

## **EROSIONS FOLLOWING LAPAROSCOPIC ADJUSTABLE GASTRIC BANDING**

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Intra-gastric migration (or erosion) of the prosthesis is an uncommon problem following Laparoscopic Adjustable Gastric Banding (LAGB) with most series putting the incidence at less than 3%. The presentation of this problem is variable and management is controversial. We report our experience and the rationale for our approach to management.

### **Methods**

All patients who had a primary LAGB placed from 1993- April 2008 were reviewed using a prospectively maintained database. Those patients who had had an erosion were identified. Presentation, operative details, demographics, body mass index, weight history and any other problems were noted.

### **Results**

2529 patients were identified and erosions were noted in 76 patients (3.0%) at a mean time from initial surgery of 26 months (range 12 – 60 months). In the first 800 cases there were 66 erosions (8.2%), in the second 800 there were 10 erosions (1.2%), and by the third 800 there were 7 erosions (0.9%). The vast majority have only had one erosion (65 patients, 85.5%); 10 patients (13.3%) have had two erosions, and 1 (1.3%) patient has had three erosions. Few multiple erosions have been noted since a staged management approach, removal of the band with delayed replacement, has been adopted. The most common presentation was lack of satiety with associated weight gain. There were no life threatening presentations. Weight loss was successfully maintained following treatment for the erosion.

**Conclusion** Erosion of the Lap-Band is rare, its clinical course is benign, and it is best treated with a staged surgical approach. Following this approach, weight loss should be maintained.