

SALVAGE OF INFECTED LAPAROSCOPIC GASTRIC BANDS

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Background

Laparoscopic gastric banding (LGB) for the treatment of morbid obesity has a favourable profile in terms of operative and peri-operative complications. There exists however a long-term risk of specific band-related complications including sepsis, slippage and erosion. Typically band sepsis is treated by removal of the prosthesis and antibiotic treatment.

Aim

The aim of this study was to examine cases of band sepsis with particularly reference to band salvage in a closely followed cohort of patients.

Method

Clinical, anthropometric and metabolic parameters were collected and recorded prospectively in all patients in this series. Data on patients identified with band sepsis was examined with particular reference to infective organisms, clinical course and ultimate outcome.

Results

Between October 2005 and November 2007, 189 patients underwent laparoscopic gastric banding. There were no perioperative deaths and the perioperative complication rate was 1%. Five patients suffered band infections due to various organisms. Of these, three had their band removed (one laparoscopically and one via laparotomy). Two patients were treated by laparoscopic drainage of band abscesses and antibiotics. Both patients remain well.

Conclusion

Results from this series demonstrate that it is possible in selected cases of band sepsis to preserve the prosthesis and achieve adequate weight loss.