

A Comparison of Weight Loss and Late Complications of LAP-BAND® System and Swedish Band in a North American Population

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Background: From August 1996 to December 2001, laparoscopic adjustable gastric banding was performed on 162 North American patients who were referred and followed-up by this center. All band placements were performed by surgeons outside the United States (initially in Sweden, later also in Mexico) who had extensive experience with their respective procedure.

Methods: Of the 162 patients, 51 had received the Swedish Band (Obtech/Ethicon) and 111 had received the LAP-BAND System (INAMED Health).

Demographics	Swedish Band	LAP-BAND
Number of Patients	51	111
Mean Age (years)	47	44
Female n (%)	49 (92%)	92 (83%)
Mean Initial BMI	44.5	48.3
Initial BMI >50 n (%)	8 (16%)	37 (33%)

Results:

	Number of Patients n (%)		BMI		%EWL	
	Swedish Band	LAP- BAND	Swedish Band	LAP- BAND	Swedish Band	LAP- BAND
Initial	51 (100)	111 (100)	44.5	48.3	—	—
12 mo	25 (53)	41 (37)	30.9	33.9	63	60
24 mo	21 (41)	31 (28)	32.0	30.4	57	76
36 mo	31 (61)	27 (34)	32.7	32.6	55	60
48 mo	18 (35)	5 (5)	34.7	38.6	46	55
60 mo	7 (14)	1 (1)	30.0	51.0	69	17
72 mo	2 (4)	N/A	30.0	N/A	52	N/A

Late Complications	Swedish Band n (%)	LAP-BAND n (%)
Erosion	4 (8)	1 (1)
Band Leakage	7 (14)	0 (0)
Dilation/Band Slippage	5 (10)	2 (2)
Port Leakage	1 (2)	2 (2)
Port Infection	2 (4)	0 (0)
Revision to GBP	8 (16)	1 (2)
Band Removed (only)	2 (4)	2 (2)

Conclusions: Patients who had received the LAP-BAND System experienced fewer complications and similar weight loss compared to those who received the Swedish Band. This is particularly noteworthy since the LAP-BAND patient population was initially a heavier group, with 33% (37/111) having a baseline BMI >50, compared to 16% (8/51) in the Swedish Band group. The greatest difference between the two groups was the incidence of leakage from the band component; which was 14% with the Swedish Band and 0% with the LAP-BAND System. In addition, adjustments were easier with the LAP-BAND System, as the effect of adding or removing specific volumes was more predictable.

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