

Improving quality of life for patients with laparoscopic adjustable gastric banding: early results

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Abstract

The aim of the study was to evaluate the improvement in quality of life for patients that have undergone the laparoscopic gastric banding, using the BAROS and Moorehead-Ardelt II questionnaires.

Methods: We selected a 20 patient group (65% women) that underwent this surgical procedure in our clinic. The initial average weight was 123.45kg, and the body-mass index of 42.36. The average age was 29.25 years. The pars flaccida technique was used in 18, and the perigastric approach in 2 cases.

Results: No complications or intraoperative accidents occurred. The mean operation time was 115.5 minutes. Elective conversion was needed in one case with a BMI of 55. The average hospital stay was of 3.2 days. The follow-up was conducted at least through phone in 95% of cases, and its average duration was of 10 months. The only postoperative complications were infections of the subcutaneous port (5 cases – 25%) which needed removal of the port, but not of the banding. The average loss of excess weight was 48.23%. Using the BAROS score to determine the overall improvement of quality of life, 30% of the patients scored as "Very Good", 50% as "Good", 20% as "Fair". Using the Moorehead-Ardelt QLQ II score, 65% scored as "Very Good", 30% as "Good" and 5% as "Fair". **Conclusion:** The laparoscopic adjustable gastric banding significantly improves the quality of life for most patients with this procedure.

Key words: obesity, laparoscopy, adjustable gastric banding, quality of life, BAROS, Moorehead-Ardelt QLQ II

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