



MILANO 4 - 5 OTTOBRE 2024

**CHIRURGIA BARIATRICA
PER IMMAGINI
UNA DIVERSA PROSPETTIVA**

PRESIDENTE ALESSANDRO GIOVANELLI

Comitato Scientifico

Daniele Tassinari | Angelo Salerno

Roberto Grassi | Alfonso Reginelli | Alfredo Genco

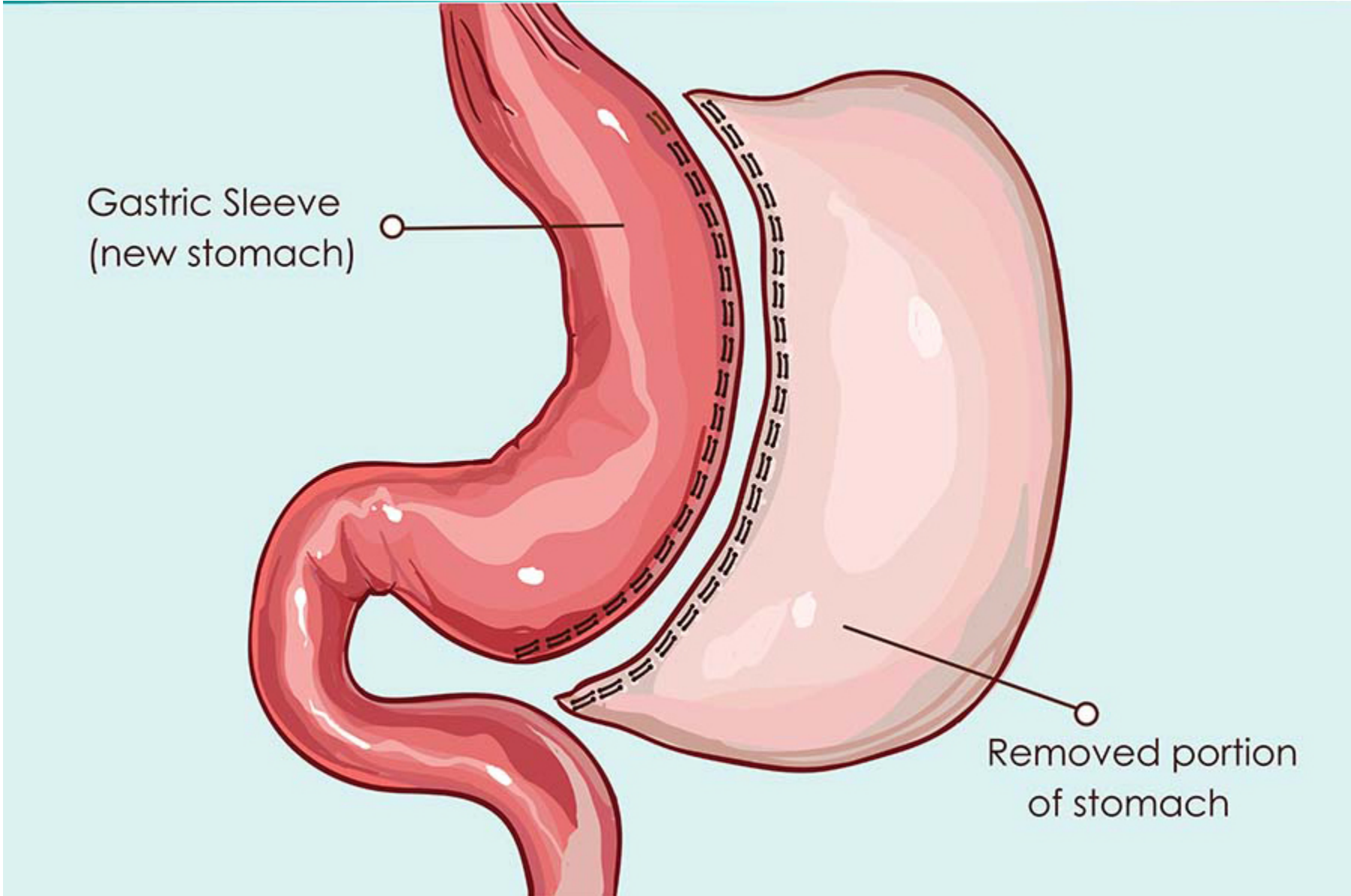
Diagnostica endoscopica in pazienti candidati a redo-surgery

DR. ANDREA FORMIGA

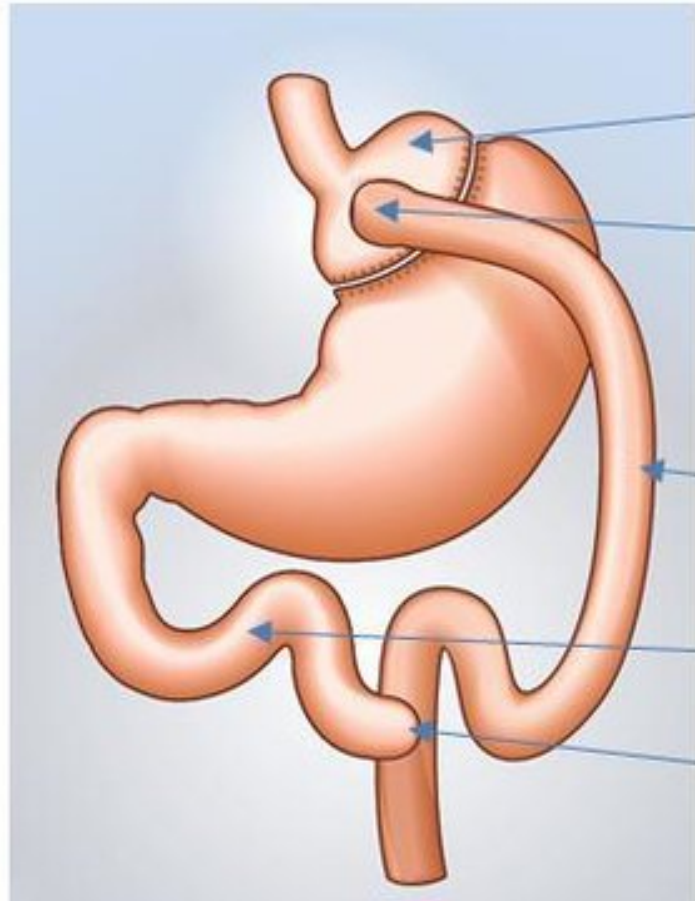
C.I.B.O. MILANO

Milano, 5 ottobre 2024

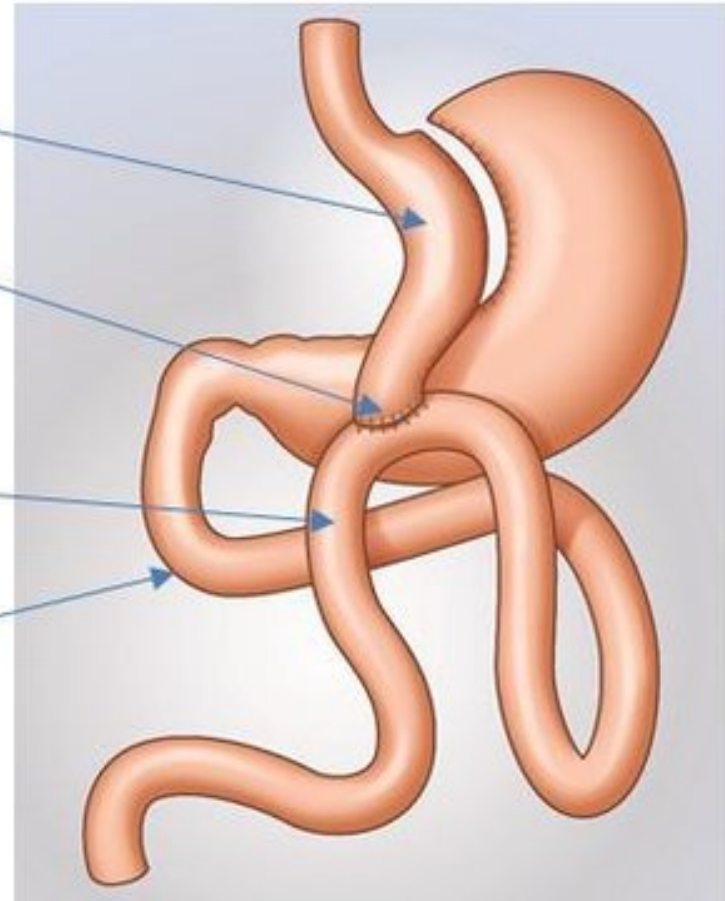




Roux-en-Y gastric bypass (RYGB)



One anastomosis gastric bypass (OAGB)



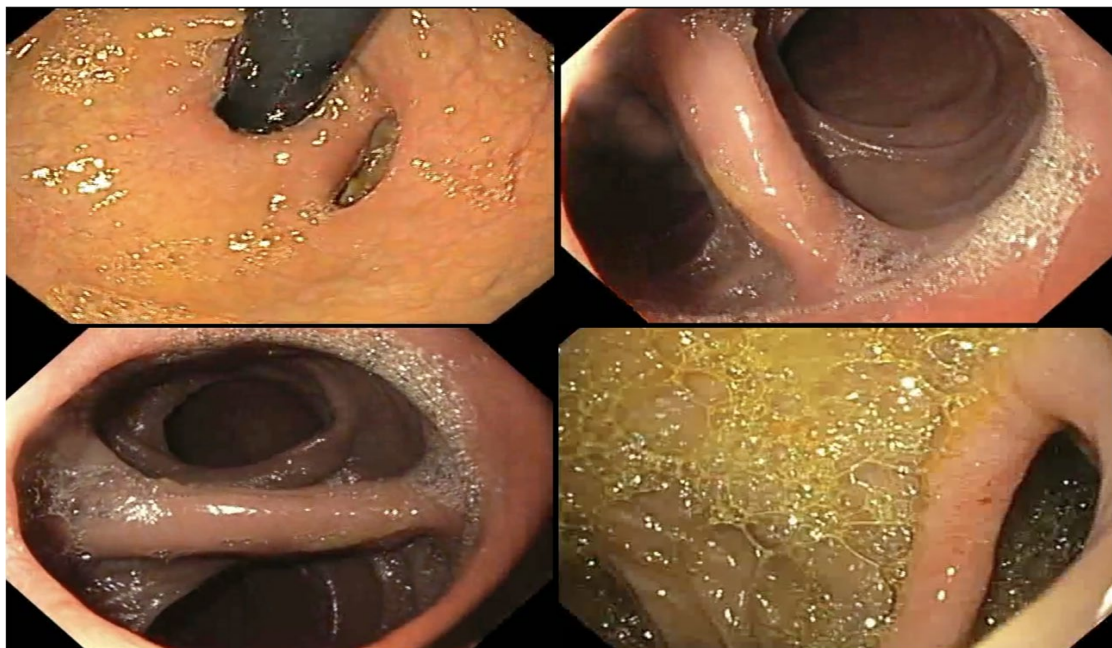
gastric pouch

gastrojejunal
anastomosis

alimentary limb

biliary limb

jejunojejunal
anastomosis



Valutazione endoscopica preoperatoria:

- 1) Lunghezza e larghezza pouch gastrica
- 2) Diametro anastomosi gastro-digiunale
- 3) Posizione frontale/laterale anastomosi gastro-digiunale
- 4) Fragilità mucosa perianastomotica e sanguinamento
- 5) Identificazione ansa alimentare e ansa biliare

Sterile Hot Snare

Heiße sterile Schlinge
Anse chaude stérilisée
Trampa estéril caliente
Sterile caldo trappola
Καυτή αποστειρωμένη λαβίδα

Стерильная горячая ловушка
Steril Varm Snare
Steriele hete strik
Armadilha quente estéril
滅菌ホットスネア

1 PC

24mm

2.3 mm
Diameter

2.8 mm
Working channel

230 cm
Working length

REF PFS01-02423230 2019-10-25

LOT ME191025303 2024-10-24

00732300 Rev. B

REF 00711170

Contents 1

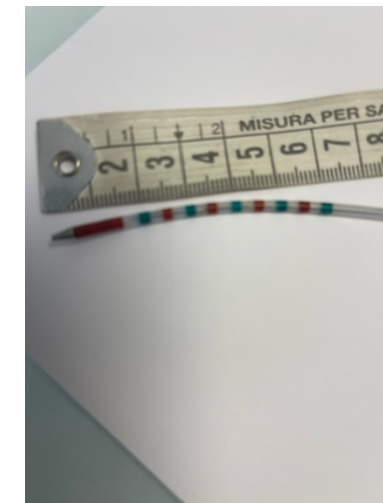
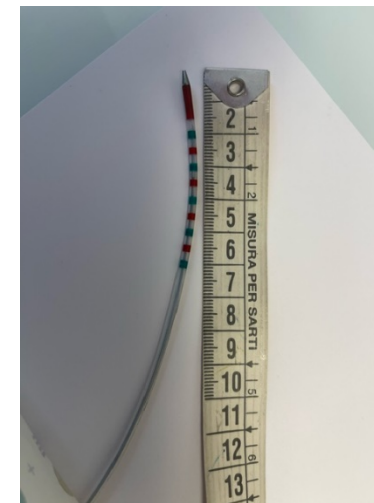
3.0 cm

Ø 2.5 mm

230 cm

2.8 mm

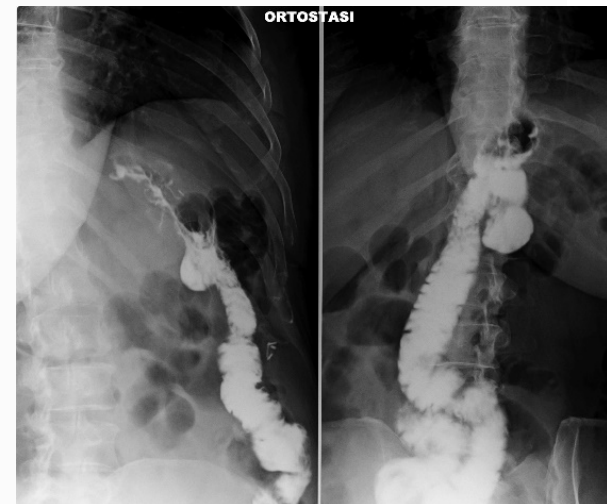
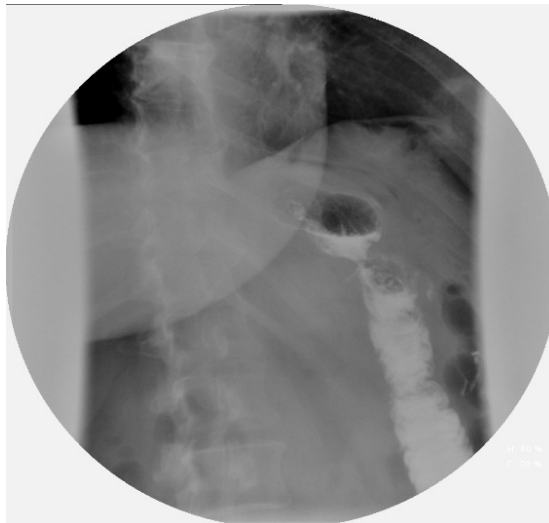
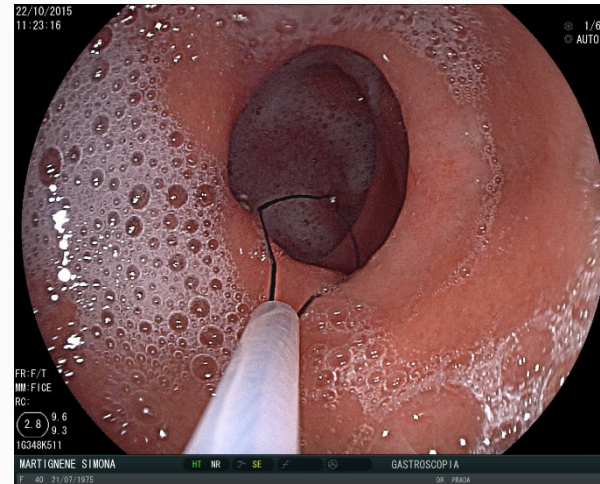
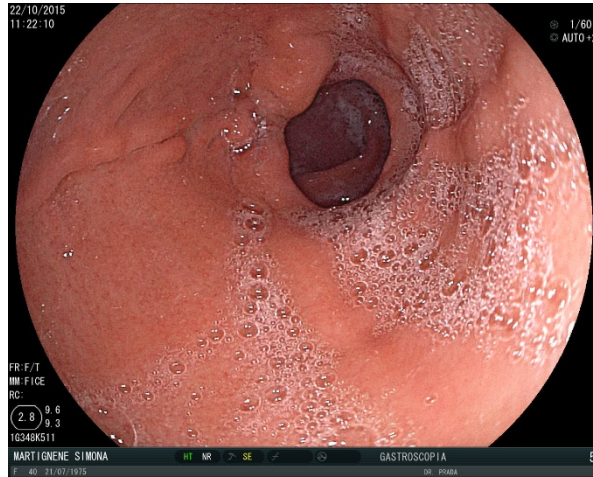
00732300 Rev. B



Misurazione endoscopica lunghezze e diametri dei visceri da revisionare tramite utilizzo di strumenti già in uso per endoscopia di routine (es. anse da polipectomia, pinze biotipiche, cateteri centimetrati)

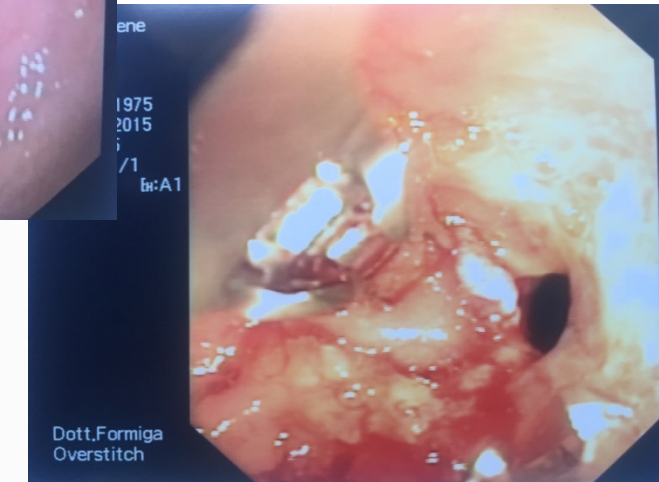
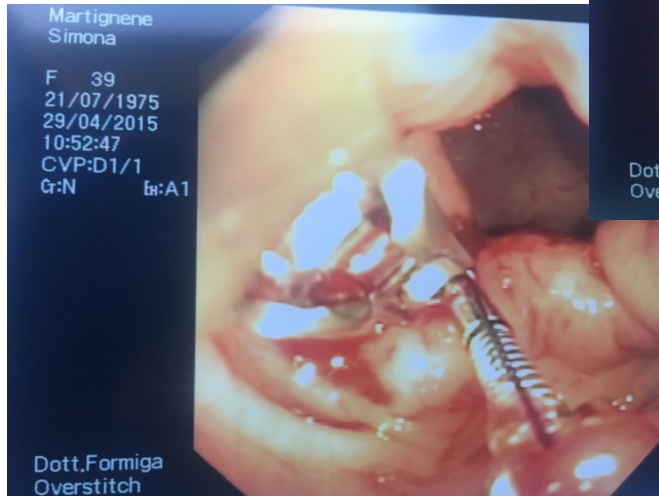
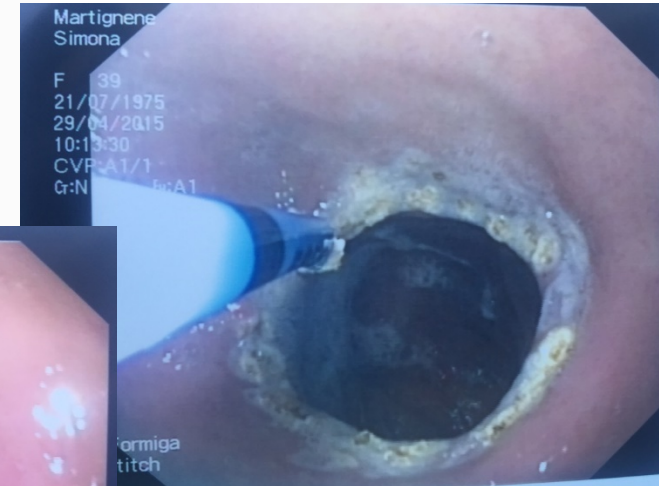
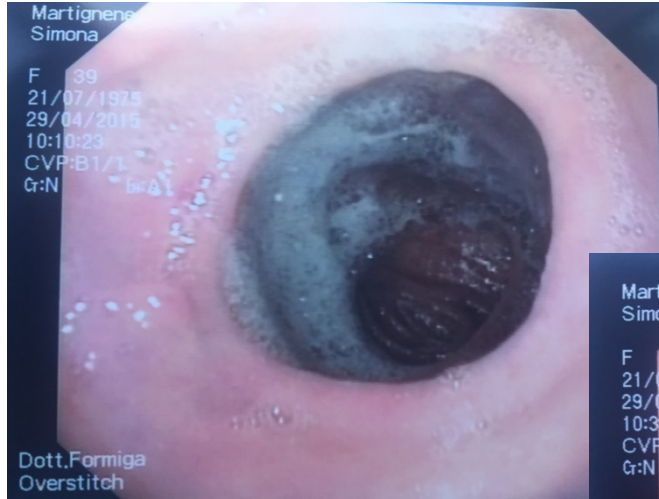


OVERSTITCH APOLLO 3 REDO SURGERY RYGB FALLITO

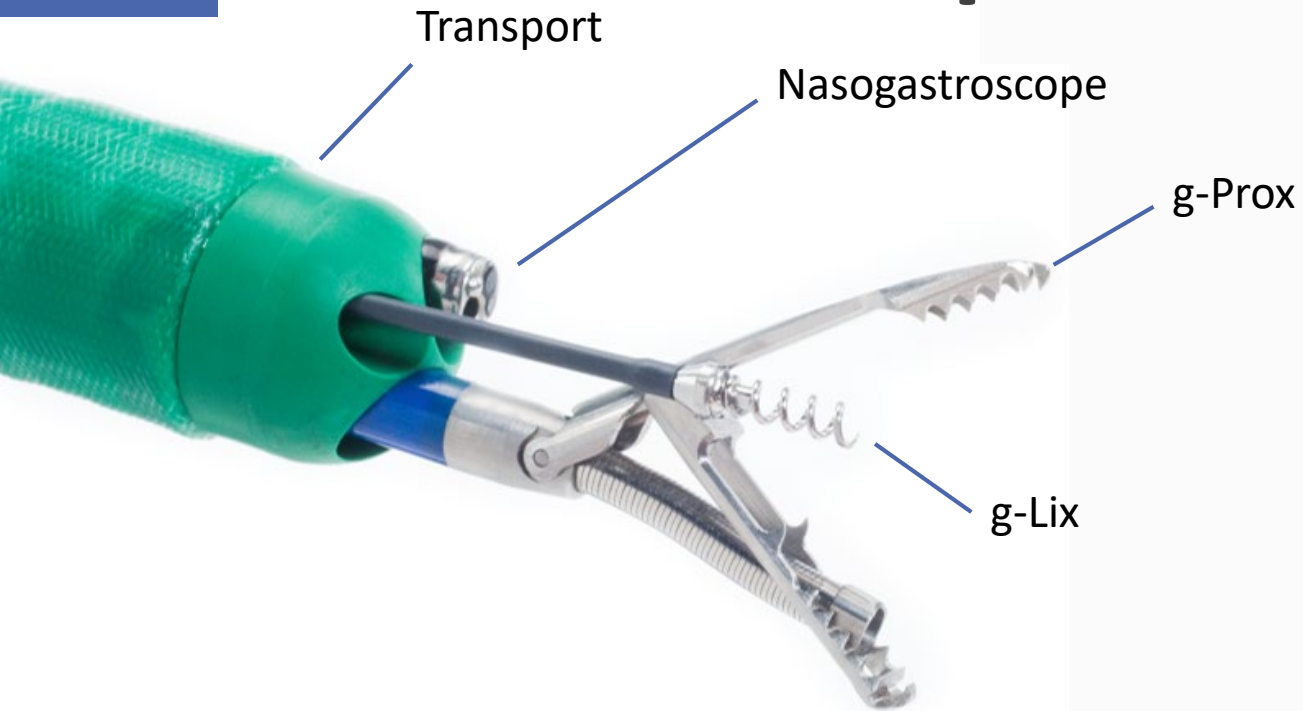


Misurazione endoscopica
Outlet in RYGBP

OVERSTITCH APOLLO 4 REDO SURGERY RYGB FALLITO



Incisionless Operating Platform™ (IOP)



g-Cath is loaded inside g-Prox and advanced when ready



Incis g-Lix[™]less Operating Platform[™] (IOP)

g-Lix “grabs” and retracts tissue layers into jaws of g-Prox to create tissue plication

g-Prox[®]

g-Prox 33 folds and holds pliated tissue. **33 mm** jaws creates large plications (up to 7 cm) and provides passage of g-Cath

FOR ROSE procedures:
G-Prox 16 is used

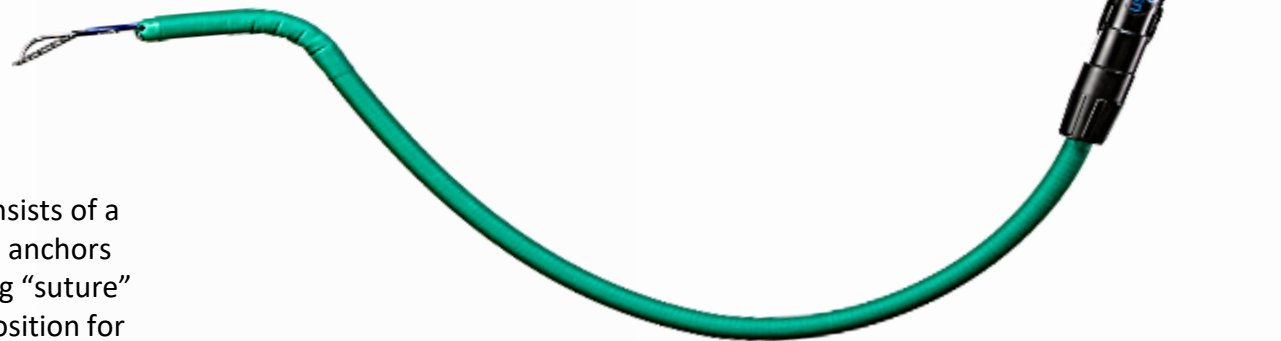
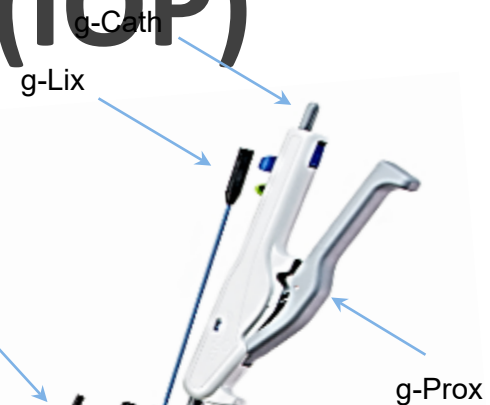
g-Cath[™]

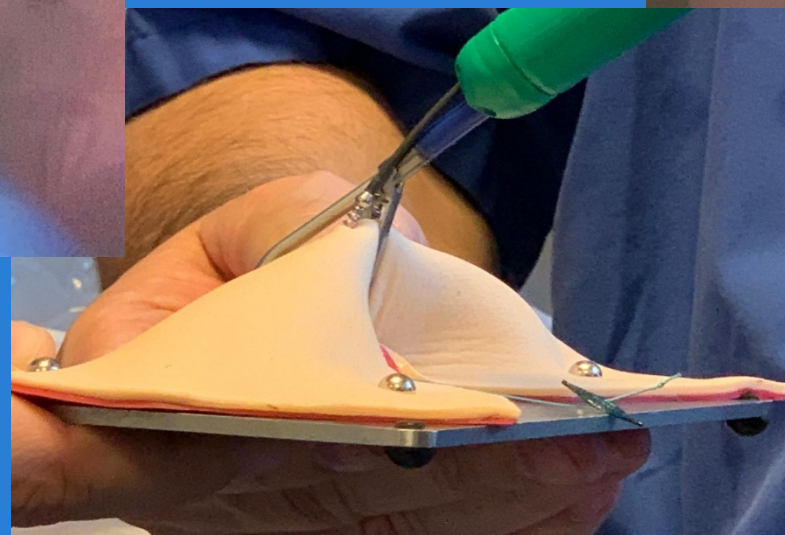
g-Cath fits inside g-Prox and consists of a hollow needle that deploys two anchors (“anchor pair”) and a connecting “suture” that holds serosal tissue in apposition for durable serosal tissue healing

TransPort[®]

Transport is an integrated multichannel, endoscopic, steerable overtube that houses g-Lix, g-Prox and g-Cath along with an off-the-shelf scope and allows the operator to navigate anywhere inside the stomach and plicate tissue in multiple locations. Has unique 180° retroflex capability

Endoscopic camera channel for pediatric / trans nasal gastroscopy
5 mm / 105 mm





POSE II VIDEO REAL – FINAL EXPLORATION



APOLLO OVERSTITCH SYSTEM

DOUBLE CHANNEL
OLYMPUS GASTROSCOPE



ANCHOR EXCHANGE

NEEDLE DRIVER HANDLE

APOLLO OVERSTITCH
SYSTEM



OVERSTITCH SUTURE CINCH

OVERTUBE



TISSUE HELIX



2-0 POLYPROPYLENE SUTURE



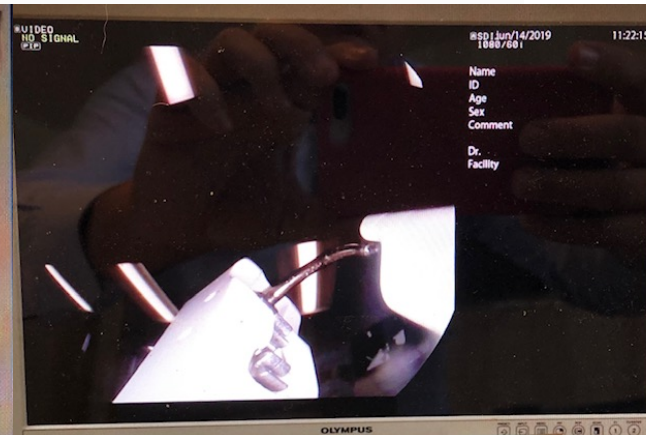
apollo
endosurgery



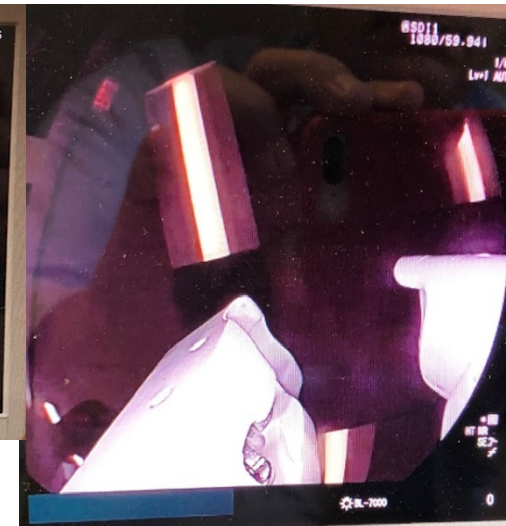
Overstitch SX: different views:



Olympus

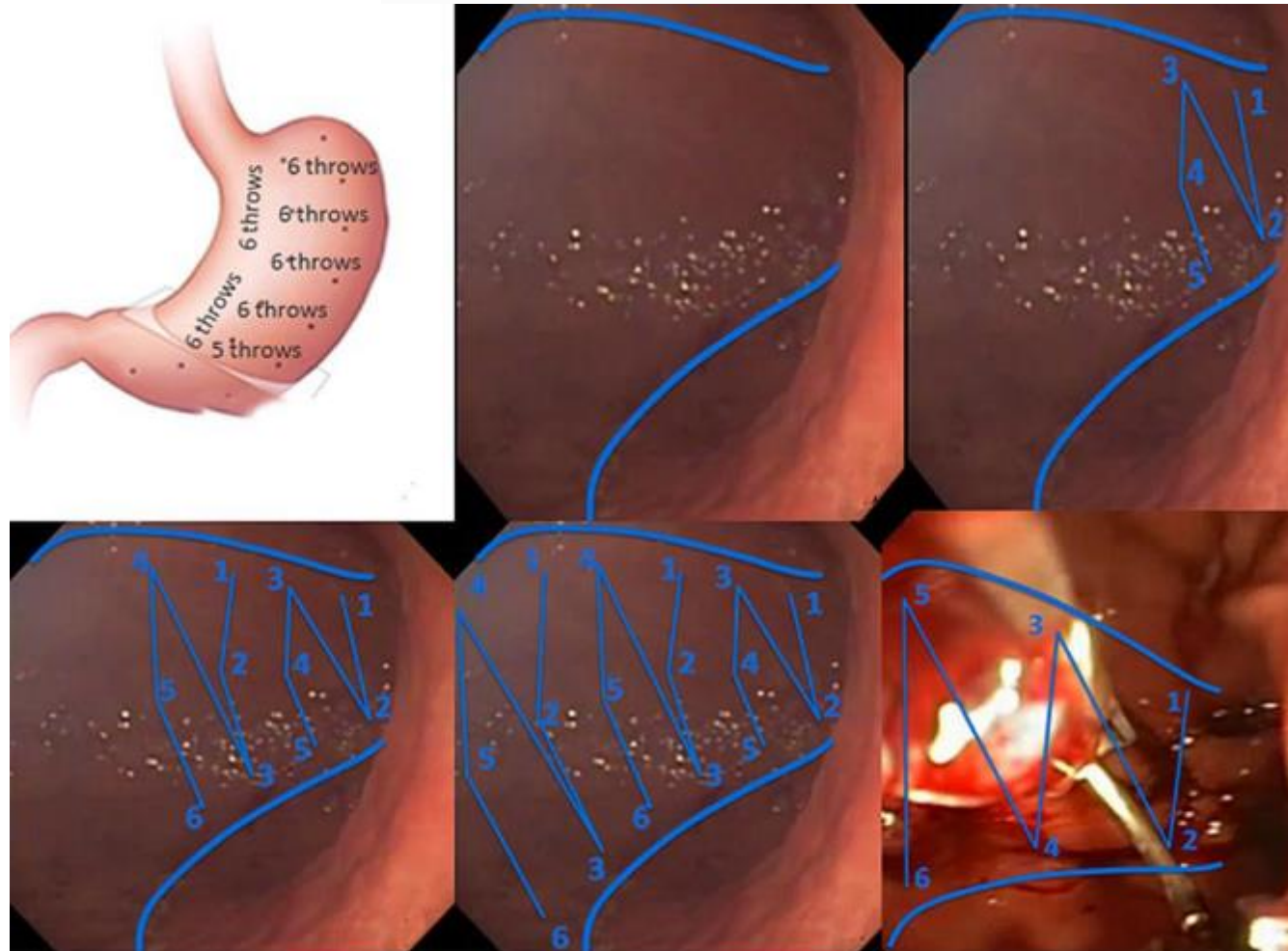


Pentax

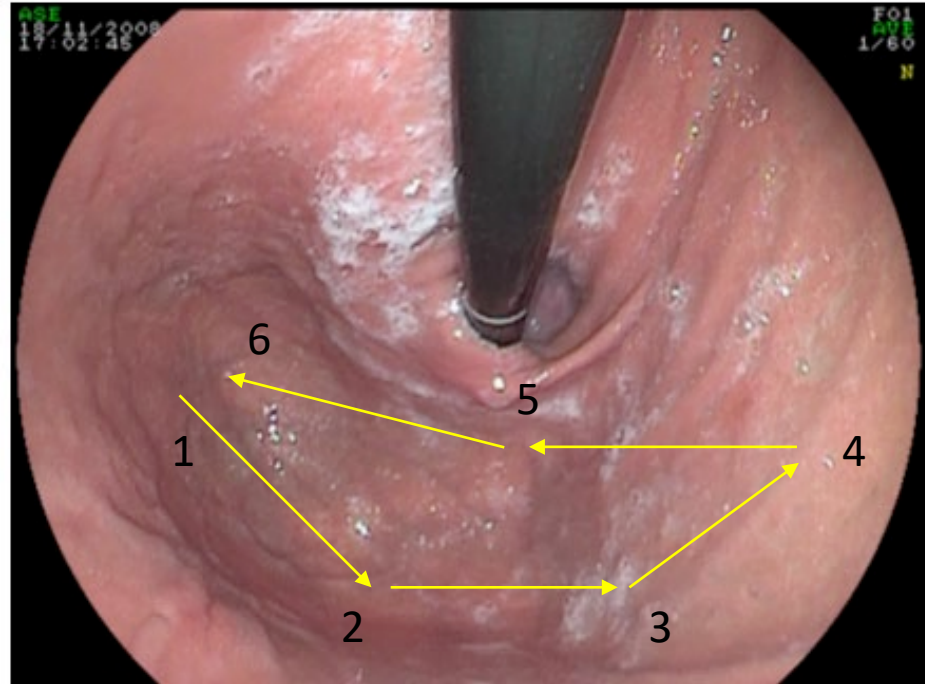
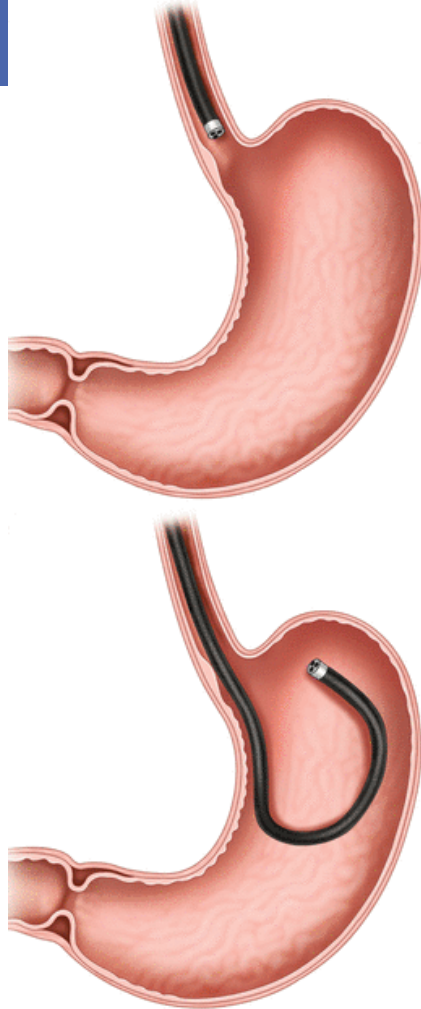


Fuji

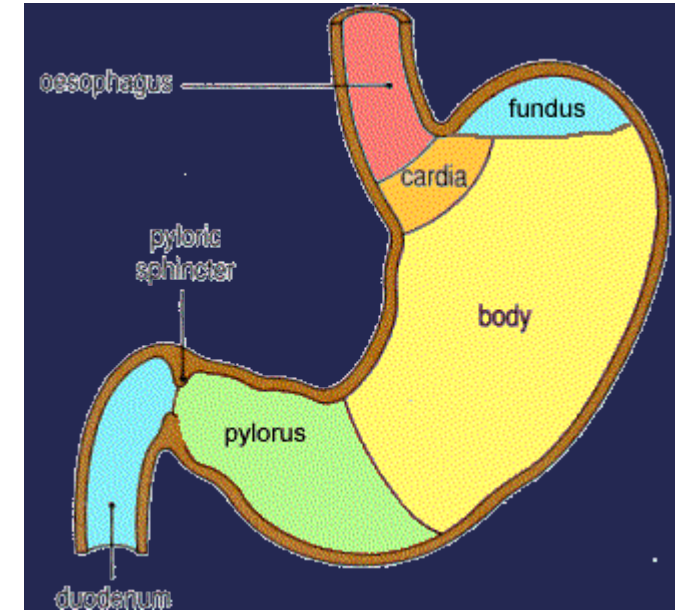
**AVOID THE SMALL CURVATURE OF THE STOMACH
RUNNING STITCHES FROM ANTRUM TO BODY
HARD PPLICATION OF THE FUNDUS**



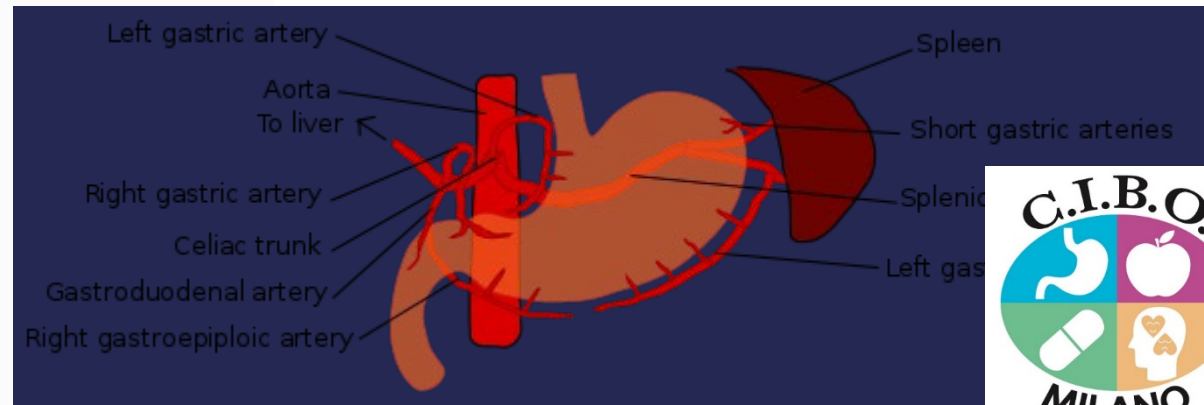
HARD PPLICATION OF THE FUNDUS

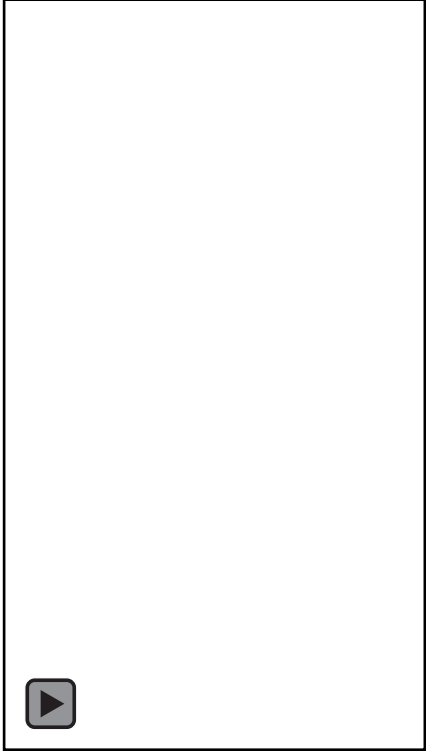
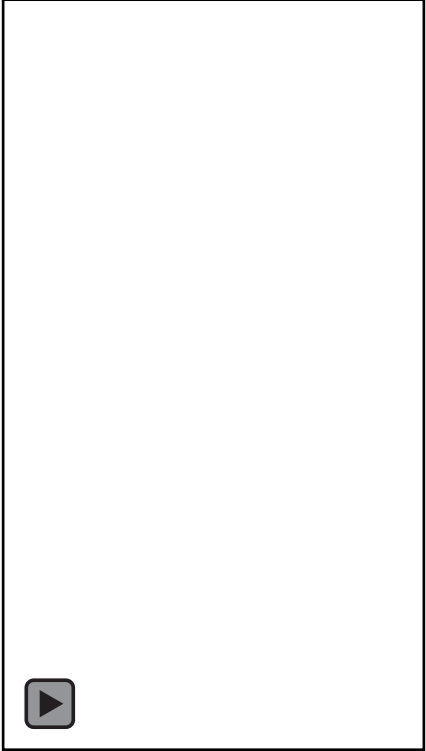
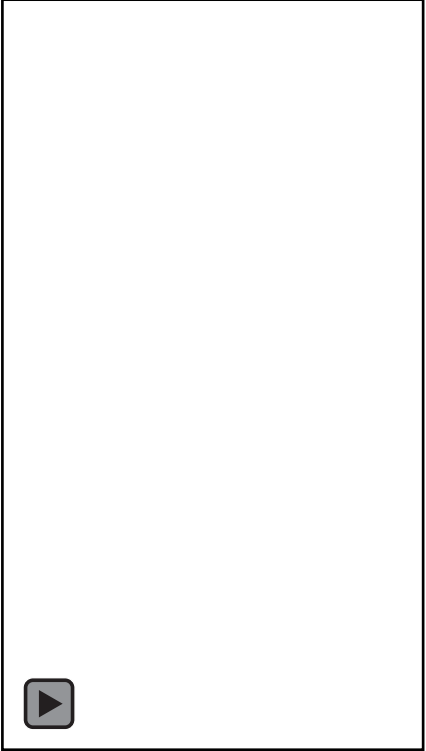


**HARD
RETROFLEXION
DOUBLE CHANNEL
GASTROSCOPE**

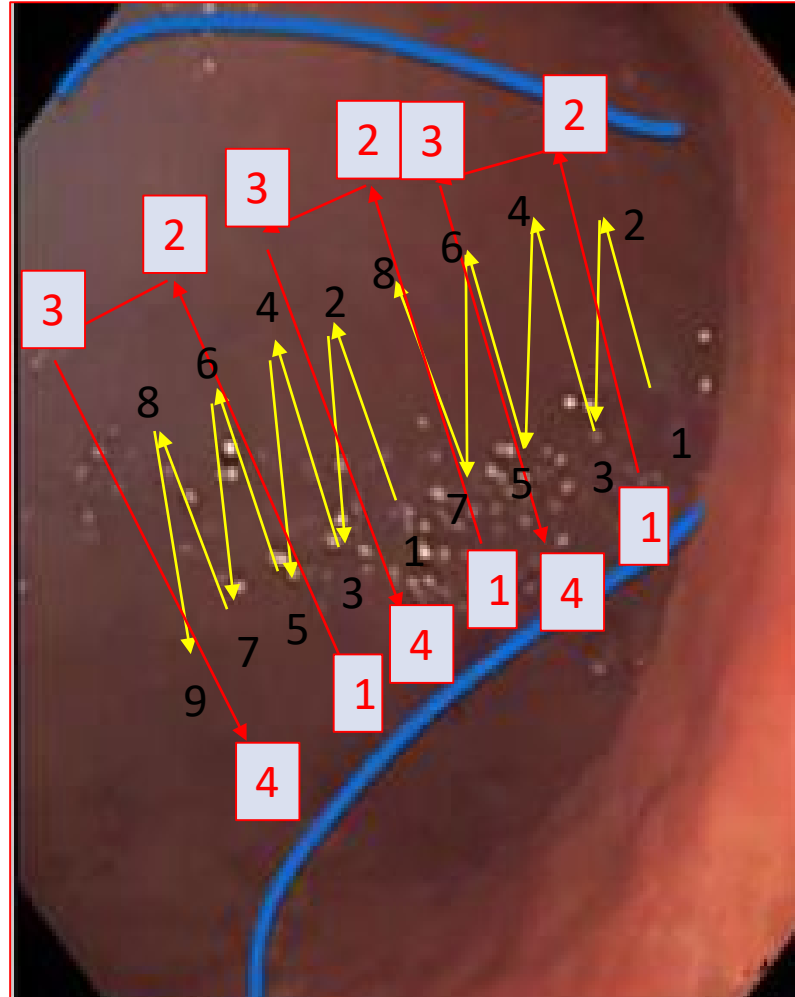


BE CAREFUL



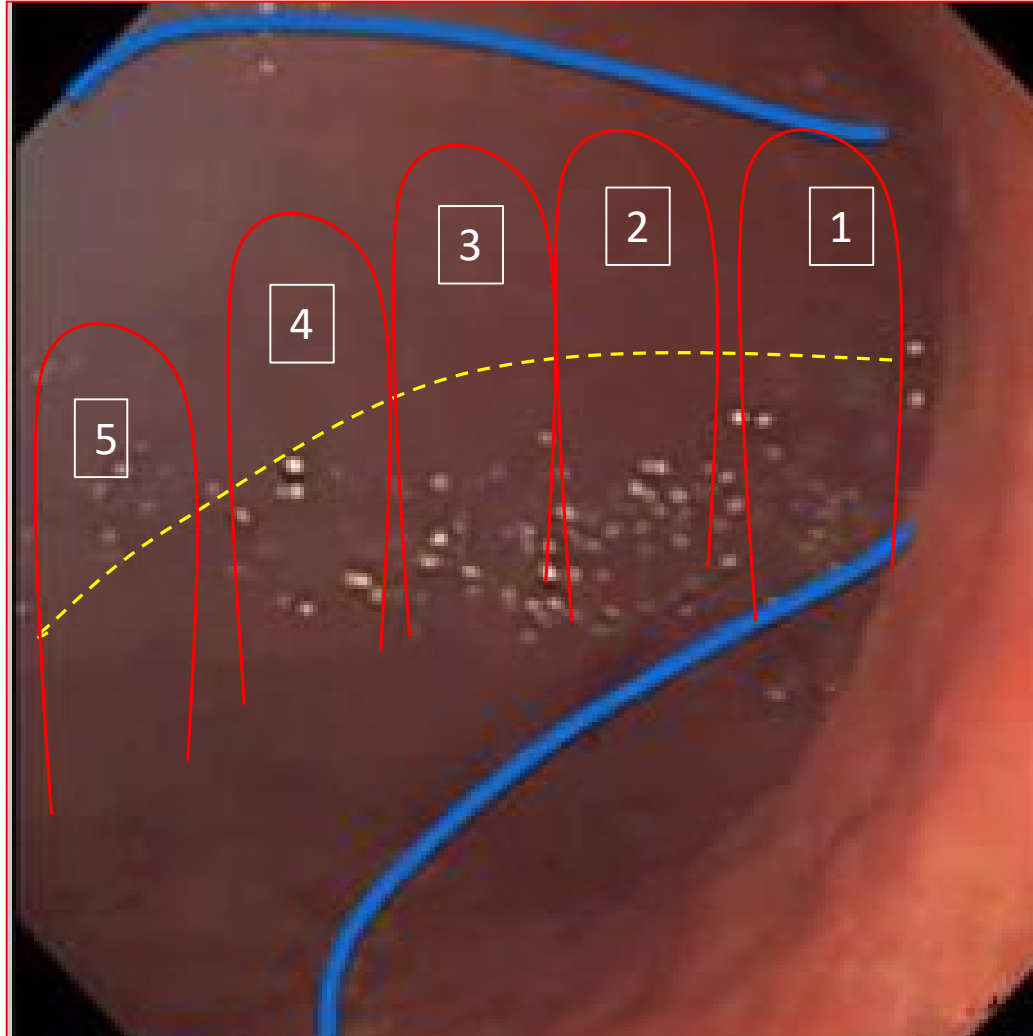


**AVOID THE SMALL CURVATURE OF THE STOMACH
RUNNING STITCHES FROM ANTRUM TO BODY
HARD PPLICATION OF THE FUNDUS**



**Our
personal
technique
How I do it**

REDO OF PREVIOUS SLEEVE GASTRECTOMY

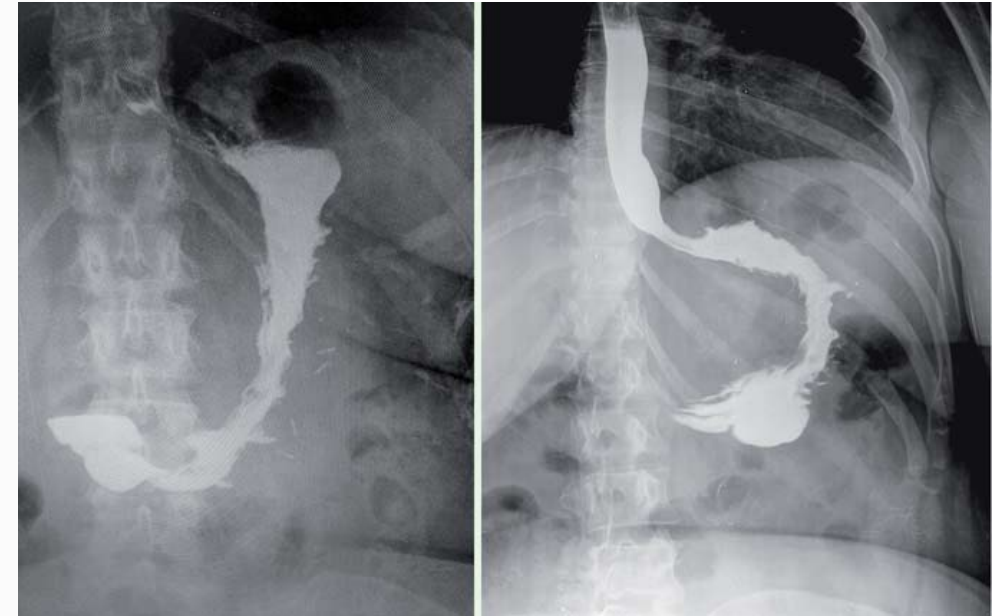


**Our
personal
technique
How I do it**

U running sutures from
Incisura to passage
between body-fundus

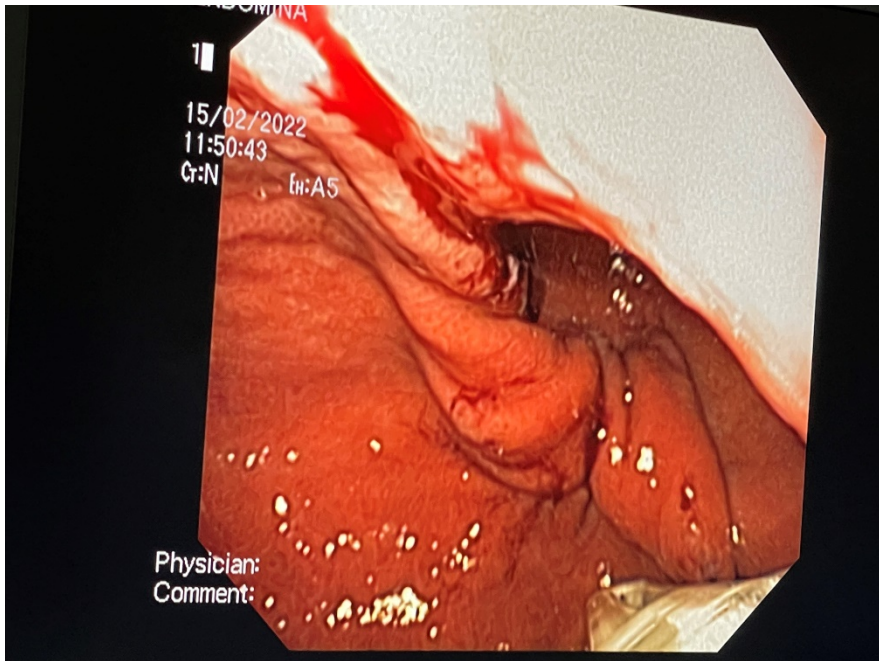


Upper GI endoscopy
after 3 months



Upper GI X-ray with Gastrographin
after the procedure

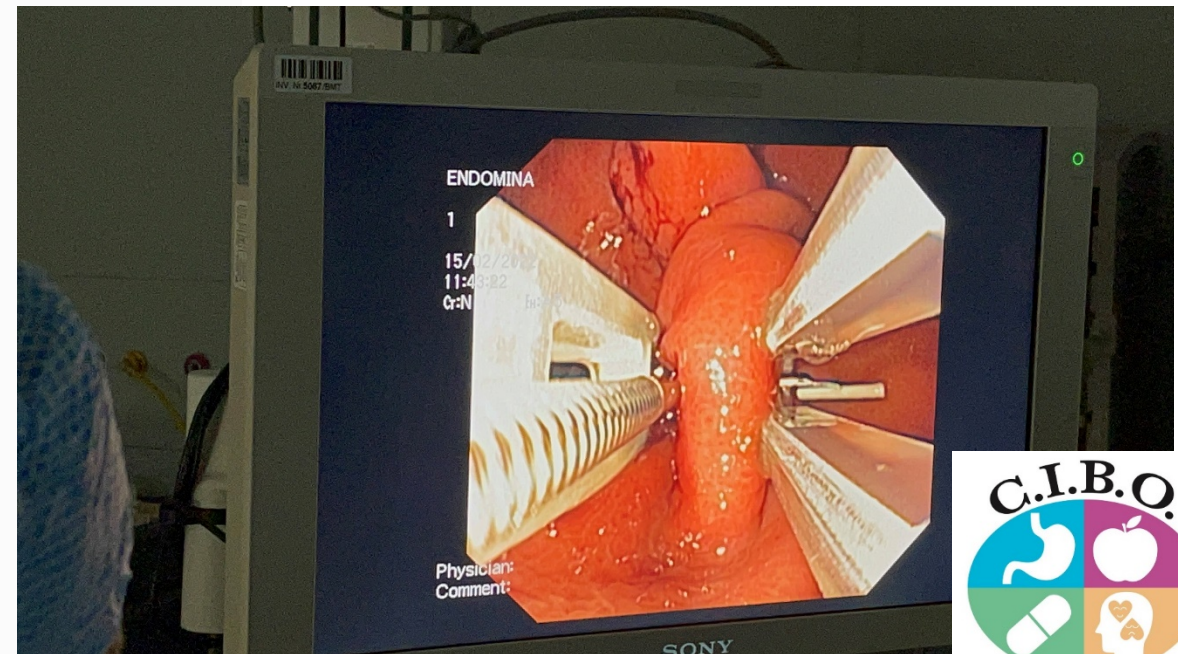
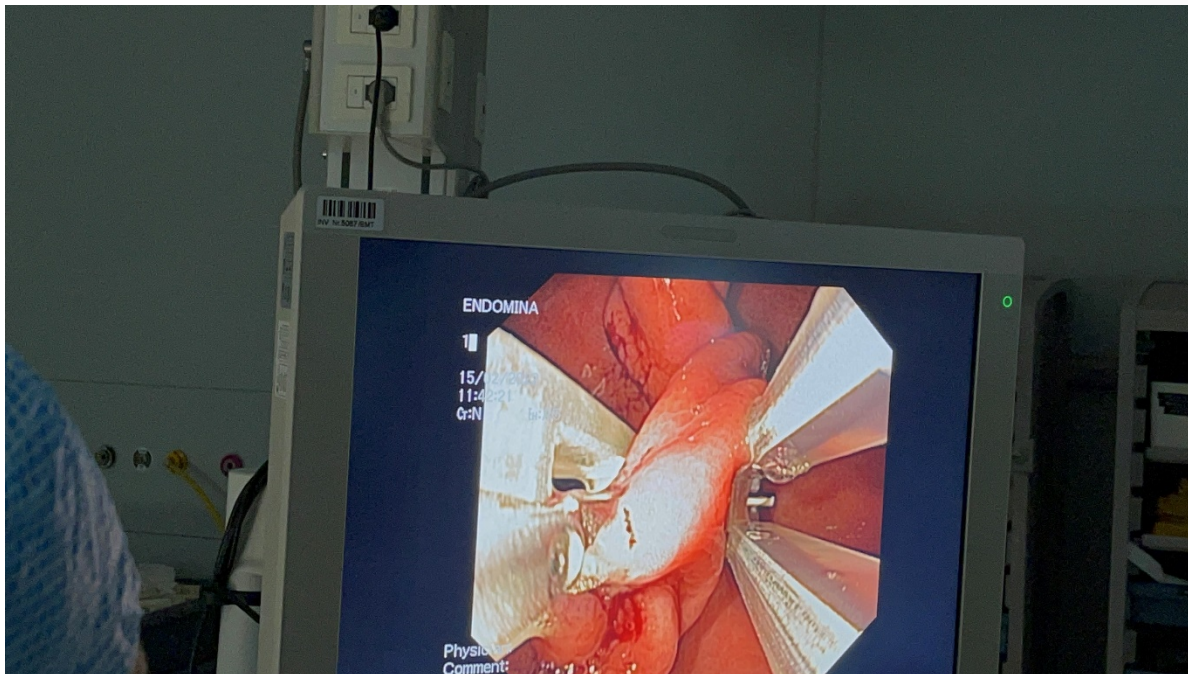


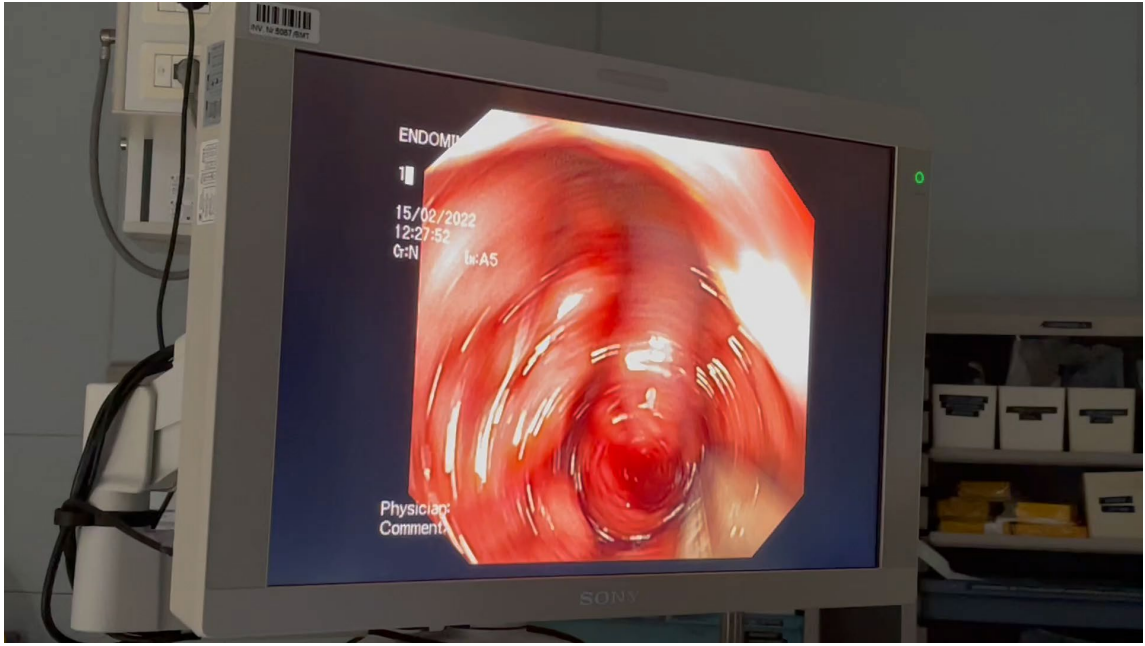


ENDOMINA

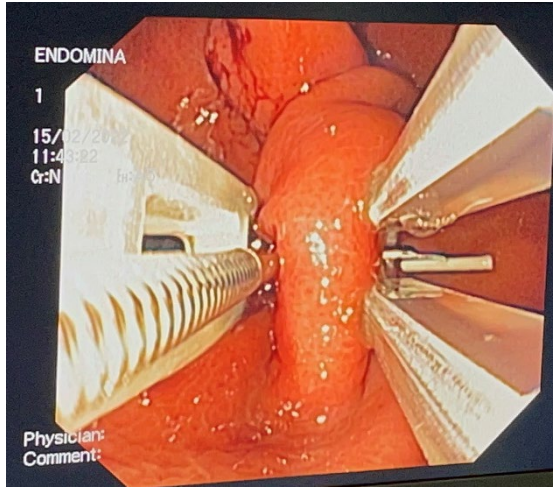


The triangulation platform enables an endoscopist to position different instruments relative to one another.
 Forceps can be used to grab and pull tissue inside endomina to make a pilation.
 With endomina, pairs of tissue glissons can be approximated and stitched to one another.

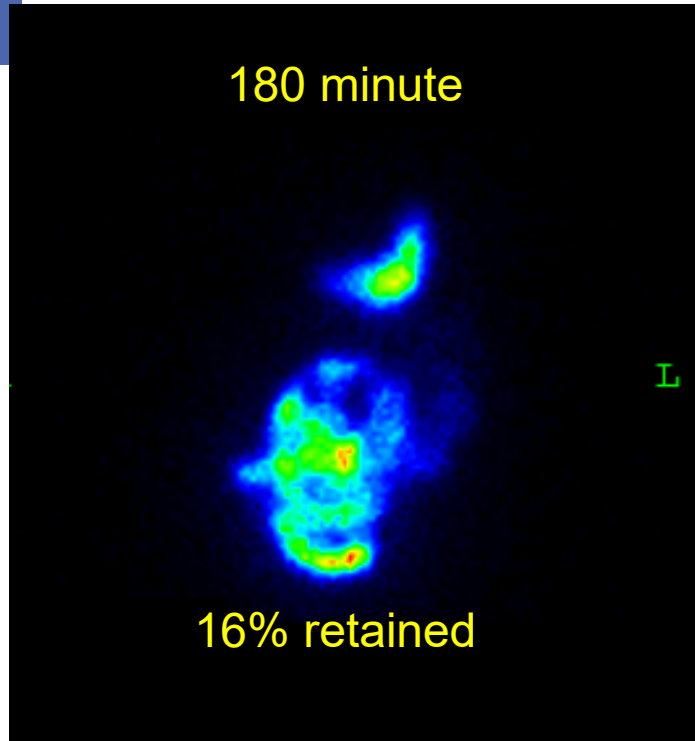




Endomina



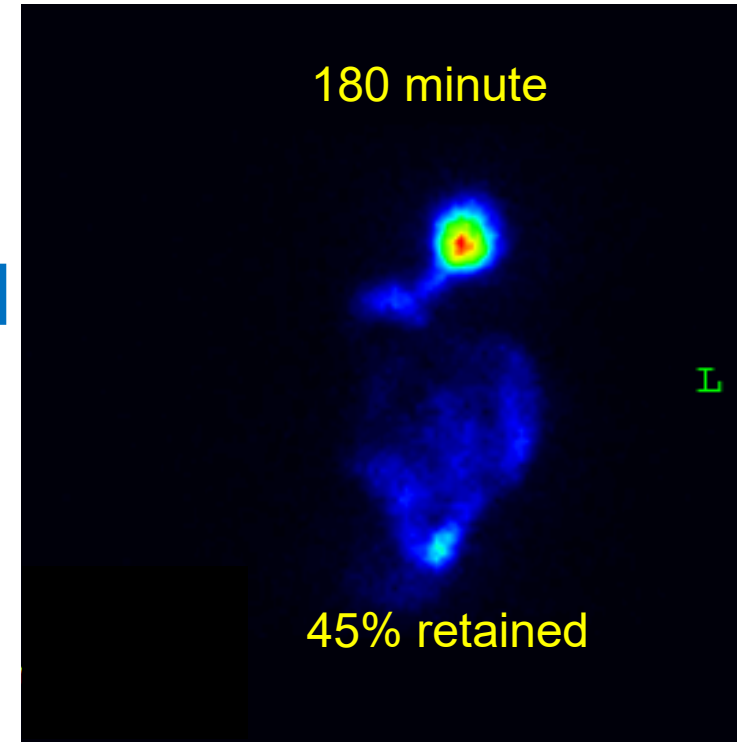
Pre Gastroplasty



Gastric Scintigraphy

Maximum Tolerated
Volume Test

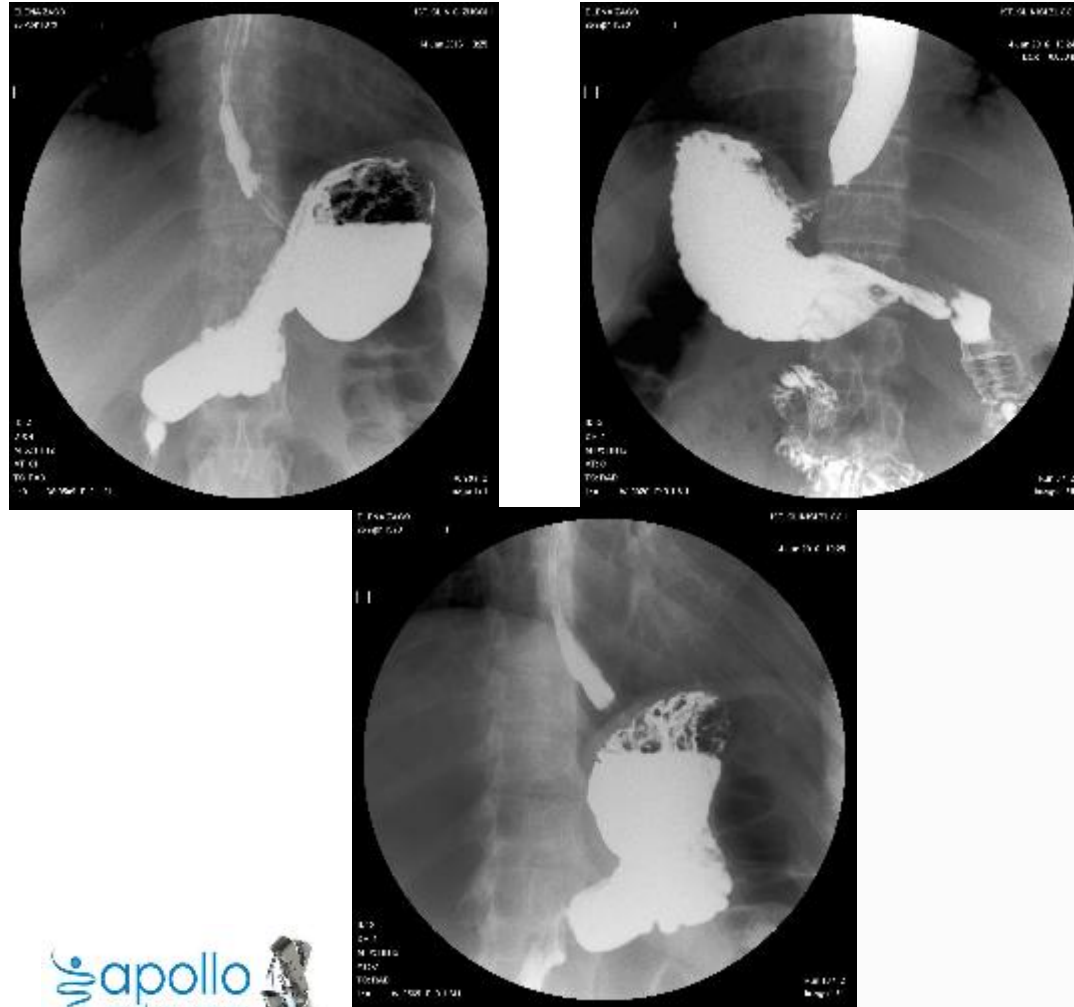
3 Months Post Gastroplasty



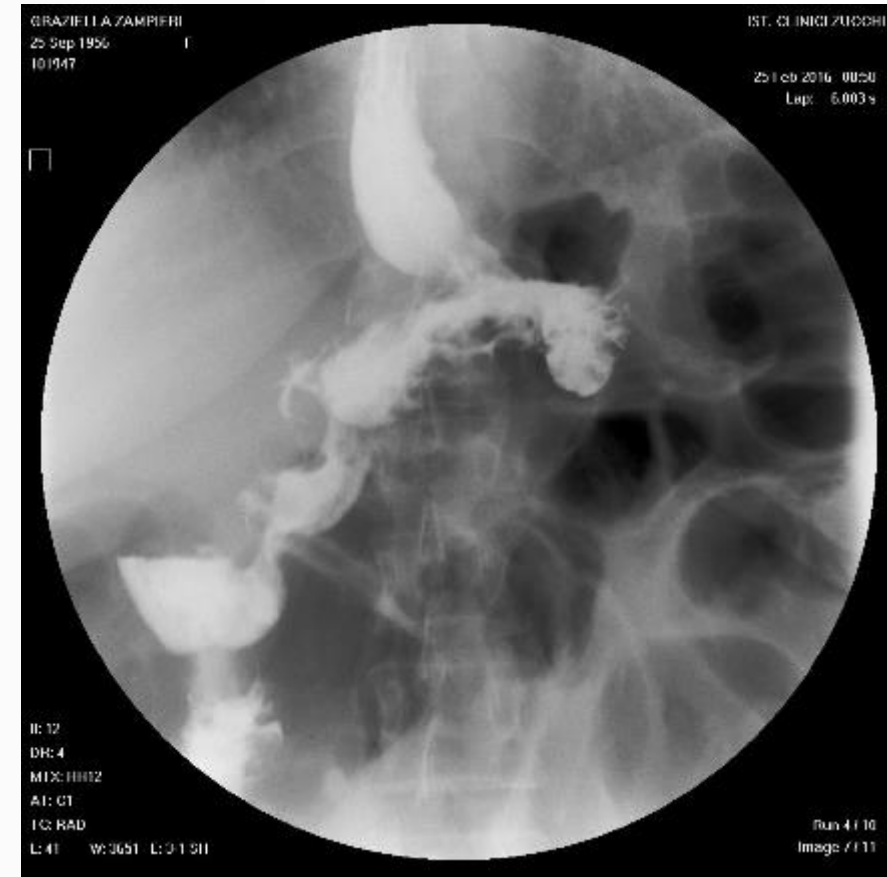
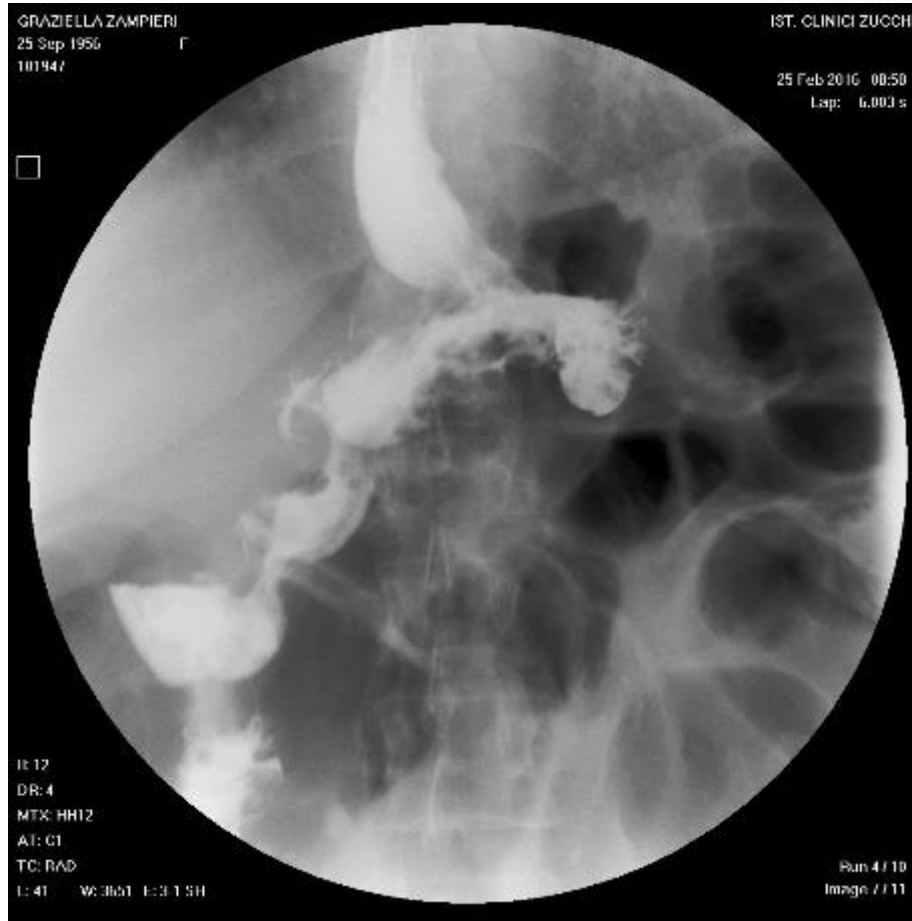
Overstitch Advisory Board Meeting **ESG RESULTS** 14-5 April 2016

BEFORE PLICATION

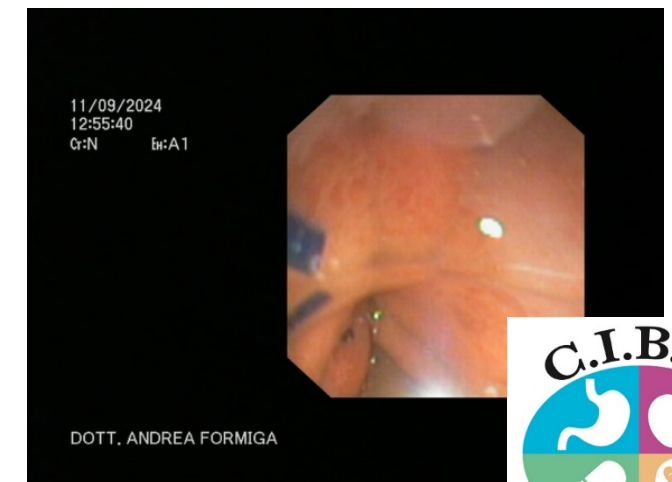
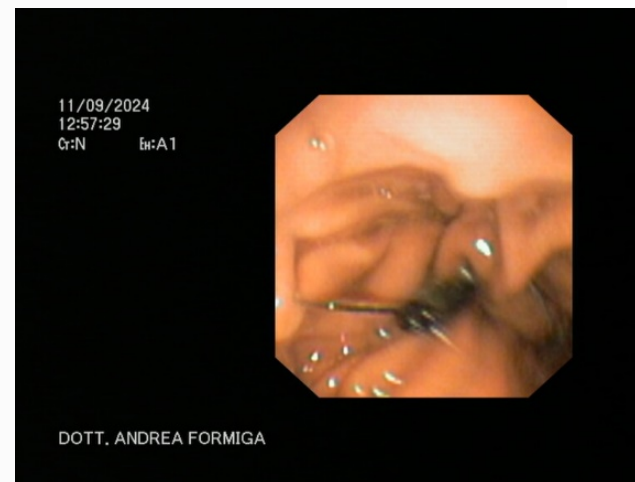
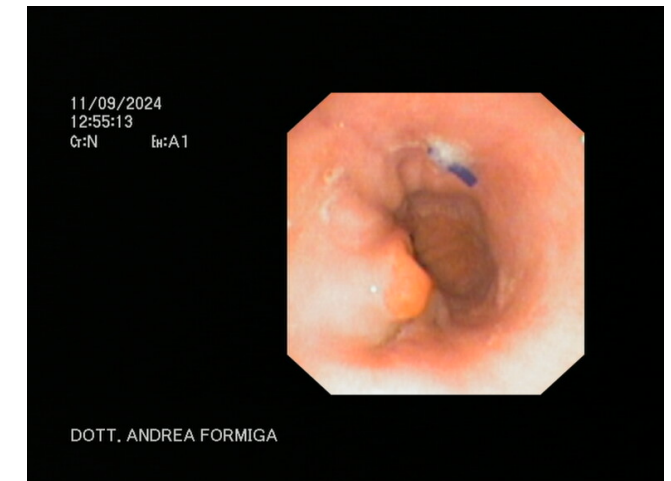
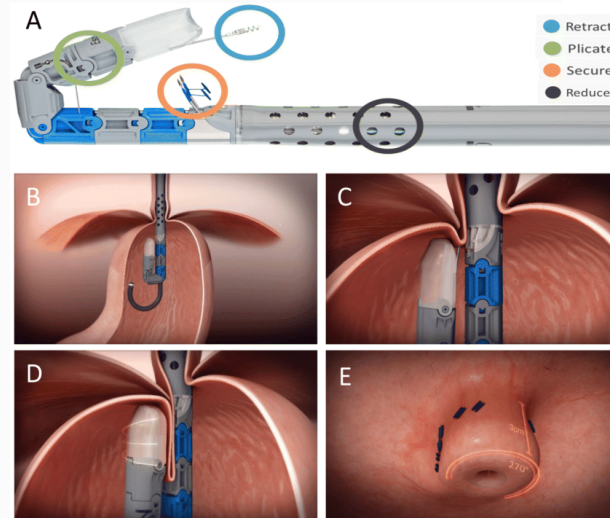
AFTER PLICATION



ESG: RESULT AFTER ENDOSCOPIC PLICATION 2

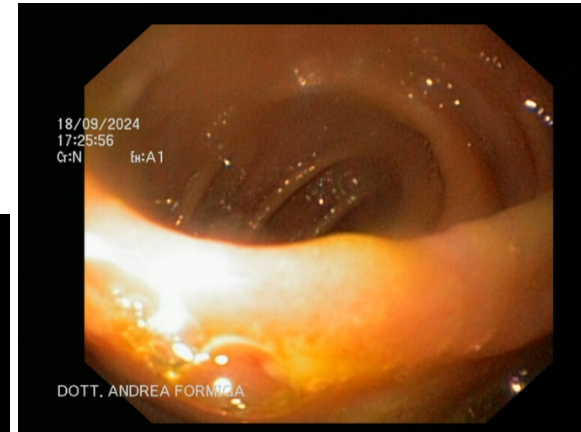
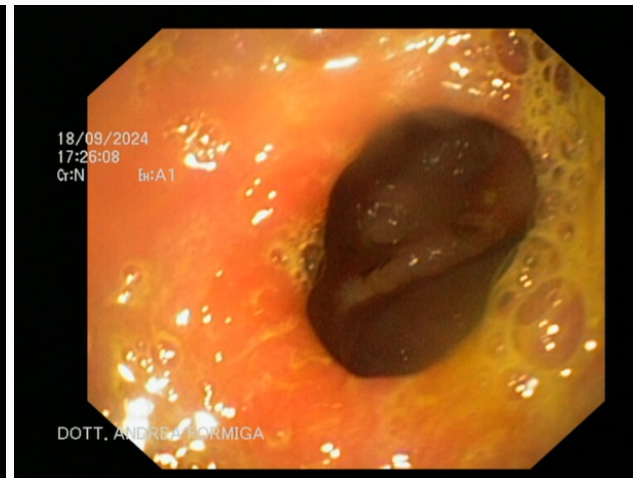
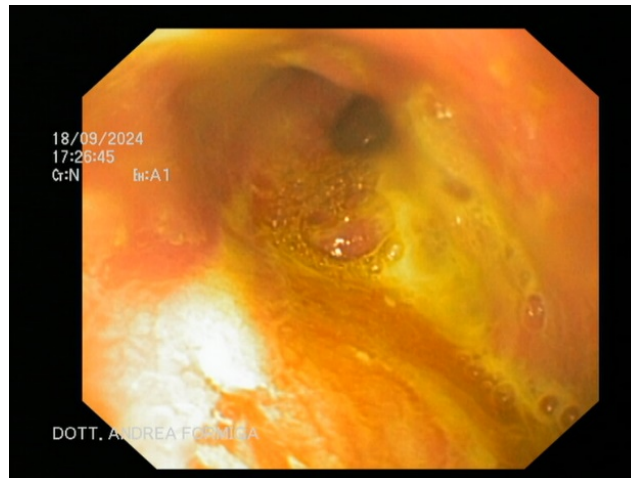
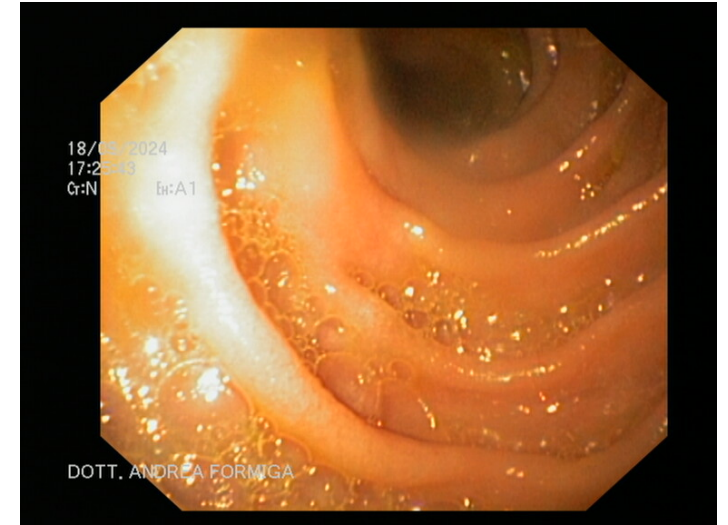


Controllo endoscopico TIF A 3 mesi in progresso Pose



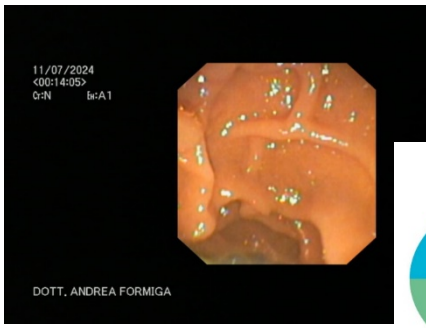
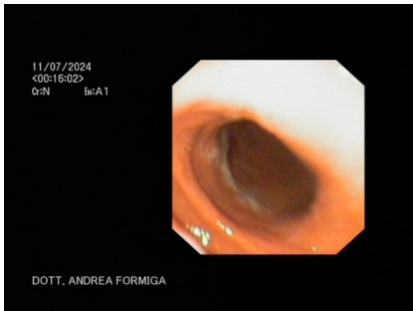
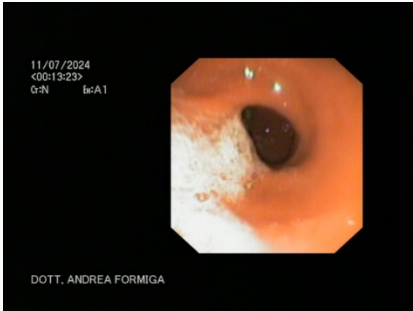
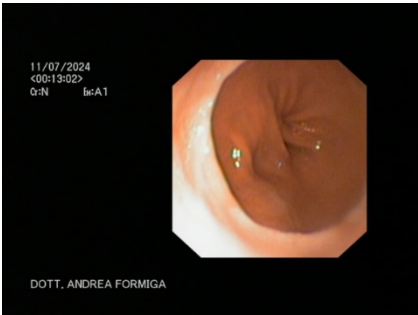
Controllo endoscopico preoperatorio:

Pregresso RYGBP

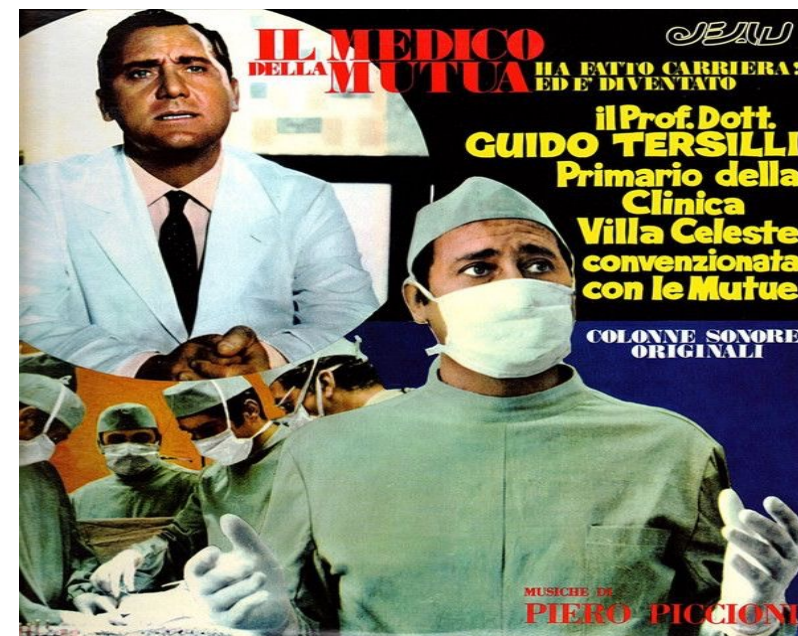


Controllo endoscopico a 3 anni

Previous. Sleeve Gastrectomy



GRAZIE PER L'ATTENZIONE





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Grazie

