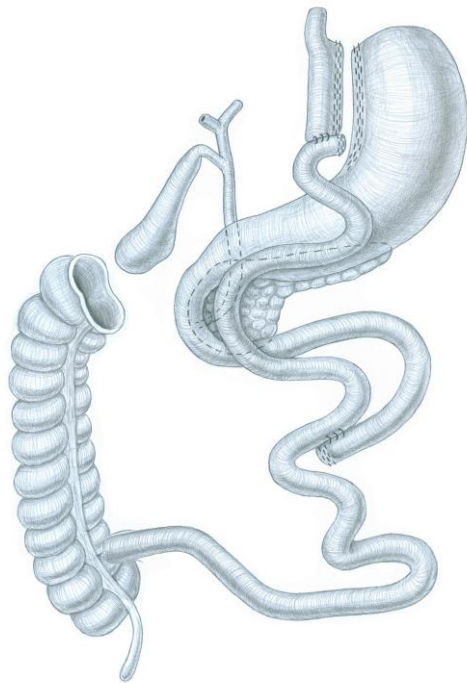


Case Presentation

Excessive weight loss



Preoperative

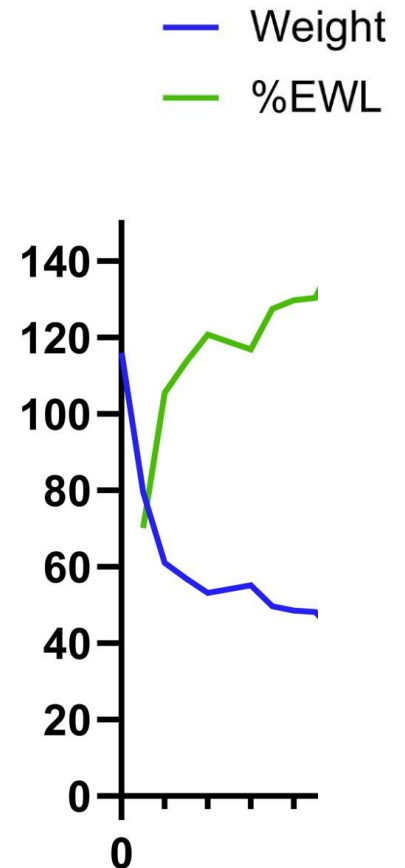


- 51 year old patient
 - Initial weight → 116kg, 160cm = BMI 45.3m²
 - Associated medical problems → dyslipidemia, GERD, sleep apnea, chronic back pain, COPD (60py)
- Laparoscopic Roux-en-Y gastric bypass (circular anastomosis, alimentary limb 150 cm, biliopancreatic limb 50cm)

Postoperative 2006 - 2009

- 1 year follow-up: weight 56.9kg (BMI 22.2m²)
food intolerance, dumping syndrome
→dietician, regular meal interval
- 2 year follow-up: weight 53.2kg (BMI 20.8m²)
hospitalization due to malnutrition (albumin 36 g/l),
postprandial abdominal pain and pneumonia
→gastroscopy, diagnostic laparoscopy and parenteral
feeding, antibiotic treatment
- 3 year follow-up: weight 48.5kg (BMI 18.9m²)
pneumonia, albumin 34 g/l

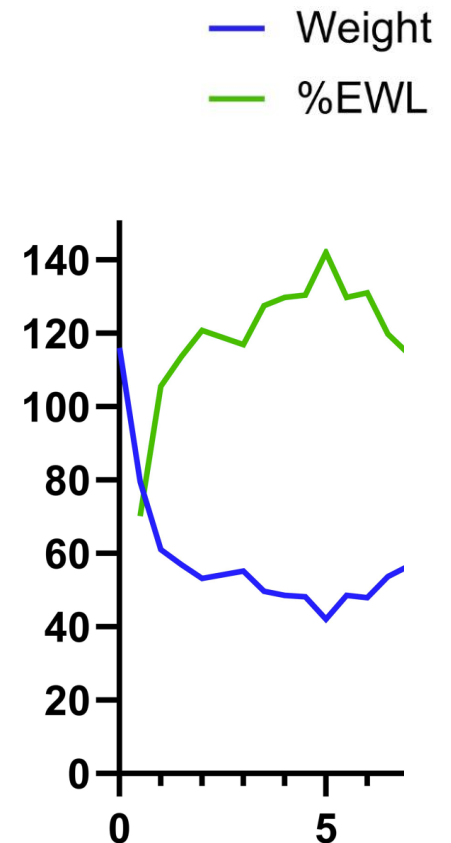
OPTIONS?



Postoperative 2010 - 2012

- 5 year follow-up: weight 42.1kg (BMI 16.4m²)
recurrent pneumonias with persistent nicotine abuse,
protein malnutrition (albumin 30 g/l)
- nasogastric feeding tube (1000 kcal Fresubin)
- 5.5 year follow-up: weight 47.1kg (BMI 17.9m²)
persistent underweight, recurrent pneumonias
- laparoscopic gastrostomy
- 6 year follow-up: weight 51.3kg (BMI 19.5m²)
patient in stable condition, albumin 35 g/l
- gastric bypass reversal

OPTIONS?

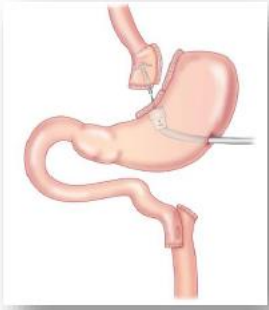


Gastric bypass reversal

resection of the GE + alimentary limb



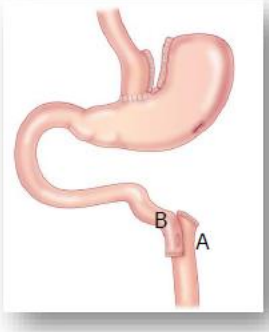
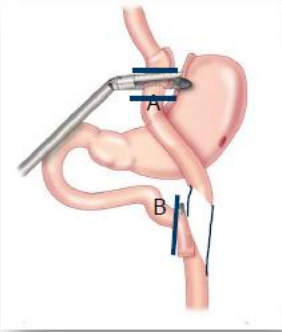
gastro-gastrostomy (circular, linear or hand-sewn)



final aspect



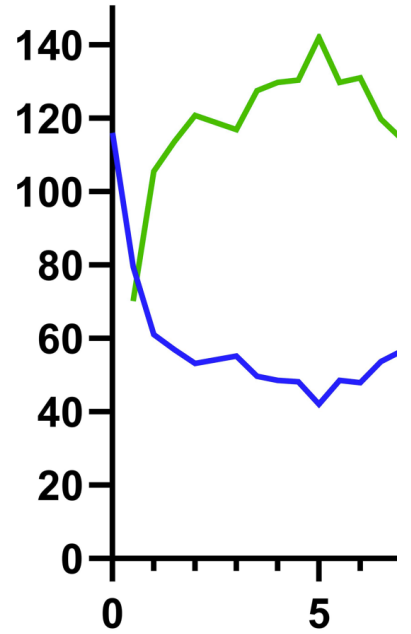
in EWL: preserving AL



if other indication than EWL to prevent weight regain:
simultaneous conversion to sleeve



— Weight
— %EWL

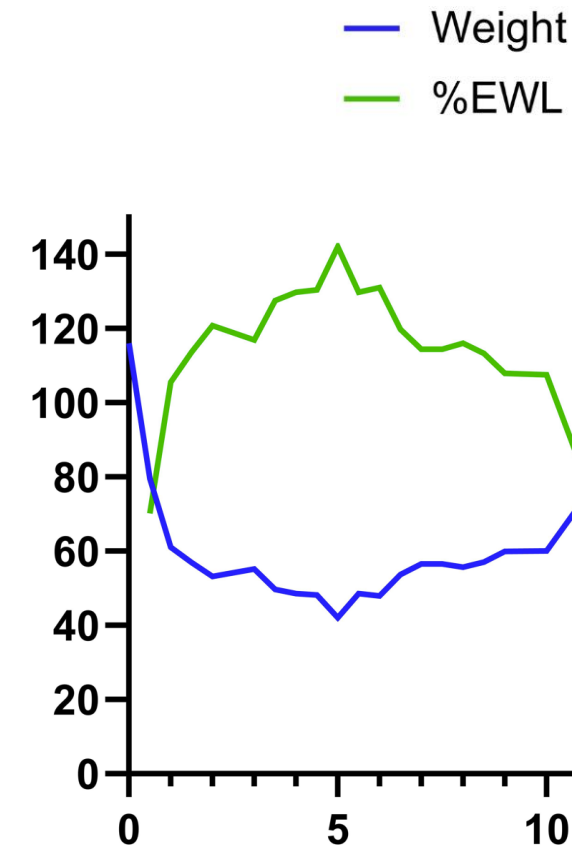


Campos, SOARD 2014

Postoperative 2013 - 2015

- 6 year follow-up: weight 56.5kg (BMI 22.1m²)
good general condition, no micronutrient deficiencies,
normal vitamin D3 and calcium under substitution,
however persistent osteoporosis
- bisphosphonate therapy (aclasta)
- 7 year follow-up: weight 59.9kg (BMI 23.4m²)
recurrent pneumonias and pneumological rehabilitation,
hip fracture
- therapeutic switch to parathormone injection (forsteo)
- 8 year follow-up: weight 60.1kg (BMI 23.5m²)
good general condition, stopped smoking

OPTIONS?



Postoperative 2016 - 2021

– 10 year follow-up: weight 81.7kg (BMI 31.9m²)
weight regain after nicotine abstinence and job loss,
recurrence of dyslipidemia

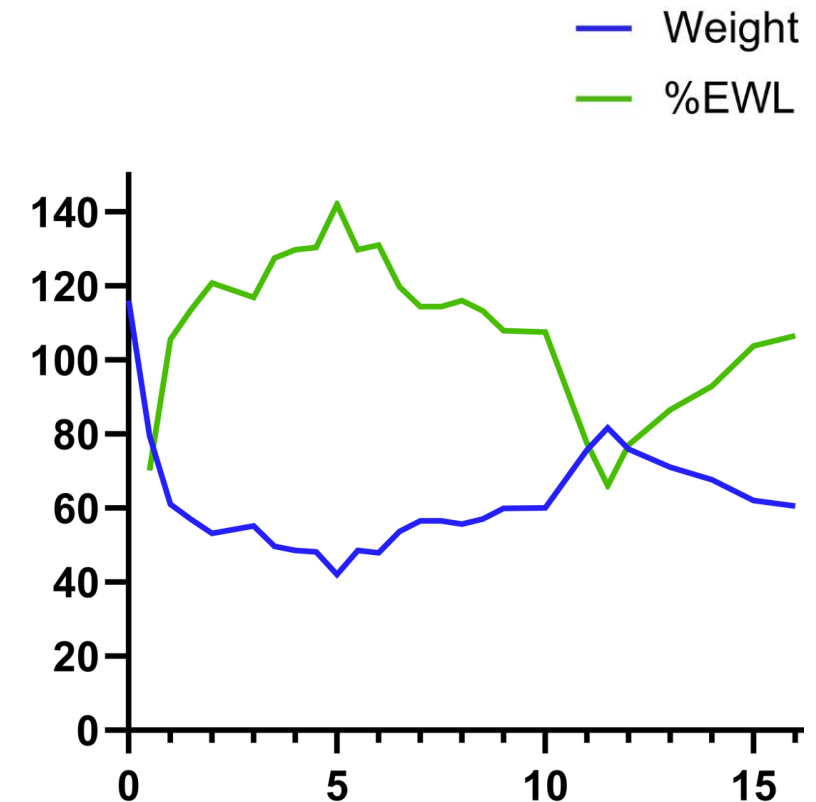
→ liraglutide therapy (saxenda)

– 11 year follow-up: weight 71.0kg (BMI 27.7m²)
reduction of 13% of body weight in 12 months

– 14 year follow-up: weight 60.6kg (BMI 23.7m²)
normal weight, fracture of the pelvic ring and serial rib
fractures

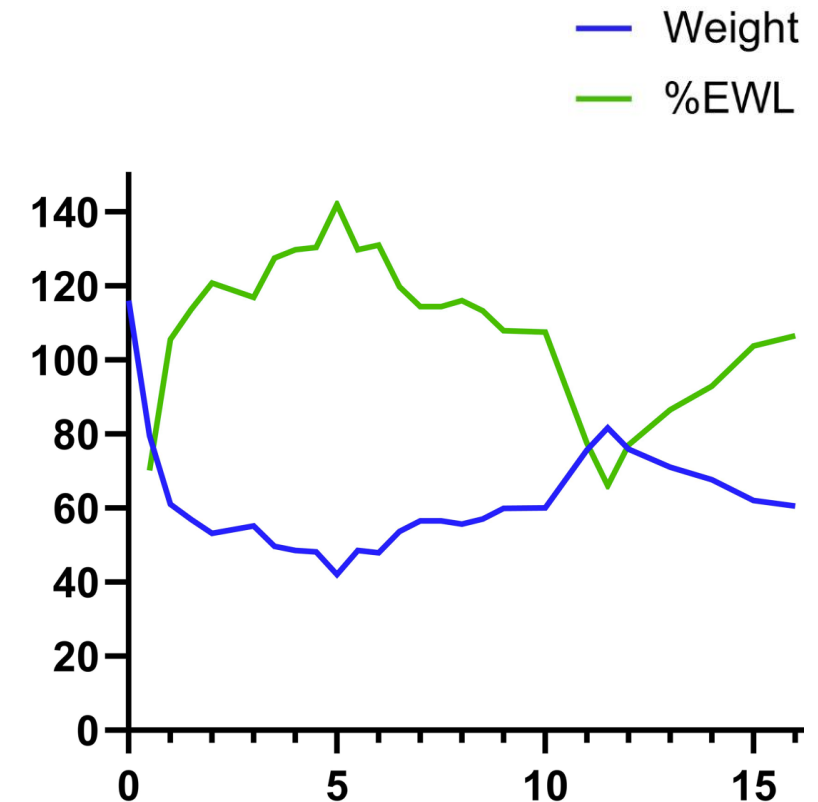
→ osteoanabolic and antiresorptive therapy
(romosozumab followed by denosumab)

OPTIONS?



Current situation

- last follow up: weight 59.1kg (BMI 23.1m²)
- no micronutrient deficiencies, substitution with calcium, vitamin D3 and zinc
- persistent dyslipidemia under statin therapy
- recurrent pneumonias
- oxygen dependent due to COPD GOLD IV
- no further falls or fractures, current therapy with denosumab



Case Presentation

Excessive weight loss

