



Obesity and Laparoscopic Total Gastric Vertical Plication

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Dear Editor,

In parallel with “epidemic of obesity”, the number of bariatric surgical procedures is increasing worldwide. Several different procedures are now available; each procedure has specific advantages and shortcomings. Mainly due to the latter, new procedures are being developed continuously. One of the most recently described techniques is Laparoscopic Total Gastric Vertical Plication (LTGVP). LTGVP has been reported to be associated with promising short-time (18 months) results in terms of weight loss and complication rates (1). Also, due to the limited need of expensive disposable equipment, LTGVP is an attractive alternative economically. However, data on effects of LTGVP on obesity-associated co-morbidity as well as long-term weight development are insufficient so far. In one of the issues of “J Minim Surg Sci”, Golpaie et al. reported data on changes in blood lipid profile and insulin sensitivity in 15 patients with a preoperative BMI of 44 kg/m², 6 weeks after LTGVP (2). Although not much data on surgical technique used, nutritional intake or postoperative course was given, this represents the first information regarding changes in important biochemical parameters after LTGVP. As such, the report adds information

regarding post-process effects. However, lack of the proper control group with the same degree of weight loss during this short term period makes the specific metabolic mechanisms of the procedure difficult to evaluate. We are looking forward to more data regarding the long-term effects in order to define the indication of this procedure for treatment of patients with morbid obesity.

Author’s Contributions

None declared.

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None declared.

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