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LAPAROSCOPIC ONE ANASTOMOSIS GASTRIC BYPASS (OAGB) IN THE MANAGEMENT OF MORBID OBESITY: A PROSPECTIVE OBSERVATIONAL STUDY

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ABSTRACT **Background:** One Anastomosis Gastric Bypass (OAGB) is an effective bariatric procedure combining restrictive and malabsorptive mechanisms. **Methods:** A prospective observational study of 30 patients with BMI ≥40 kg/m² or ≥35 kg/m² with comorbidities undergoing laparoscopic OAGB. **Results:** Mean age was 41.5±8.7 years; 86.7% were female. Mean BMI was 45.2±6.7 kg/m². Significant excess weight loss and improvement in diabetes, hypertension, dyslipidemia and OSA were observed at 6 months. **Conclusion:** OAGB is safe and effective with promising short-term metabolic outcomes.

KEYWORDS :

INTRODUCTION

Morbid obesity is associated with multiple metabolic and cardiovascular comorbidities. Bariatric surgery remains the most effective treatment for sustained weight loss. One Anastomosis Gastric Bypass simplifies Roux-en-Y gastric bypass by creating a single gastrojejunostomy, reducing operative complexity while maintaining excellent metabolic outcomes.

MATERIALS AND METHODS

This prospective observational study was conducted over 18 months at a tertiary care center. Thirty patients aged 18–55 years meeting inclusion criteria underwent laparoscopic OAGB. Primary outcomes included operative time, hospital stay, complications, percentage excess weight loss (%EWL), and remission of comorbidities. Follow-up was conducted at 1 week, 1 month, 3 months and 6 months.

RESULTS

Mean operative time was 126.2±24 minutes. Mean hospital stay was approximately 5 days. There was no mortality or anastomotic leak. At 6 months, mean %EWL reached 60.10±11.62. Diabetes remission or improvement occurred in all diabetic patients. Significant improvement was also noted in hypertension, dyslipidemia, and obstructive sleep apnea.

DISCUSSION

The findings demonstrate that OAGB is a safe, technically feasible, and metabolically effective procedure. Short-term outcomes are comparable to international data. Larger studies with longer follow-up are recommended to evaluate long-term nutritional and metabolic outcomes.

CONCLUSION

Laparoscopic One Anastomosis Gastric Bypass provides significant weight loss and remission of obesity-related comorbidities. It is a safe and promising bariatric procedure in appropriately selected patients.