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Case Report

Initial Experience with Intragastric Balloon Lexbal® in the Treatment of Patients with Mild to Moderate Obesity (Type I-II)

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Abstract

Evaluate the effectiveness and response Gastric balloon (Lexbal) in the treatment of mild to moderate obesity

Observational and retrospective.

Keywords: Gastric Balloon (Lexbal); Obesity

Introduction

Obesity is a disease that represents a serious risk to the patient's health. The most practical measure to assess the presence of overweight is the calculation of the body mass index (BMI), expressed by the quotient: weight (kg)/height^2 (m^2): normal weight 20 - 24.9 kg/m^2; overweight 25 - 29.9 kg/m^2; obesity 30 - 34.9 kg/m^2; moderate obesity 35 - 39.9 kg/m^2; Severe, extreme or morbid obesity 40 - 49.9 kg/m^2; super-morbid obesity > 50 kg/m^2.

IGB treatment may present a safer and lower cost option for weight reduction. IGBs are generally placed in the stomach endoscopically for up to 6 months to reduce gastric capacity, enhance feelings of fullness, and induce weight loss. The mechanism of action likely involves stimulation of gastric mechanoreceptors triggering short-acting vagal signals to brain regions implicated in satiety. Balloon efficacy may be influenced by balloon volume, patient gastric capacity, and treatment duration [1-10].

The goal of treatment is to achieve a controlled and maintained weight loss. For this, the patient must adopt a definitive change in lifestyle: caloric restriction in the diet, performing physical exercise in a habitual way and modifying unhealthy habits of life.

In severe obese people or if you have moderate obesity but also suffer from other important diseases, surgery (bariatric) is the most effective measure. For several years now, an endoscopic technique (intragastric balloon) has been available, without the need for surgery, which can help you lose weight.

Descriptive observational study in which the sample is made up of the 14 patients treated with balloon lexbal.

The variables studied were age, sex, weight, BMI, percentage of weight lost, fill volume, tolerance, satisfaction.

Objectives

Evaluate the effectiveness and response balloon (Lexbal) in the treatment of mild to moderate obesity.

Methods and Case Report

We conducted in Hospital Paroissien an observational, retrospective study.

We have compiled the results of 14 follow intragastric balloons (Balon Lexbal) in obese patients with mild to moderate type I- II (BMI between 28 and 34.9 kg/m^2) placed in 2012 and 2018 losses have been achieved over 70% of excess weight.

All the participants were referred to the IGB treatment by their doctor, they did not manage to lose weight in the previous clinical treatments. A non-adjustable IGB filled with liquid with a volume of 600 to 700 ml was used for 6 months. All patients were included in a multidisciplinary program and adherence to this program was evaluated as the number of appointments attended.

Furthermore, it has been observed satisfaction of our patients.

The variables studied were age sex, weight BMI, % of weight lost, fill volume, tolerance, satisfaction and dietary monitoring.

Measurements: Descriptive observational study in which the sample is made up of the 14 patient treated with balloon LEXBAL in our midst. The variables studied were age, sex, weight, BMI percentage of weight lost, fill volume, tolerance, satisfaction and dietary monitoring by patients.

Results and Discussion

Over 80% degree of patient satisfaction, 70% decrease in weight above the average (over 12 kilos) better response in those presenting adherence to nutritional treatment and no differences were observed in the volume of filling the balloon.

Conclusion

Treatment with intragastric balloon, along with a nutritional monitoring allows us to re-educate the patient and change their

eating habits. Just for gradual diet, and to adapt each phase as tolerated by the patient, helps us to improve dietary behavior and facilitates greater weight loss The intragastric balloon is a safe, well tolerated, with few adverse effects and relatively simple in the hands accustomed to endoscopic practice. We believe it can be considered an effective adjunctive therapy in selected cases of mild/ moderate obesity (type I-II).

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