



S.I.C.O.B.

XXXII CONGRESSO
NAZIONALE SICOB

23 - 25 MAGGIO 2024
GIARDINI
NAXOS

Un percorso di cura per il paziente obeso

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CASA DI CURA SAN ROSSORE (PI)

Ksenija Mlinar was the story of Italian minimally invasive bariatric surgery

Gastric banding (Inamed Health)

Your beautiful person stays
with us.

Thank You, dear Ksenija



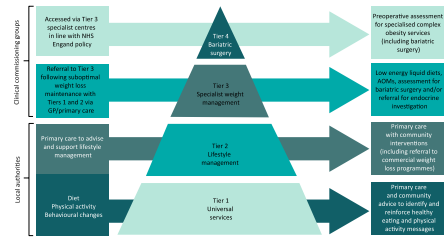


Fig 1. The tiered weight management system in England. *AOM = anti-obesity medication.

Linee guida

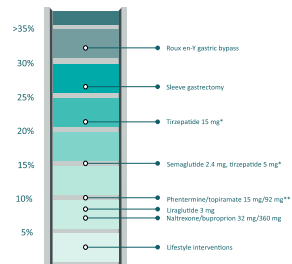
il team interdisciplinare

1° obiettivo

riequilibrio dello stile di vita e dell'”adiposità”

2° obiettivo

preparare selezionare indicare



farmaci **chirurgia**

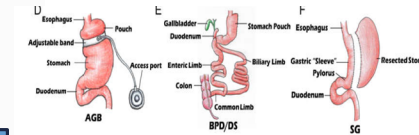


Figure 1. Different types of surgeries: (A) jejunoileal bypass surgery (JIB); (B) Roux-en-Y gastric bypass (RYGB); (C) 1-banded gastroplasty (VBG); (D) adjustable gastric band (AGB); (E) biliopancreatic diversion with duodenal switch (BPD/DS); (F) sleeve gastrectomy (SG).

The different surgical methods act through a variety of mechanisms. No these mechanisms directly associated with weight loss, but they may also be structural and endocrine changes. Each type of surgery and its specific structure are briefly described in Table 1. More specifically, the table includes the year of procedure's creation, involvement of the gastric body, bypass, biliopancreatic diversion, anastomosis, and weight loss rates.

3° obiettivo
Follow-up

Linee guida e nostro percorso di cura

il team interdisciplinare è indispensabile

una dieta su misura

attività fisica

supporto psicologico



1° obiettivo

riequilibrio dello stile di vita e dell'”adiposità”

Vantaggi:

➤ Compliance

Evita trattamenti in eccesso

Svantaggi:

Costi

Duro lavoro

Metodi

Incontri individuali/ di gruppo; contemporaneità degli specialisti

il nostro percorso di cura il team interdisciplinare indispensabile

2° obiettivo
preparare selezionare indicare

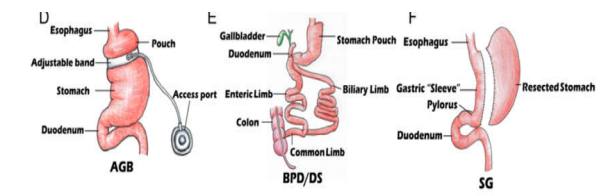
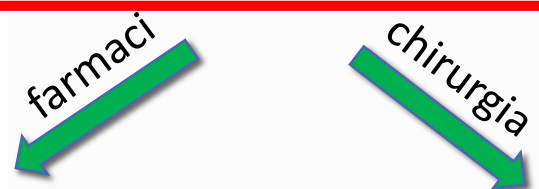
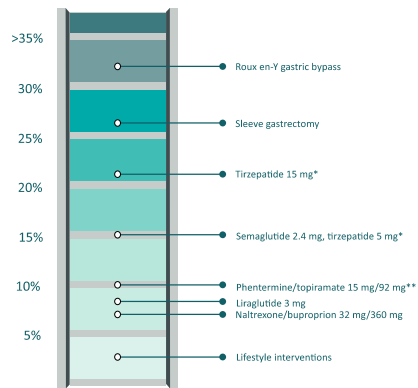


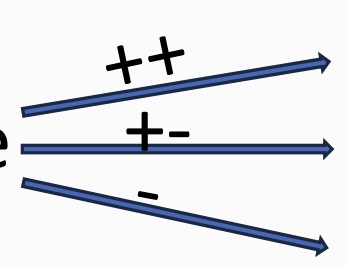
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The different surgical methods act through a variety of mechanisms. Not all mechanisms are directly associated with weight loss, but they may also be associated with structural and endocrine changes. Each type of surgery and its specific structure are briefly described in Table 1. More specifically, the table includes the year of the procedure's creation, involvement of the gastric body, bypass, biliopancreatic diversion, anastomosis, and weight loss rates.

Obesità

Compliance

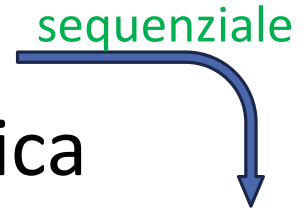
M. metabolica



Bendaggio gastrico

Plicatura laparoscopica

Bypass Gastrico Funzionale FGB



3° obiettivo: follow-up

risultati a lungo termine



Overall results in terms of %EWL and %TBWL

Yr of follow-up	N patients	Follow-up	%EWL	%TBWL	%EWL >50%	25% <%EWL ≤50%	%EWL ≤25%
1	2971	84.2%	45.7 ± 28.5	16.3 ± 9.2	1197 (40.3)	1111 (37.4)	663 (22.3)
5	1840	79.9%	50.7 ± 43.9	18.4 ± 12.3	959 (52.1)	504 (27.4)	377 (20.5)
10	926	71.6%	49.0 ± 36.2	17.9 ± 13.5	477 (51.5)	216 (23.3)	233 (25.2)
15	180	58.4%	52.6 ± 39.9	21.1 ± 15.0	105 (58.3)	36 (20.0)	39 (21.7)
20	39	50.7%	59.2 ± 50.6	25.3 ± 18.7	27 (69.2)	4 (10.3)	8 (20.5)

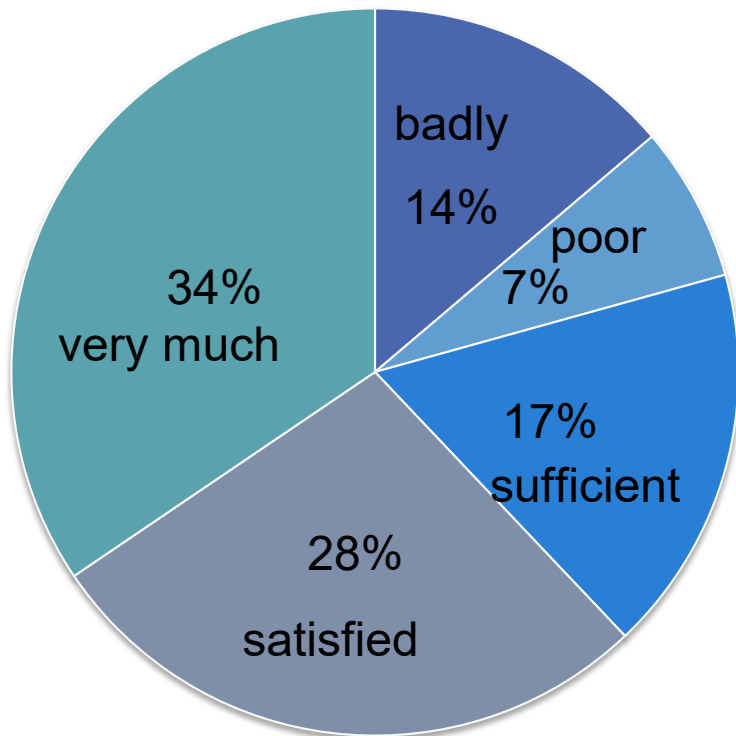
59 adolescents: same results

GASTRIC BANDING WORKS INSIDE AN INTERDISCIPLINARY TEAM

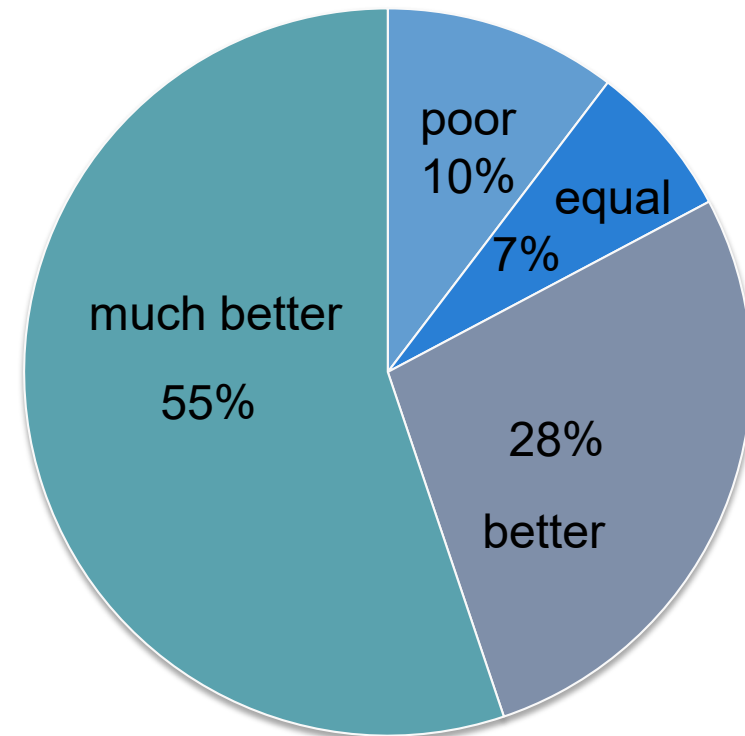
“There have been no deaths associated with any primary gastric banding procedure or any subsequent revisional procedure.” OBES SURG (2019) 29:3–14 P. E. O’Brien

survey via e-mail on 29 pts: 80% satisfaction and good feelings

satisfaction

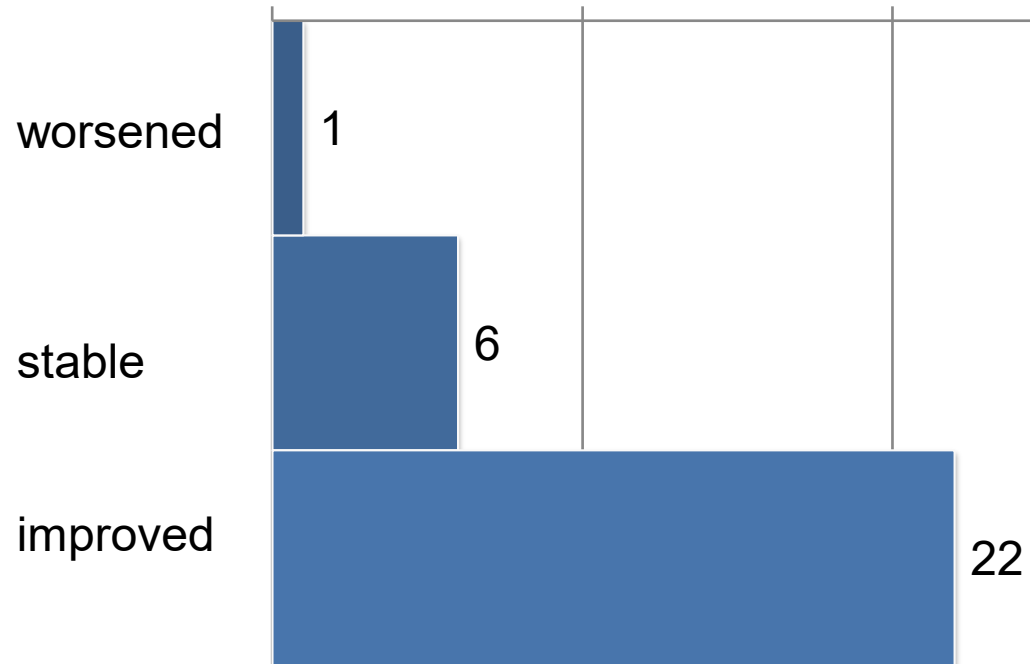


feelings after banding

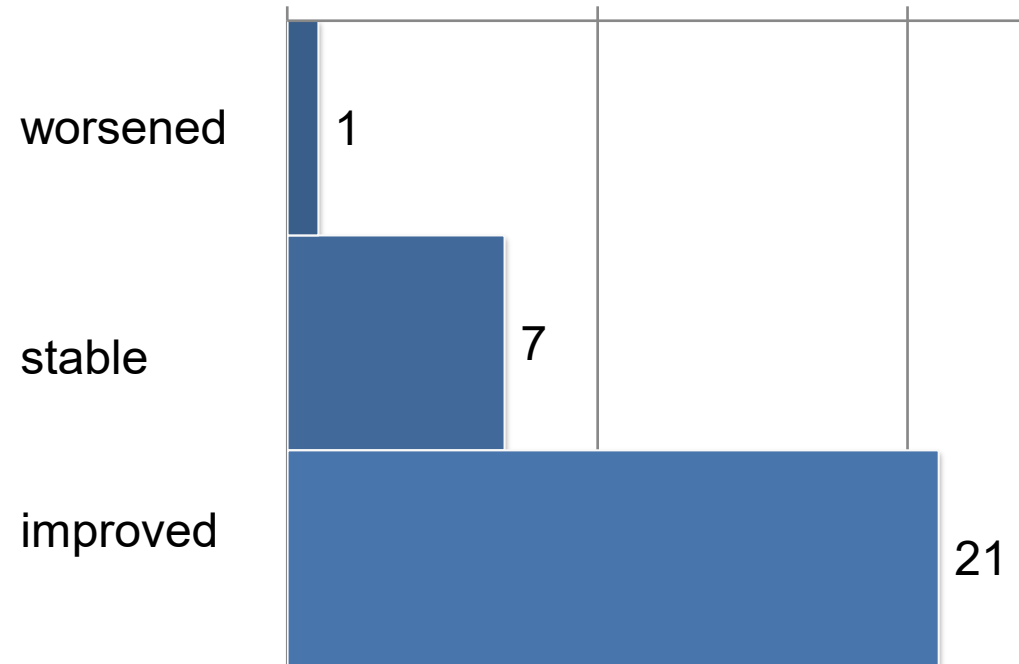


survey via e-mail on 29 pts: 80% improved self-esteem and QoL

self-esteem

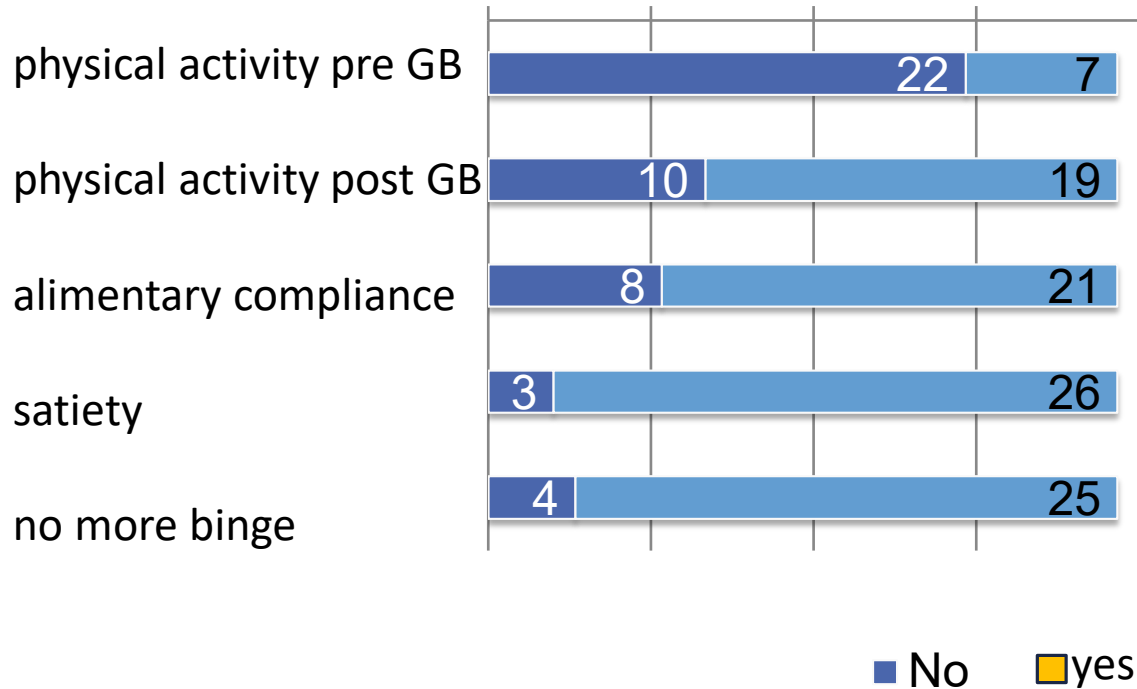


quality of life

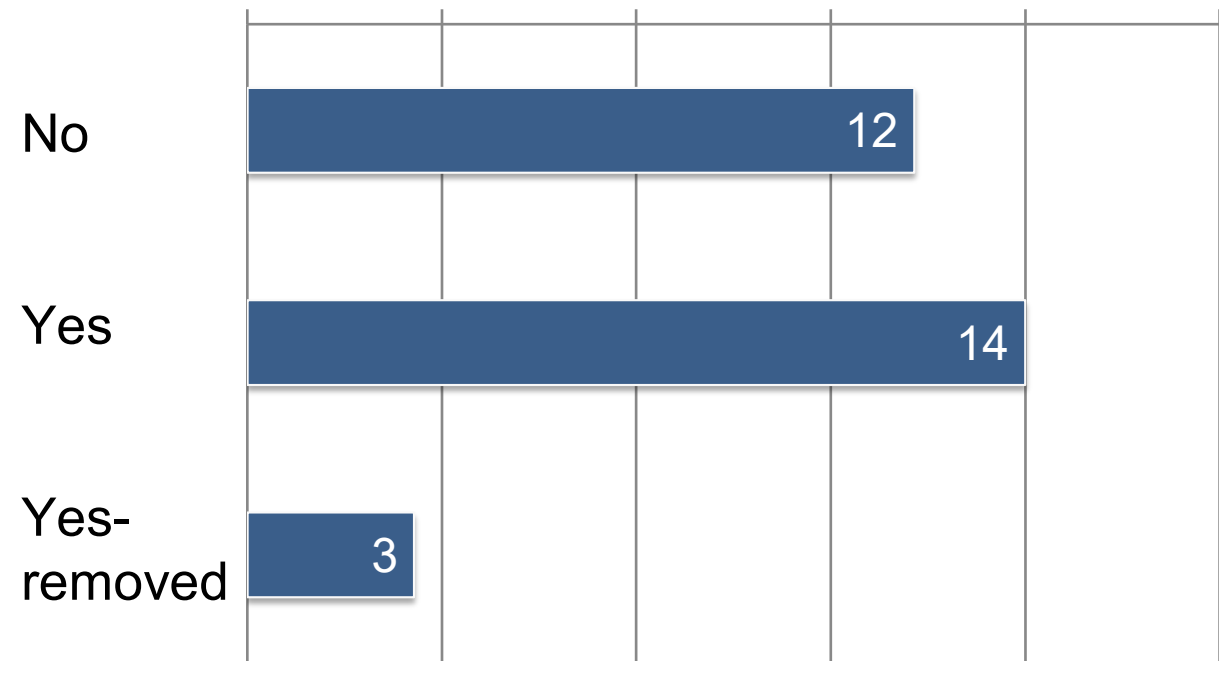


survey via e-mail on 29 pts: >80% improved physical activity and alimentary behavior; >50% train for the best result

alimentary and physical behavior: Pre-Post



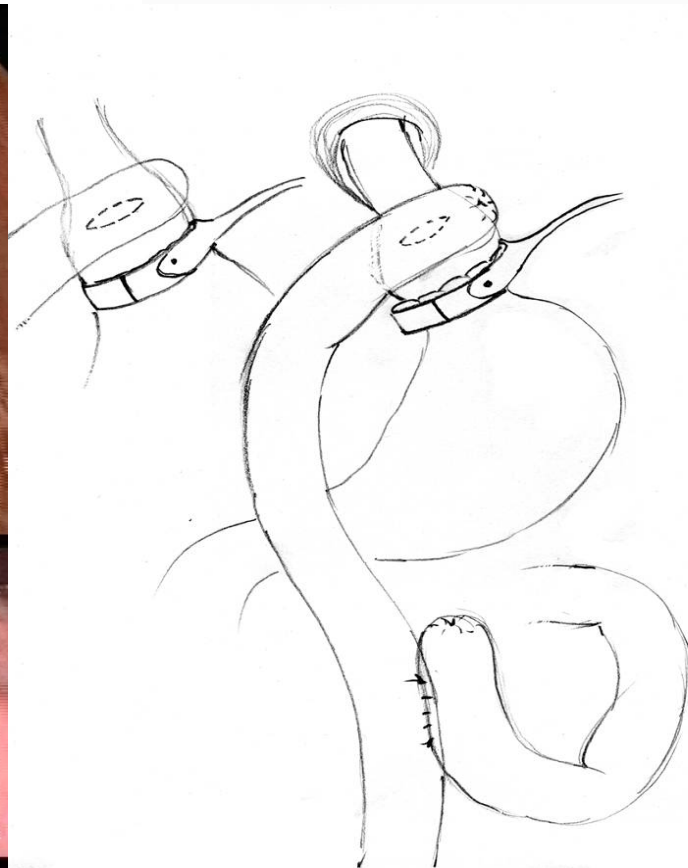
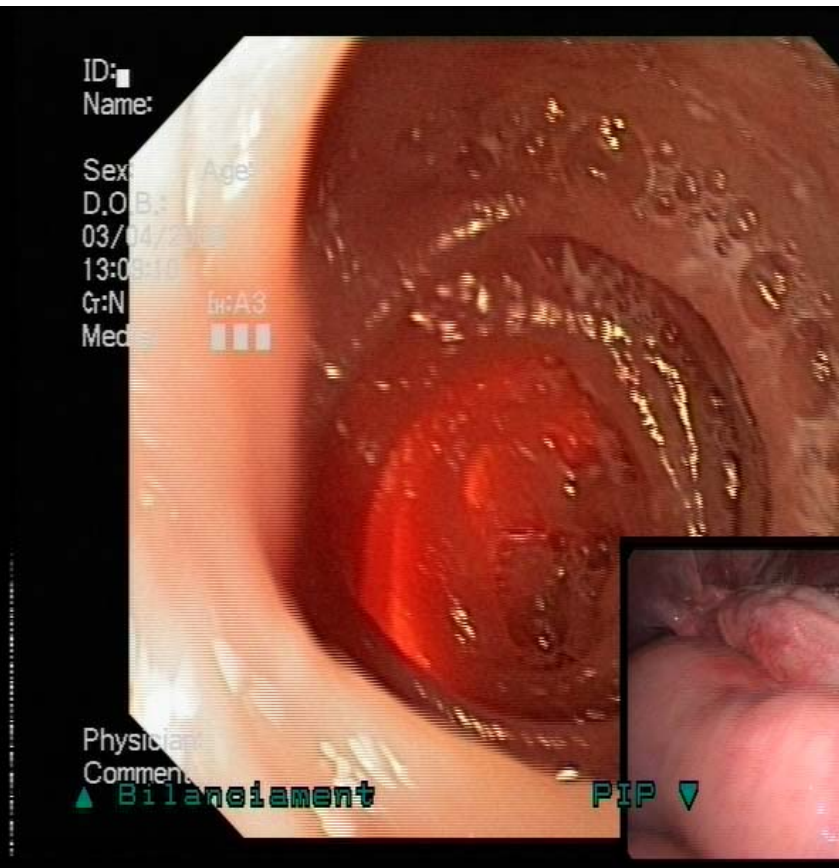
deflated banding



L'EVOLUZIONE DELLE SUE PREROGATIVE

trattamento sequenziale: il bendaggio come partizione funzionale

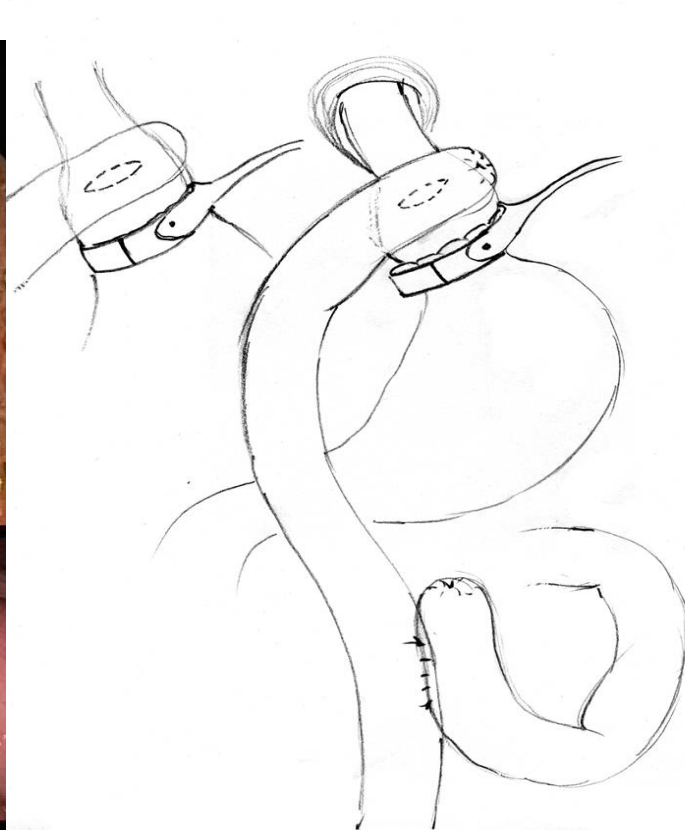
FUNCTIONAL GASTRIC BYPASS (FGB) BAND INSUFFLATO



L'EVOLUZIONE DELLE SUE PREROGATIVE

trattamento sequenziale: il bendaggio come partizione funzionale

FUNCTIONAL GASTRIC BYPASS (FGB) BAND **DESUFFLATO**



l'evoluzione delle sue prerogative

il team: percorso di cura per il “miglior risultato”

■ **regolabilità:** nuovi obiettivi

*desufflazioni programmate e
condivise per un soggetto ex obeso e
rieducato nello stile di vita*

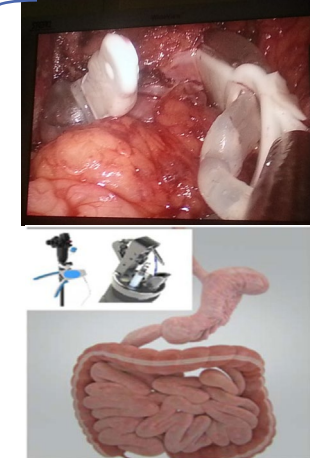
■ **reversibilità:** fine della cura

*possiamo rimuoverlo per una vita
normale oltre l'obesità*

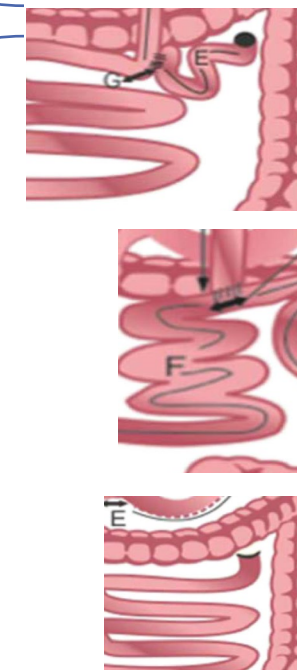
marzo '21 febbraio 23: 153 pazienti con il «miglior risultato»-%EWL 80%

Considerazioni e pensieri

Le ragioni della dequalificazione



Le ragioni per riflettere



Le ragioni della preoccupazione



Ho un percorso di cura

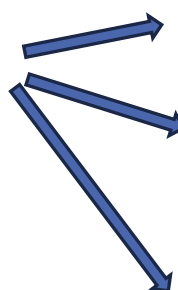
indicazione consolidate
follow-up

Team



Bendaggio gastrico

l'intervento meno invasivo
regolabile
reversibile
sequenziale



no trattamenti in eccesso

no effetti collaterali a lungo termine

soluzioni per il lungo termine:

farmaci, sequenzialità, restaurazione



SPESSE
CHI NON SI
ALLINEA
È PIÙ UTILE
DI QUANTO SI PENSI



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N A X O S



Grazie