

Good-Bye Gastric Bypass, Hello SIPS

by Kerri Seidler on December 24, 2014  Weight Loss Surgery

A new bariatric surgery procedure is being touted as the operation that replaces Roux-en-Y gastric bypass in the next few years. According to initial research studies, weight loss exceeded gastric bypass and sleeve gastrectomy with no suggestion of increased complication.

The procedure, named Stomach Intestinal Pylorus-Sparing Surgery or SIPS, is based on the work of two prominent bariatric surgeons, Dr. Mitchell Roslin of New York City and Dr. Daniel Cottam of Salt Lake City. The procedure is described as a modified duodenal switch.

The results were presented during Obesity Week 2014, an international medical meeting sponsored



by the American Society for Bariatric and Metabolic Surgery and The Obesity Society, held last month in Boston, Mass, USA.

About the Procedure

The new procedure, Stomach Intestinal Pylorus-Sparing Surgery or SIPS, involves the formation of a sleeve gastrectomy that is slightly larger than the usual sleeve combined with a shortened amount of intestine that is attached below the pyloric valve, the natural outlet controlling the emptying of solid food from the stomach.

SIPS was developed as a modification of the duodenal switch surgery. The duodenal switch is an effective procedure for weight loss, but is not widely performed (less than 5% of all bariatric surgeries) due to its technical difficulty, risk of nutritional deficiencies, and unpleasant side effect of frequent and loose bowel movements.

In the SIPS procedure, the intestine is not divided (no distal anastomosis and avoids a roux limb) and not too much of the intestine is bypassed. Although a portion of the intestine is bypassed, it is not a mini gastric bypass because the attachment is placed after the stomach outlet and the extra portion of the stomach is cut out and removed.

According to the surgeons who developed the SIPS procedure, the modifications make it easier to perform than the duodenal switch and also reduces nutritional deficiencies and diarrhea while still helping patients achieve impressive levels of weight loss.

The potential advantages:

- By preserving three meters of intestine, nutritional needs are met.
- By preserving the pyloric valve, it does not cause an abrupt rise and fall of blood glucose.
By not dividing the intestine with a distal anastomosis or a roux limb, it could potentially reduce
- risk of gastrointestinal symptoms and intestinal obstruction, and reduce the chance for surgical complications.
- By placing attachment after pyloric valve, it does not increase risk of bile reflux gastritis.

Initial Results

Initial results involve a study that enrolled 129 patients who underwent the SIPS procedure between January 2013 and July 2014. The average starting BMI (body mass index) was about 50 among the group of patients.

At one year, the following results were seen:

- Average weight loss of 40% total body weight; over 80% of excess weight lost.
- No obstructions, no marginal ulcers, no re-operations required.

The weight loss achieved by patients is at levels similar to that of duodenal switch and 30% greater than gastric bypass or gastric sleeve. The complication profile seems favorable and early complications seem lower compared to similar procedures according to initial study results.

The potential of SIPS is of great interest because there is a need for a safe and effective solution for sleeve patients who regain weight or have inadequate weight loss, and for patients with super-morbid obesity or severe metabolic syndrome.

While research is ongoing, Dr. Roslin thinks SIPS is going to be the operation that replaces Roux-en-Y gastric bypass in the next several years, and that patients will have either sleeve gastrectomy or SIPS.

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10 thoughts on “Good-Bye Gastric Bypass, Hello SIPS”



SUSAN

January 2, 2015 at 4:25 pm

Thank you so much for your article on the SIPS procedure. I am scheduled to have it done in less than 2 weeks and have searched for any extra information. There just isn't very much out there but after reading your information, I feel even better about my decision. Do not get me wrong, my surgeon is a very informative provider but I just wanted more knowledge. Thank you!



KERRI SEIDLER

February 1, 2015 at 7:09 pm

Thank you for your comment. I hope all goes well with your procedure!



SOPHIA

March 14, 2015 at 4:47 pm

I had the SIPS procedure on March 6, 2015. In the hospital overnight and recovery has been good. No complications so far!



KERRI SEIDLER

March 15, 2015 at 1:18 pm

Thank you for sharing. Best of luck on your weight loss journey!



JENNIFER C.

March 17, 2015 at 11:46 am

I had the SIPS procedure in December 2014. I had a rough start, but I am so glad that I made the decision to have it after all. I feel so much better than before and the weight lost is great!!!



KATHY



March 17, 2015 at 6:31 pm

Thank you for this information. I am considering SIPS. Are there any disadvantages? My surgery is scheduled in April 2015.



MAGGIE

March 18, 2015 at 7:51 am

scheduled to have the SIPS in a couple of months. Would love to know more from someone who has had it. Effect on diabetes? do you have to take vitamins after? modified or liquid diet for the first few weeks? Because this is so new, there is not much information out there.



CAROLYN MILLER

March 18, 2015 at 9:32 pm

Hi, do they do this surgery in Australia at all ?



JENNIFER



May 26, 2015 at 7:49 pm

Hello, I am in the Dallas Texas area and cannot find any doctors that do the SIPS procedure! Anyone know of any? I am scheduled to do the sleeve, but after reading this I am totally interested. What insurance is covering this? Thank you



CHRISTINA FIELDS

June 4, 2015 at 1:45 pm

Just moved to Wisconsin, do you know who will perform SIPS in Marshfield/Wausau/Stevens Point or surrounding areas?

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