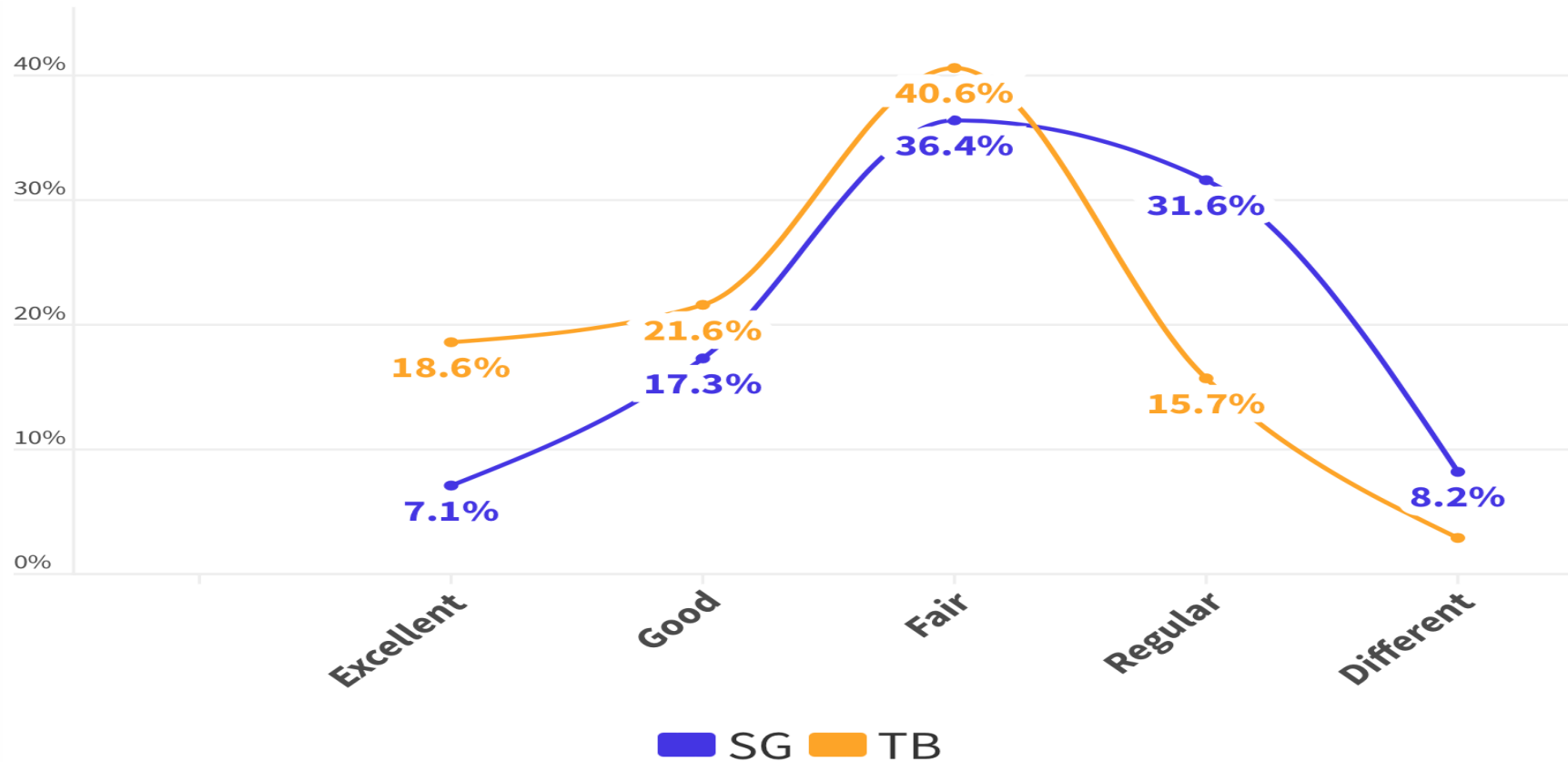
# Anemia following surgery (1-year)

Ranges	SG (n=69)	TB (n=83)
$90 \leq \text{Hb} < 110$	4 (5.80%)	10 (12.05%)
$60 \leq \text{Hb} < 90$	1 (1.45%)	4 (4.82%)
$\text{Hb} < 60$	0 (0.00%)	1 (1.20%)
Total	<b>5 (7.24%)</b>	<b>15 (18.07%)</b>

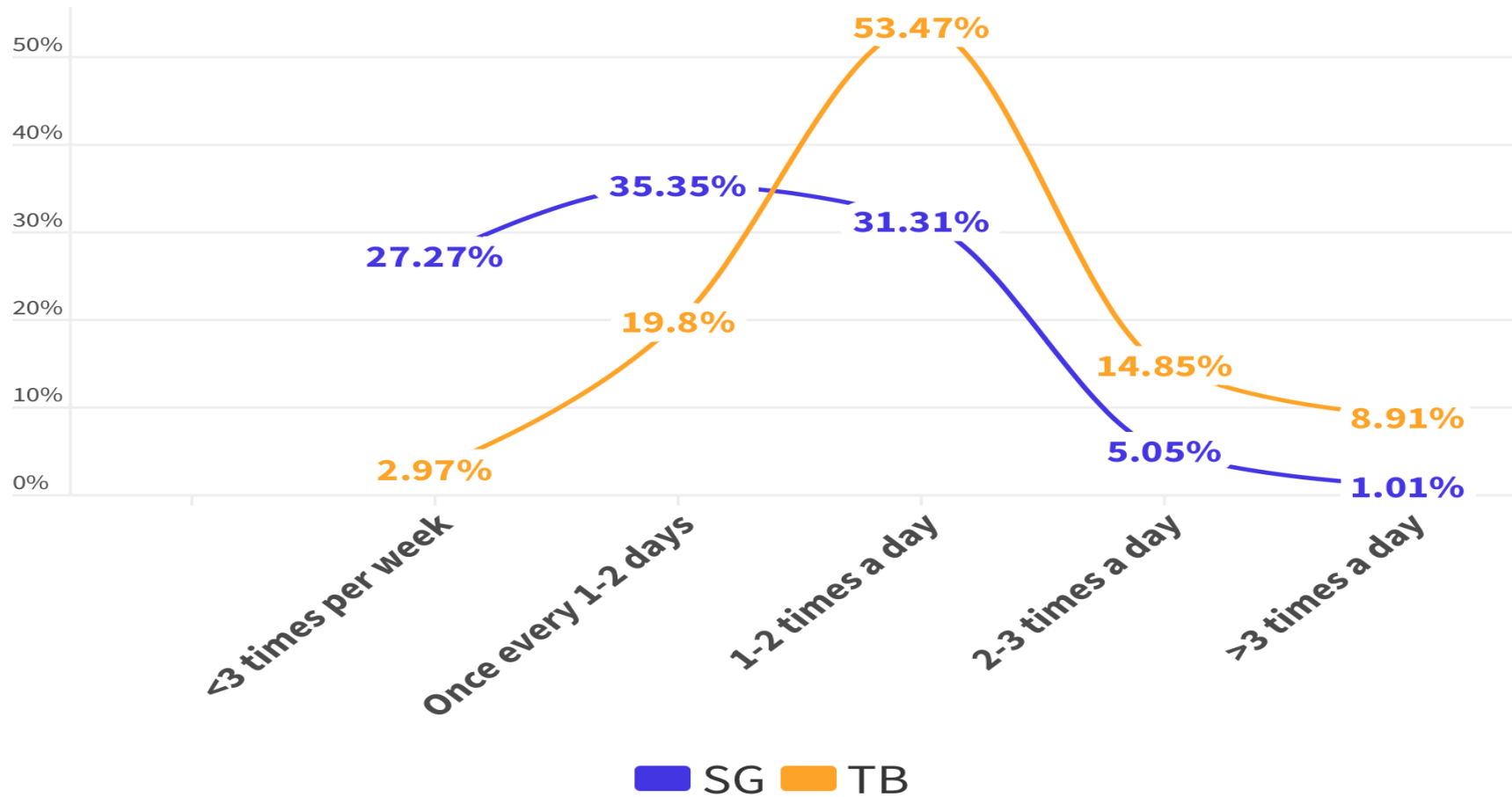
# Hypoalbuminemia Following surgery (1-year)

Ranges	SG (n=67)	TB (n=81)
$30 \leq \text{ALB} < 35$	0 (0.00%)	2 (2.47%)
$25 \leq \text{ALB} < 30$	0 (0.00%)	1 (1.23%)
$\text{ALB} < 25$	0 (0.00%)	0 (0.00%)
Total	0 (0.00%)	3 (3.7%)

# Self-assessment for health status



# Bowel movement status after surgery





# SG VS OATB 1 year GERD

	SG(99)	SG-TB(101)
GERD at baseline	10(10.1%)	20(19.8%)
Postoperative	20 (20.2%)	11(10.8%)
Remission or improved	5(50.0%)	18(90.0%)
Unchanged	3(30.0%)	1(5.0%)
Worsened	2(20.0%)	1(5.0%)
De novo development of GERD	13/(12.5%)	9 (9.47%)

# Conclusion

- I. SG+TB (OATB , SASI) results in significant weight loss, less GERD, and higher patient satisfaction compared to SG alone one year after surgery.
- II. However, despite its effectiveness in treating obesity and related comorbidities, malnutrition and anemia remains a concern in the short-term follow-up.
- III. Therefore, long-term follow-up is necessary.

# *Thank!*



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