5 YEARS' EXPERIENCE OF THE END BALL INTRA-GASTRIC BALLOON IN A PRIVATE CENTRE

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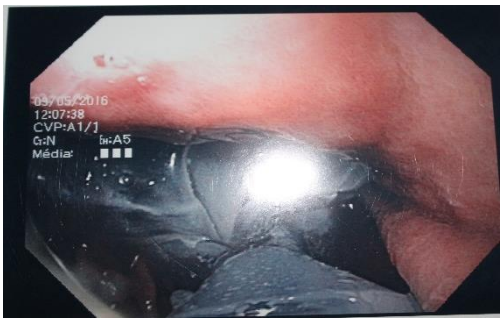
Introduction

Numerous studies have shown the efficacy of intra-gastric balloons in the treatment of excessive weight and obesity, both for weight loss and comorbidities.

We are reporting on the experience with the Endalis End Ball intra-gastric balloon of a private centre in Tarn et Garonne, which practises bariatric surgery regularly.

Equipment and methods

From February 2010 to July 2015 82 patients presented an indication for the insertion of an intra-gastric balloon and have benefited from it, with 2 insertion failures. The 110 mm End Ball (Endalis) balloon is in polyurethane. Inflation is with a mixture of water and air. The manufacturer recommends removal after 6 months. Insertion takes place under general anaesthetic, without intubation although this is routine when the balloon is removed.
We practise inflation with 100 cc air followed by 500 cc of water. The patient is in the left lateral decubitus position.
Treatment with corticosteroids, Ondansetron, Droperidol, PPI is initiated post-operatively. An ultrasound control is performed at 7 days as well as a consultation at least once a month with the nutritionist and/or the dietitian. Physical activity is recommended.
A telephone questionnaire is carried out, focusing on weight on removal, current weight and complications. 2 people refused to respond and 2 others could not be contacted.

	
Inflation of the Balloon	Inflated balloon

Results

Patient data	Average
Age	33.9 (69-18)
Weight	111.78 (163-80)
BMI at insertion	39 (53-28)

Efficacy data

BMI at removal	33 (47-25)
% loss of excess weight at 6 months	40.2% (0-169%)
Maintenance of loss of excess weight at 1 year	30%
Maintenance of loss of excess weight at 2 years	29.2%

Duration of presence of the balloon (in months)	6.68 (18-6)

Complications

Serious: 1.21%: 1 gastric perforation, 1 bronchial perforation (patient intubated at insertion), 1 oesophageal perforation, 1 obstruction by migration of the balloon.

Mild: 84% nausea: vomiting, epigastralgia, gastro-oesophageal reflux, constipation

Conclusion

The balloon is well tolerated if adverse events (nausea, vomiting, pain) are prevented from the first three days after insertion. We had 4 serious complications (1.21%) and two insertion failures.
Our results are comparable to data in the literature, whatever balloon is used, i.e. a weight loss of 14 kg on average at 6 months. In our work, the loss of excess weight at 2 years is 40% for 30% of our patients.
A French multicentre prospective or observational study would be interesting in order to demonstrate the place of the intra-gastric balloon in the treatment of those with an obese BMI who are not eligible for bariatric surgery.