<u>Percentage based bypass of the Small intestine results in exceptionally low</u> <u>protein malnutrition</u>

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Background: Critics of The Duodenal Switch operation frequently cite high incidence of Protein malnutrition as complication of the operation. Our experience differs significantly with both anecdotal and published data.

Method: Retrospective Chart review

<u>Results:</u> Between November 99, and November of 2002, 373 patient underwent the DS operation in DRMC. Our peri-operative mortality rate was zero. Our major complication rate was <10%. The mean age was 42.4 (16-68). The mean pre-op BMI was 50.3 (35.9-80.9). The female to male ratio was 5:1. The mean one-year post op BMI was 30.6 (19.0-55.6). Two years out, the mean BMI was 27.6 (20.4-35.4). The length of the common and the alimentary channels were based on a percentage of the total small bowel length. The mean length of our patients' small bowel length was 682.1cm (450-925). Most often, for patients between pre operative BMI of 40-55 common channels were approximated to 10% of the total length, and the alimentary limb was approximated to 40% of the total length. The preoperative Albumin and total Protein was 4.3 and 7.2. One year post op they were 3.9 and 6.8. The two-year post op values were 4.0 and 6.9. No patients required hyperalimentation. Seven patients were placed on short term Pancreatic enzyme supplementation to stabilize their weight, albumin, and total protein levels.

<u>Conclusion</u>: We have documented that percentage base bypass of the small bowel in the duodenal switch operation will results in a very low incidence of protein malnutrition. This is contrary to previous reports.

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