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## Systematic Review of Gastric Banding vs. Roux-en-Y Bypass

*In 14 studies, Roux-en-Y patients experienced more weight loss and better long-term outcomes than did gastric-banding patients.*

In Europe, laparoscopic gastric banding is the most common bariatric procedure, whereas open Roux-en-Y gastric bypass is most common in the U.S. In a systematic review, researchers assessed patient outcomes related to each procedure. Fourteen studies (1 randomized trial) were included in the analysis; most were retrospective and did not include baseline matching of patients across study arms.

Data were evaluated on 6600 patients (mean age, 40; mean body-mass index, 45 kg/m<sup>2</sup>; 80% female). Loss of excess body weight at 1 year was greater for patients who underwent Roux-en-Y (range across studies, 51%–76%) than for those who underwent gastric banding (range, 31%–54%); the absolute difference between the groups was 25%. Among studies in which resolution of comorbidities (diabetes, hypertension, dyslipidemia, and sleep apnea) was recorded, rates of resolution were greater for Roux-en-Y patients than for gastric-banding patients. For example, approximately 84% of Roux-en-Y patients and 59% of gastric-banding patients showed resolution of diabetes. Short-term complications, including mortality, were lower after gastric banding than after Roux-en-Y (0.06% vs. 0.17%). However, complications beyond 30 days (e.g., reoperation, obstructions, incisional hernias) were more common after gastric banding than after Roux-en-Y (21% vs. 12%).

**Comment:** As the authors note, the overall quality of studies that involved comparisons of the most commonly performed bariatric procedures — gastric banding and Roux-en-Y bypass — was poor. However, current data support Roux-en-Y bypass over gastric banding in centers where complication rates for Roux-en-Y procedures are low.

— [Jamaluddin Moloo, MD, MPH](#)

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