Bridging of upper part of small bowel with stomach tubing for facilitating weight loss of morbidly obese patients

Submission date	Recruitment status No longer recruiting	Prospectively registered		
24/05/2020		[X] Protocol		
Registration date	Overall study status	Statistical analysis plan		
29/05/2020	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
04/03/2022	Surgery			

Plain English summary of protocol

Background and study aims

Weight loss surgery, also called bariatric or metabolic surgery, is sometimes used as a treatment for people who are very obese. It can lead to significant weight loss and help improve many obesity-related conditions, such as type 2 diabetes or high blood pressure. But it's a major operation and in most cases should only be considered after trying to lose weight through a healthy diet and exercise.

This study aims to test the safety of a new procedure that combines elements of existing procedures.

Who can participate?

Patients aged over 18 and below 65 years with BMI over 40 kg/m 2 (without comorbidity related to morbid obesity) or 35 kg/m 2 (with comorbidity related to morbid obesity, especially glucose metabolism)

What does the study involve?

Patient assessment, performing surgery, and follow up at 1, 3, 6 and 12 months postoperatively.

What are the possible benefits and risks of participating?

Favourable weight loss management is expected due to reducing stomach volume and duodenojejunal exclusion but operations may have some risks (gastric wall prolapse, leakage, stricture, bleeding, bile reflux, vomiting, diarrhea, hair loss, nutrient deficiency, hypoproteinaemia and anaemia due to malabsorption)

Where is the study run from? Kanizsai Dorottya Hospital (Hungary)

When is the study starting and how long is it expected to run for? October 2018 to October 2020

Who is funding the study? Kanizsai Dorottya Hospital (Hungary)

Who is the main contact?

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Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

Nil known

IRAS number

ClinicalTrials.gov number

Nil known

Secondary identifying numbers

KDK-2071-2/2019

Study information

Scientific Title

LAparoscopic Single-Anastomosis duodeno-ileal bypass with Gastric plication (SADI-GP) in the maNagEment of morbid obesity (LASAGNE)

Acronym

LASAGNE

Study objectives

Laparoscopic single-anastomosis duodeno-ileal bypass with gastric plication is expected to be a safe procedure and have low complication rates and favourable weight loss outcomes.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 05/07/2019, Kanizsai Dorottya Hospital (Hospital of Nagykanizsa) Institutional Review Board (8800, Nagykanizsa, Szekeres, J.u. 2-8, Hungary; +36 93502092; titkarsag@nkkorhaz), ref: KDK-2071-2/2019

Study design

Interventional non-randomised study

Primary study design

Interventional

Secondary study design

Non randomised study

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Laparoscopic surgery for severe obesity and related metabolic disorders

Interventions

Patients were operated on to perform laparoscopic single anastomosis duodeno-ileal bypass with gastric plication. Follow-ups were at 1, 3 and 6 months and are planned at 12 months.

Intervention Type

Procedure/Surgery

Primary outcome measure

Postoperative complications (gastric wall prolapse, leakage, stricture, bleeding, bile reflux, vomiting, diarrhea, hair loss, nutrient deficiency, hypoproteinaemia and anaemia due to malabsorption, venous thromboembolism, pulmonary and cardiovascular events, 30-day hospital readmission) were classified by Clavien-Dindo

Secondary outcome measures

At follow up visits (1,3,6 and 12 months), patients were assessed again by physical examination, blood tests (blood count, ionogram, serum protein, glucose, HgbA1C, iron binding capacity, lipid

profile, kidney and liver function, hemostasis) and BAROS-Moorehead-Ardelt II and Weiner et al. questionnaires. Weight, BMI adjusted to age-gender-ethnics, ideal weight (at BMI: 25), excess of weight, excess of BMI, weight loss, EWL% and TWL% were measured as weight loss outcomes

Overall study start date

16/10/2018

Completion date

29/10/2020

Eligibility

Key inclusion criteria

- 1. Age over 18 and below 65 years
- 2. BMI over 40 kg/m^2 (without comorbidity related to morbid obesity) or 35 kg/m^2 (with comorbidity related to morbid obesity, especially glucose metabolism)
- 3. Patient agreement for follow-ups
- 4. Obtained informed consent

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

35

Total final enrolment

36

Key exclusion criteria

- 1. Bariatric surgery in previous history
- 2. Severe mental disorders (drug addiction, alcohol consumption, the use of antipsychotics)
- 3. Socially vulnerable patients
- 4. Complete immobilization
- 5. Patients who did not understand the purpose of the study and bariatric surgery

Date of first enrolment

16/10/2018

Date of final enrolment

30/06/2019

Locations

Countries of recruitment

Hungary

Study participating centre Kanizsai Dorottya Hospital

Szekeres Jozsef street 2-8. Nagykanizsa Hungary 8800

Sponsor information

Organisation

Kanizsai Dorottya Hospital

Sponsor details

Szekeres Jozsef street 2-8 Nagykanizsa Hungary 8800 +36 93502000 titkarsag@nkkorhaz.hu

Sponsor type

Hospital/treatment centre

Website

https://www.nkkorhaz.hu/

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Kanizsai Dorottya Hospital

Results and Publications

Publication and dissemination plan

Planned publication in a high-impact peer-reviewed journal.

Intention to publish date

30/10/2020

Individual participant data (IPD) sharing plan

All data generated or analysed during this study will be included in the subsequent results publication.

IPD sharing plan summary

Other

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol file		27/05/2020	08/06/2020	No	No
Results article		17/08/2021	04/03/2022	Yes	No