

## **Comparison of outcomes between hand sewn and hand sewn/stapled gastrojejunostomy in laparoscopic Roux-en-Y gastric bypass**

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**Introduction:** The three most commonly performed gastro-jejunostomy techniques are circular stapled, handsewn and linear stapled. Circular stapled techniques are now less commonly performed as surgeons have learned laparoscopic suturing. A handsewn and linear stapled methods require similar skillsets they are suitable for comparison.

**Purpose:** To compare 12-month outcomes in patients in a stapled/handsewn gastrojejunostomy with a handsewn.

**Methodology:** Retrospective evaluation of a database of patients who underwent a laparoscopic Roux-en-Y gastric bypass by a single surgeon. Consecutive patients who underwent a linear stapled/handsewn gastrojejunostomy from 1<sup>st</sup> September 2016 till 31<sup>st</sup> December 2017 were compared to consecutive patients who underwent a handsewn gastrojejunostomy from 1<sup>st</sup> January 2014 till 31<sup>st</sup> December 2015. Rates of stricture, bleeding and weight Loss was recorded. Over this time period, there were no other changes in surgical technique or peri-operative management.

**Results:** 114 patients underwent hand-sewn gastrojejunostomy and 113 patients stapled/handsewn gastrojejunostomy. Postoperative gastroscopy rate was 33.3% in the handsewn group with 17 strictures compared with 20.4% and 3 strictures in the stapled/handsewn group (4 patients in the stapled group had an anastomotic bleed compared with 1 patient in the handsewn group. No statistically significant difference in weight loss was found in either group at 12 months

**Conclusions:** There was a significant increase in anastomotic strictures in the handsewn gastrojejunostomy group. Although there was a slight increase in anastomotic bleeding in the stapled/handsewn group this was not statistically significant.