

Title

Single-Anastomosis Sleeve Jejunal Bypass (SASJ): The Long-Term Outcomes of a New Surgical Technique

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Background

Single-Anastomosis Sleeve Jejunal Bypass (SASJ) is a relatively new bariatric-metabolic procedure developed to achieve substantial weight reduction and metabolic improvement. This study investigates the long-term outcomes of SASJ over a five-year period, emphasizing sustained weight control and remission of obesity-related comorbidities.

Methods

An analysis was performed on 64 individuals who underwent SASJ. Inclusion criteria were a BMI ≥ 40 kg/m² or ≥ 35 kg/m² accompanied by obesity-related conditions. Key endpoints included changes in BMI, percentage of total weight loss (%TWL), percentage of excess weight loss (%EWL), and remission rates of type 2 diabetes (T2D), hypertension (HTN), hyperlipidemia (HLP), and gastroesophageal reflux disease (GERD). Recurrent weight gain (RWG) was defined as gaining more than 30% of the initial weight loss or worsening of an obesity complication.

Results

Five years after surgery, patients exhibited marked and sustained weight reduction, with mean BMI decreasing from 45.1 ± 6.1 to 30.3 ± 4.6 kg/m². %EWL was 84.1 ± 19.8 at two years, 79.8 ± 21.1 at three years, 77.5 ± 21.0 at four years, and 75.2 ± 21.4 at five years, showing a significant trend ($p < 0.001$). Remission was achieved in 78.6% of T2D cases, 69.2% of HTN, and 85.7% of HLP, while GERD remission was limited to 11.1%. RWG occurred in 25% of patients. One marginal ulcer developed at the anastomotic site.

Conclusion

SASJ provides effective and sustained weight loss with high remission rates for metabolic disorders, establishing it as a promising bariatric-metabolic option. However, the low remission rate of GERD and RWG in one-fourth of patients highlight the importance of long-term follow-up.

Keywords

Obesity, Bariatric metabolic surgery, Single-anastomosis sleeve jejunal bypass, Metabolic surgery