

ENDOSCOPIC MANAGING OF SLEEVE GASTRECTOMY FISTULAS: A INNOVATIVE ESOPHAGEAL STENT

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Poster

Oesophagus

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A multi-centric retrospective study of 28 patients found the Luso-Cor esophageal stent achieved an 89.3% success rate in managing sleeve gastrectomy fistulas with low migration rates and fewer endoscopies when used as first-line therapy.

KEY POINTS

- The overall success rate for fistula closure with the Luso-Cor stent was 89.3% (25 of 28 patients) over a median 6-week implantation period.
- Adverse events occurred in 17.9% of patients, including GI bleeding, esophageal stricture, and recurrent vomiting; two patients died from aorto-esophageal fistula and pulmonary embolism.
- Re-intervention was necessary in 28.57% of cases, most commonly due to inadequate coaptation of the proximal flare, with only one case of stent migration.
- First-line use of the stent significantly reduced the number of endoscopies compared to second-line use (3 vs 4, $p=0.031$) without differences in efficacy or adverse event rates.
- This study is relevant for gastroenterologists and bariatric surgeons managing post-sleeve gastrectomy fistulas, particularly those at the cardia which represented 71.4% of cases.

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