## **Incidence of Biliary Complications After Roux-en-Y Gastric Bypass Surgery**



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## Background

- Biliary complications such as choledocholithiasis, cholangitis, gallstone acute pancreatitis, and acute cholecystitis pose a unique treatment challenge in Roux-en-Y gastric bypass (RYGB) patients
- Incidence of cholecystectomy and ERCP in RYGB  $\bullet$ patients is unclear

## Methods

- Retrospective cohort study utilizing IBM Explorys database
- Identified patients with a history of RYGB and excluded patients with a history of cholecystectomy
- Determined new onset biliary complications at least 30 days after RYGB occurrence
- Of patients with biliary complications, identified patients who underwent cholecystectomy or ERCP post-RYGB
- Reviewed demographics and comorbidities of identified patient cohorts
- Logistic regression models were constructed

## Aim

To determine the incidence of biliary complications and  $\bullet$ need for cholecystectomy in RYGB patients

#### Results

#### Table 1: Biliary Complications After RYGB

Variables	Biliary Complications (N=930)	No Biliary Complications (N=8,560)	OR	95% CI
Adults (18-65)	630 (68%)	6100 (71%)	1.00	
Elderly (>65)	300 (32%)	2460 (29%)	1.18	1.02- 1.37
Male	190 (20%)	1890 (22%)	1.00	
Female	740 (80%)	6650 (78%)	1.11	0.94- 1.31
Caucasian	800 (86%)	6640 (78%)	1.00	
African American	130 (14%)	1390 (16%)	0.78	0.64- 0.94
Diabetes	390 (42%)	2400 (28%)	1.85	1.61- 2.13
Hyperlipidemia	520 (56%)	3300 (39%)	2.02	1.76- 2.32
Cardiovascular disease	160 (17%)	1400 (16%)	0.93	0.78- 1.12

## Table 2: Cholecystectomy After RYGB

Adults

Elder

Fema

Africa

Diabe

Cardio diseas

✓ Among RYGB patients, nearly 10% of patients developed new onset biliary complications

Caucasian race, and history of diabetes and hypertension recommended concurrently with Roux-en-Y gastric bypass

✓ Risk factors for biliary complications included elderly age, ✓ Further studies needed to investigate if cholecystectomy is

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/ariables	Cholecystectomy (N=370)	No Cholecystectomy (N=560)	OR	95% CI
:s (18-65)	260 (70%)	370 (66%)	1.00	
ly (>65)	110 (30%)	190 (34%)	0.82	0.62- 1.09
le	300 (81%)	440 (79%)	1.17	0.84- 1.62
an American	30 (8%)	100 (18%)	0.45	0.29- 0.69
etes	110 (30%)	280 (50%)	0.42	0.32- 0.56
ovascular se	50 (14%)	110 (20%)	0.64	0.44- 0.92

## Conclusion

✓ 40% required cholecystectomy and 2% required **ERCP** post-RYGB