



EURO-NOTES 2008

Working Group 3

Bariatric Applications

Co-Chairpersons

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EAES





Introduction

- Participants:
 - 41 % Surgeons
 - 32 % Industry
 - 27 % Gastroenterologists
- Definitions:
 - **NOTES** ! Including hybrid but not NOTUS or SP
- Question driven with open discussion and voting



Feasibility

Q1: What do you think about the feasibility of bariatric surgery by NOTES ?

	LAPAROTOMY	LAPAROSCOPY	NOTES
Restrictive	+	+	+
Malabsorptive	+	+	± (DS)
Restrictive & Malabsorptive	+	+	+



Publications

Q2: What do you know about the currently published (peer reviewed) experience in bariatric surgery by NOTES ?

- All agree that there are nearly no data on this matter. Max 3 papers ... (abstracts)
- It is felt to be one of the best indication for NOTES

Benefits

Q3: Do you anticipate that bariatric surgery by NOTES would benefit to selected groups of patients ?

- It was felt that NOTES could be applicable to all obese patients
- Some benefits ?
 - Assessment of adhesions (previous surgery)
 - Less intraabdominal pressure ?
- Caveat
 - Duration !

Complications

Q4: Do you anticipate that bariatric surgery by NOTES could decrease the risk of complications compared to other accesses ?

	Complication rates (%)		
	LAPAROTOMY	LAPAROSCOPY	NOTES
Mortality	0,2 - 2 %	0 – 2 %	
Overall morbidity	13 - 38 %	8 – 28 %	
Nutritional complications	2 - 77 %	1 – 77 %	
Incisional hernia	24 - 51 %	0.23 - 6%	+
Wound infection	3 – 14 %	0 – 14 %	+
Anastomotic strictures	1-18 %	0,1 – 13 %	
Enterotomy leaks	0,2 – 4,1 %	0.7 - 5.2%	
Pulmonary embolism	0,4 – 3,6 %	0 – 3,6 %	
Haemorrhage	0 – 2 %	0 – 0,7 %	

Instruments / devices

Q 5: Specific instruments / devices will be necessary for bariatric surgery by NOTES ?

- Specific procedure (banding)
- Longer
- Stronger
- Also for non bariatric surgery in obese patients
- Costs !



Benefits / disadvantages

Q 6: Grade the importance of expected benefits / disadvantages of bariatric surgery by NOTES

LESS COMPLICATIONS	39
LESS INVASIVE PROCEDURES	35
ADVANTAGE AS A SECONDARY PROCEDURE	20
SCARELESS SURGERY	12
LONG-TERM COST/BENEFIT	12
SHORT-TERM COST/BENEFIT	9
LESS PAIN	6
COSTS	3
EARLY DISCHARGE	0



Development

Q 7: How do you foresee the development of bariatric surgery by NOTES in humans (grade the items)?

TRANSITIONAL PERIOD WITH HYBRID PROCEDURES	44
EXTENSIVE ANIMAL PROCEDURES	35
DEVELOPMENT OF ADEQUATE INSTRUMENTATION BEFORE	28
NEED FOR STRONG SAFETY DATA FOR TV / TG / TR ACCESSES	20
NEED FOR CADAVERIC EXPERIMENTS	3
NEED FOR ETHICAL CONSENSUS IN SCIENTIFIC SOCIETIES	1