

UNBURDENING THE PILL LOAD: REAL-WORLD EVIDENCE OF MEDICATION REDUCTION AFTER ENDOSCOPIC SLEEVE GASTROPLASTY

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Poster

Oesophagus

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Endoscopic Sleeve Gastropasty in 236 patients was associated with significant reductions in medication burden for obesity-related comorbidities at 6 and 12 months post-procedure.

KEY POINTS

- Mean medication count for diabetes, hypertension, and hyperlipidemia decreased from 1.36 at baseline to 0.61 at 6 months and 0.59 at 12 months, representing statistically significant reductions of 0.75 and 0.77 medications respectively ($p < 0.001$ for both).
- At 12 months, use of anti-diabetic medications declined from 17.8% to 12.7%, insulin use from 2.6% to 1.4%, anti-hypertensives from 30.9% to 20.8%, and lipid-lowering therapy from 22% to 18.8%.
- All procedures were performed by a single experienced endoscopist using a U-shaped suturing pattern in a retrospective cohort at Singapore General Hospital.
- The findings support the role of ESG in promoting pharmacologic de-escalation alongside weight loss in patients with obesity-related comorbidities.

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