## **Global Adoption of Bariatric Endoscopic Procedures and Practice Patterns in Performing Endoscopic Sleeve Gastroplasty** Ramzi Mulki, Kirtan Chauhan, Diogo De Moura, Gontrand Lopez-Nava, Janese Laster, Vivek Kumbhari, Majidah Bukhari, Marvin

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## Introduction

- Bariatric endoscopic (BE) procedures are an important bridge to address the unmet need of curbing the obesity epidemic.
- Endoscopic sleeve gastroplasty (ESG) has gained popularity over the past few years as studies have shown promising results. However, there are no practice guidelines or consensus on its implementation in practice.
- We aimed to perform a survey to inquire about ESG practice patterns across the globe.

## Methodology

A survey evaluating ESG practice patterns was distributed online via a digital platform to BE practitioners participating in virtual international seminars in BE and in-person to participants of the annual Association for Bariatric Endoscopy and Flexible Endoscopic Surgery meetings.

The survey consisted of three parts:

- 1. Physician demographics (Specialty, type and location of practice)
- 2. Bariatric procedures offered
- 3. Practice patterns of each procedure

Comparisons were among:

- Geographic areas (Western, Middle East and Asia, South America),
- Private vs. academic
- Surgical vs. gastroenterology practice

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## Results

- 110 participants responded to our survey 73.8% gastroenterologist's vs 23.3% surgeons 62.3% practiced in academic centers Median multidisciplinary team of 4
- providers
- Perioperative antibiotic use was
- significantly higher in those practicing in South America

Variable	N (%)
Specialty	
Gastroenterology	79 (73.8%)
Surgery	25 (23.3%)
Obesity Medicine	3 (2.6%)
Practice	
Private practice	42 (37.2%)
Academic*	71 (62.8%)
Region	
Western**	30 (27.2%)
Middle East & Asia	39 (35.4%)
South America	41 (37.2%)
Location	
ASC	33 (50%)
Hospital	21 (31.8%)
N/A	12 (18.2%)
Multidisciplinary team	94 (87%)
Endoscopist	69 (19.2%)
Surgeon	66 (18.4%)
Registered Dietitian	83 (23.1%)
Psychologist	62 (17.3%)
Endocrinologist	31 (8.6%)
Social Worker	17 (4.7%)
Virtual	8 (2.2%)
Other	22 (6.1%)
Team Size – Median [IOR ]	4 [1.5]

#### Table 1: Provider Demographics

- 60.00%
- 50.00%
- 40.00%
- 30.00% 20.00%
- 10.00%

20.00%

- 80.00%
- 50.00%
- 40.00% 30.00%
- 20.00%
- 10.00%



#### **ESG Practice Pattern by Practice Type**

#### **ESG Practice Pattern by Specialty**



### **ESG Practice Patterns by Region**





### Conclusion

Across the globe, most BE procedures are currently performed by gastroenterologists in academic centers. Practice patterns of ESG are consistent across the globe regarding use of general anesthesia, peri-procedural antibiotics and post-operative liquid diet, with some variations across regions and practices. Larger studies are needed to inform best practice recommendations.

110 participants across the globe responded to our survey, the majority were academic gastroenterologists who performed the largest numbers of BE procedures with consistent practice patterns for ESG