

Venous Thromboembolism Is An Avoidable Complication Of Bariatric Surgery

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The Problem



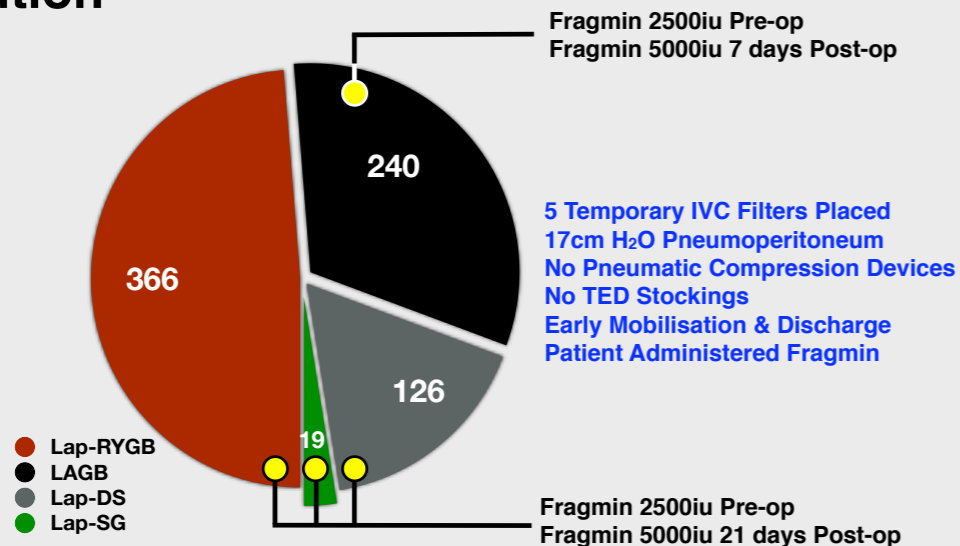
The combination of morbid obesity and laparoscopic surgery presents a significant increase in the risk of venous thromboembolic (VTE) events. A survey of American bariatric surgeons revealed that half had more than 1 patient die of VTE. The silent nature of VTE makes primary prevention the key to reducing morbidity and mortality in bariatric patients.

VTE can occur in up to 5.4% of bariatric patients. It has been shown in cancer and orthopaedic patients that extending VTE prophylaxis after discharge can be beneficial.

No such evidence exists to support this practice in bariatric patients.

This study prospectively addresses the effect of prolonged thromboprophylaxis on patients undergoing laparoscopic bariatric surgery.

A Solution



751 patients underwent surgery. All patients were followed up in our MDT bariatric clinic and details recorded on a prospective database.

Using this regimen the incidence of symptomatic DVT and PE during the first 6 months after surgery was zero.

Early mobilisation and extended post-operative Fragmin can prevent symptomatic VTE in patients undergoing laparoscopic bariatric surgery

Excellence in Results

Poster of Distinction
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