

EFFICACY OF ARGON PLASMA COAGULATION (APC) IN THE REDUCTION OF GASTROJEJUNAL ANASTOMOSIS FOR WEIGHT REGAIN AFTER ROUX-EN-Y GASTRIC BYPASS

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Poster

Oesophagus

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Argon plasma coagulation reduced gastrojejunal anastomosis diameter and achieved at least 5% total weight loss in approximately 60% of post-RYGB patients with weight regain over 12 months of follow-up.

KEY POINTS

- In a retrospective study of 36 RYGB patients treated with APC for weight regain, mean total weight loss was 8.3%, 8%, and 8.2% at 3, 6, and 12 months respectively, with over 60% achieving at least 5% total weight loss throughout follow-up.
- APC reduced mean gastrojejunal anastomosis diameter from 26.61 mm to 16.4 mm, with 72% achieving a final diameter under 18 mm, though neither reduction in anastomosis diameter nor final diameter predicted weight loss outcomes.
- At 12 months, responders to APC had significantly lower BMI (31.7 kg/m²) and 27.3% achieved BMI under 30, but no baseline patient factors or comorbidities predicted treatment response.
- Technical success was 100% with only three mild adverse events (8%): two mild stenosis cases requiring dilation and one mild gastrojejunal anastomosis ulcer.
- This material is most relevant for gastroenterologists and bariatric specialists managing post-RYGB weight regain.

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