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INTRAGASTRIC BALLOON THERAPY IN THE MANAGEMENT OF OBESITY IN VIETNAM

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Background: In Vietnam, the prevalence of overweight and obesity is 5.6%. The obesity rate in the city is about 6.5%. The prevalence of obesity in the 15-49 age group was 10.7%. Obesity in primary school children in Hanoi City is 4.2% (in 2013) and 12.2% in Ho Chi Minh City (in 2013). Since 2000, the number of obese patients in Vietnam has been on the rise, affecting quality of life and causing complications. Since 2008, Vietnam started applying intragastric balloon therapy for patients with obesity. This study aims to assess the effectiveness and complications of intragastric balloon therapy for obese patients in Vietnam (from 2008 to 2016).

Patient & Method: 50 obese patients were treated at Trieu An Hospital, Hochiminh City from January 2007 to December 2016. These patients have been treated with conventional weight loss methods (internal medicine, diet, medicine, exercise ...), but not effective. The patient received a clinical examination, subclinical and have indication of gastricballoon placement. We only use a Spatz balloon (Spatz Medical, Great Neck, NY, United States). The balloon was removed after six months of placement and we evaluated the therapeutic effect of this method.

Result: Patient characteristics: 50 patients (34 women and 16 men). Average age: 29.9 ± 9.7 (18-55). Average weight: 94.4 ± 17.8 kg (69-144). Average BMI was 35.6 ± 4.3 (30-48.6). Patients with BMI 30-34.9; 35-39.9 and over 40 accounted for 54%, 28% and 18%, respectively. BMI> 40 found mainly young people. There were nine obese patients with BMI > 40, in which: 18 years old (two persons), 19 years old (two persons), 24 years old (one person), 27 years old (one person), 37 years old (one person) and 43 years old (one person). Technical success rate: 50/50 (100%). Average time to perform the procedure is: $15,3\pm4,7$ minutes (12-18 minutes), Effective treatment: The average weight loss after one weeks of treatment: 4.9 ± 1.6 kg (2kg-8kg). Average weight loss after six months of treatment: 19.8 ± 9.3 kg. Six patients had abdominal pain after balloon placement and desired the balloon removed. These six cases were admitted to the hospital, followed using antispasmodic (Buscopan) and discharged at the same day. Then, six cases were convinced and agreed to put the intragastric balloon in place. One case, after three months of treatment must take the balloon out. Complication: After the procedure, the patients had some complications in the first week: Mild abdominal pain (96%), bloating (100%) and nausea-vomiting (82%). After six months of treatment, no patient has peptic ulcer, no gastroesophageal reflux disease (GERD)

Conclusion: This study showed that placing the balloon in the stomach effectively reduces weight and reduces BMI. This is a safe, easy-to-accept and effective method of non-surgical treatment for obese patients in Vietnam.

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