



ANNI DI OAGB

LATINA, Venerdì 27 Giugno 2025

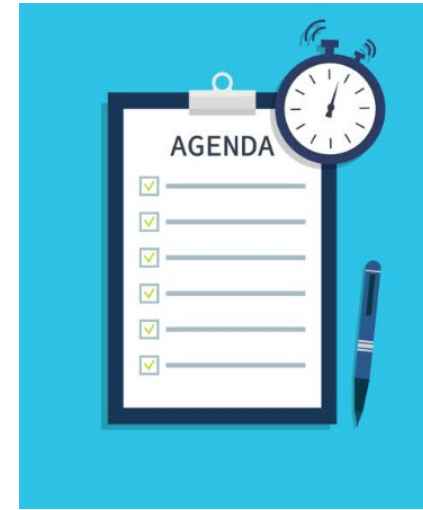
Risultati a lungo termine (comorbidità)

Danila Capoccia

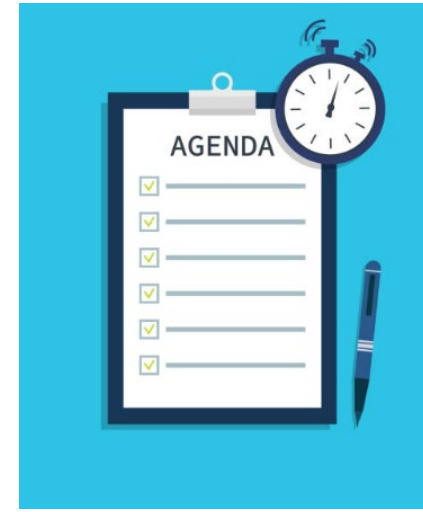
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SAPIENZA
UNIVERSITÀ DI ROMA



- Risultati a lungo termine del One Anastomosis Gastric Bypass
- Risultati di confronto con Roux-en-Y Gastric Bypass (RCT)
- Risultati di confronto con Sleeve Gastrectomy (RCT)
- Criticità



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Long-Term Outcome of One-Anastomosis Gastric Bypass: 10-Year Follow-Up of a Single Institution Series

Obesity Surgery (2025) 35:216–223

STUDIO RETROSPETTIVO su 152 pazienti

Table 2 Weight loss results at follow-up

WEIGHT LOSS

Variable	Baseline	1-year follow-up	10-year follow-up
BMI (kg/m ²) mean ± SD	48 ± 20 kg/m ²	26.5 ± 9.7 kg/m ²	28.4 ± 6.4 kg/m ²
% EWL mean ± SD	–	84.4 ± 10.2%	82.4 ± 13%
% TWL mean ± SD	–	33.6 ± 6.5%	32.1 ± 11.5%

- Persi al follow up 25%
- 126/152 dati disponibili

RISOLUZIONE DELLE COMPLICANZE

Table 3 Resolution of obesity complications at follow-up

Obesity complications N= 126	Baseline N= 126	Resolution at 1 year (%)	Resolution at 10 years (%)
Diabetes mellitus	46	90% (41/46)	80% (37/46)
Hypertension	42	85% (35/42)	71% (30/42)
OSA	55	95% (52/55)	85% (47/55)
Osteoarthritis	31	90%(28/31)	74% (23/31)
Gerd	22	86% (19/22)	48% (11/22)
Dyslipidemia	63	50%(35/63)	35%(22/63)

CARATTERISTICHE AL BASELINE

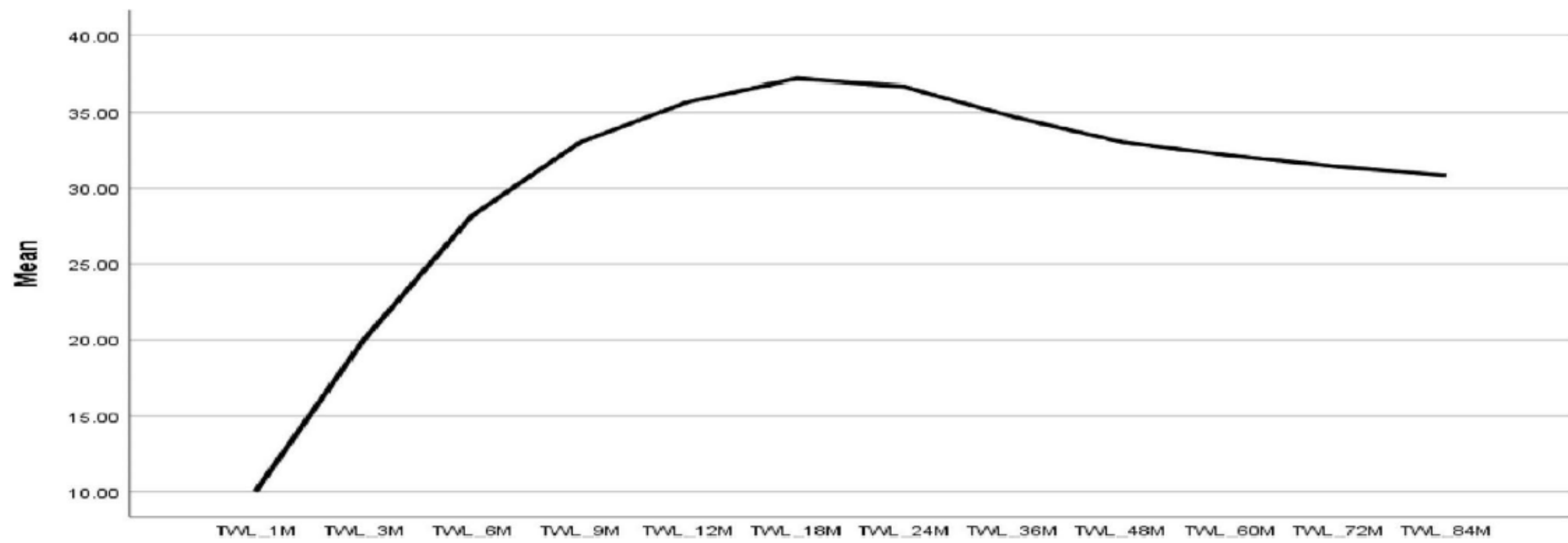
Patients operated	152
Patients lost to follow up	26
Patients with follow-up data	126
Mean age	41 ± 12.5 years (range 20–68)
Females	94 (75%)
Males	32 (25%)
Mean weight	130 ± 40.5 kg
Mean BMI	48 ± 20 kg/m ²
Diabetes mellitus	46 (36.%)
Hypertension	42 (33%)
Obstructive sleep apnoea	55 (43%)
Osteoarthritis	31 (24%)
Dyslipidemia	63 (50%)
Gerd	22 (17%)
Infertility	6 (4%)

Long-Term Weight Loss Outcomes of One Anastomosis Gastric Bypass: Assessment of 1971 Patients with 5–9-Year Follow-Up

Obesity Surgery (2025) 35:102–111

STUDIO RETROSPETTIVO su 1971 pazienti

TOTAL WEIGHT LOSS FINO A 84 MESI (7 anni)



Long-Term Weight Loss Outcomes of One Anastomosis Gastric Bypass: Assessment of 1971 Patients with 5–9-Year Follow-Up

Obesity Surgery (2025) 35:102–111

STUDIO RETROSPETTIVO su 1971 pazienti

FU 3 anni

Comorbidity before surgery	Comorbidity after surgery					Total	P-values
	Improved	Resolved	No change	Worse	Missing		
Type 2 diabetes mellitus	57 (25.12)	162 (71.36)	6 (2.64)	2 (0.88)	50	277	<0.001
HTN	79 (33.62)	143 (60.85)	9 (3.83)	4 (1.7)	37	272	<0.001
Dyslipidemia	28 (28.28)	66 (66.67)	2 (2.02)	3 (3.03)	412	511	<0.001
Sleep apnea	16 (12.6)	109 (85.83)	2 (1.57)	0 (0)	27	154	<0.001
Heartburn	34 (29.57)	61 (53.04)	14 (12.17)	6 (5.22)	13	128	<0.001

- Persi al follow up 6%
- 1863/1971 dati disponibili

FU 5 anni

Comorbidity before surgery	Comorbidity after surgery					Total	P-values
	Improved	Resolved	No change	Worse	Missing		
Type 2 diabetes mellitus	40 (24.25)	116 (70.3)	9 (5.45)	0 (0)	112	277	<0.001
HTN	42 (32.81)	67 (52.35)	12 (9.37)	7 (5.47)	144	272	<0.001
Dyslipidemia	13 (23.63)	40 (72.73)	1 (1.82)	1 (1.82)	456	511	<0.001
Sleep apnea	14 (15.73)	71 (79.78)	0 (0)	4 (4.49)	65	154	<0.001
Heartburn	23 (32.4)	35 (49.29)	8 (11.27)	5 (7.04)	57	128	<0.001

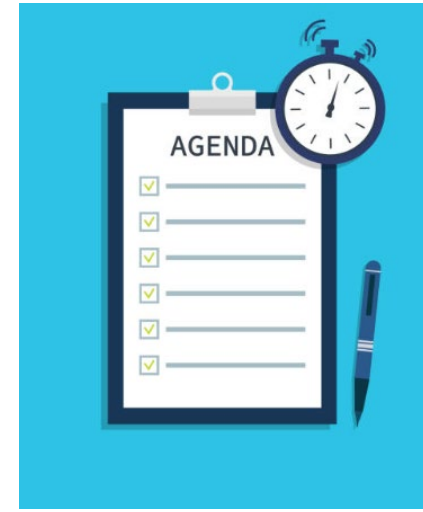
Persi al follow up 25%
- 1495/1971 dati disponibili

FU 7 anni

Comorbidity before surgery	Comorbidity after surgery					Total	P-values
	Improved	Resolved	No change	Worse	Missing		
Type 2 diabetes mellitus	32 (32.0)	61 (61.0)	3 (3.0)	4 (4.0)	85	185	<0.001
HTN	18 (26.86)	39 (58.21)	7 (10.45)	3 (4.48)	91	158	<0.001
Dyslipidemia	19 (27.94)	44 (64.71)	4 (5.88)	1 (1.47)	316	384	<0.001
Sleep apnea	6 (10.92)	42 (76.36)	4 (7.27)	3 (5.45)	40	95	<0.001

- Persi al follow up 30%
- 802/1855 dati disponibili

A 9 anni persi al follow up 50%
- 212/451



- Risultati a lungo termine del One Anastomosis Gastric Bypass
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One Anastomosis Gastric Bypass (OAGB) vs Roux en Y Gastric Bypass (RYGB) for Remission of T2DM in Patients with Morbid Obesity: a Randomized Controlled Trial

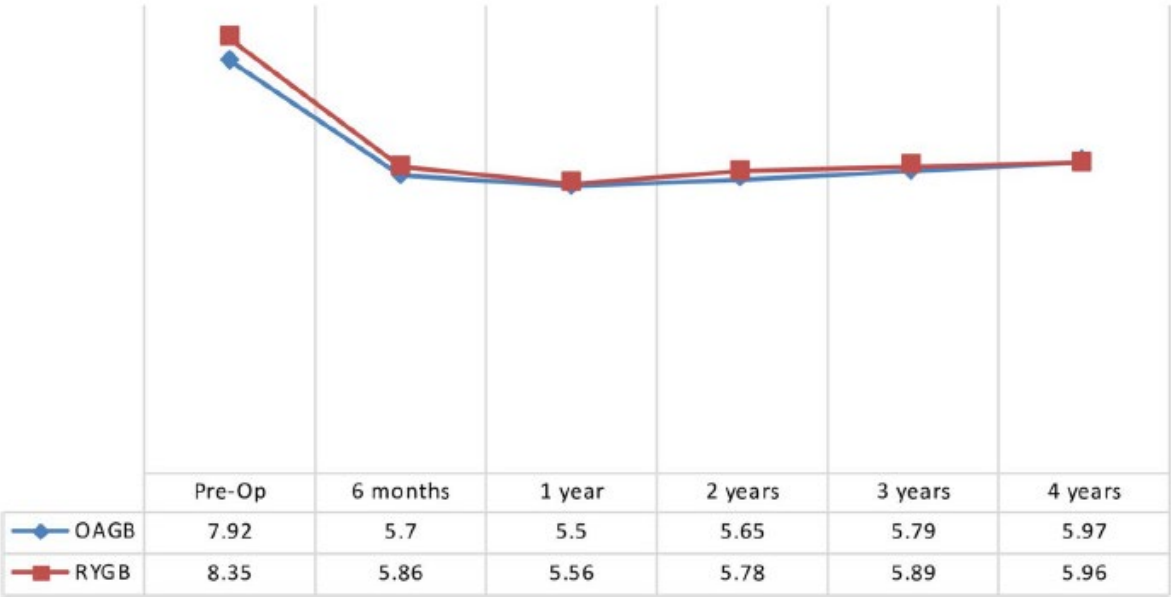


Obesity Surgery (2023) 33:1218–1227

25 OAGB
24 RYGB

Follow up 4 anni

Trend HbA1c



Remissione del diabete

Follow-up	(Percentage remission)		p-value
	OAGB (n/N)	RYGB (n/N)	
6 months	84% (21/25)	82.6% (19/23)	0.90
1 year	86.4% (19/22)	85.7% (18/21)	0.95
2 years	78.9% (15/19)	80.9% (17/21)	0.87
3 years	77.8% (14/18)	76.2% (16/21)	0.91
4 years	72.2% (13/18)	71.4% (15/21)	0.96

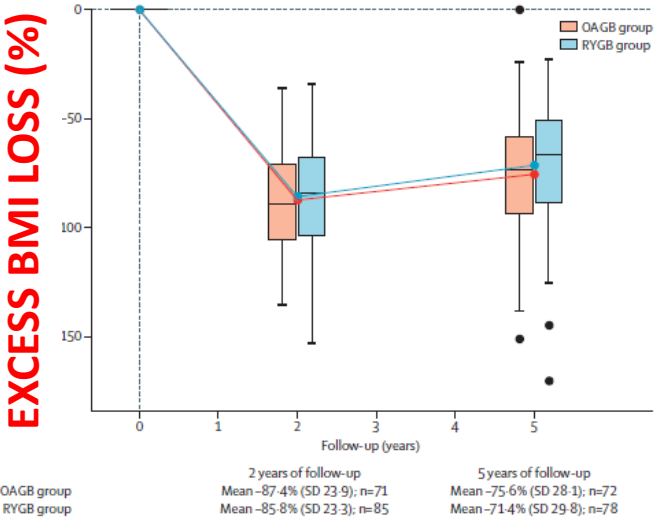
OAGB
Persi al FU 24%
19/25 pazienti

RYGBP
Persi al FU 12,5%
21/24

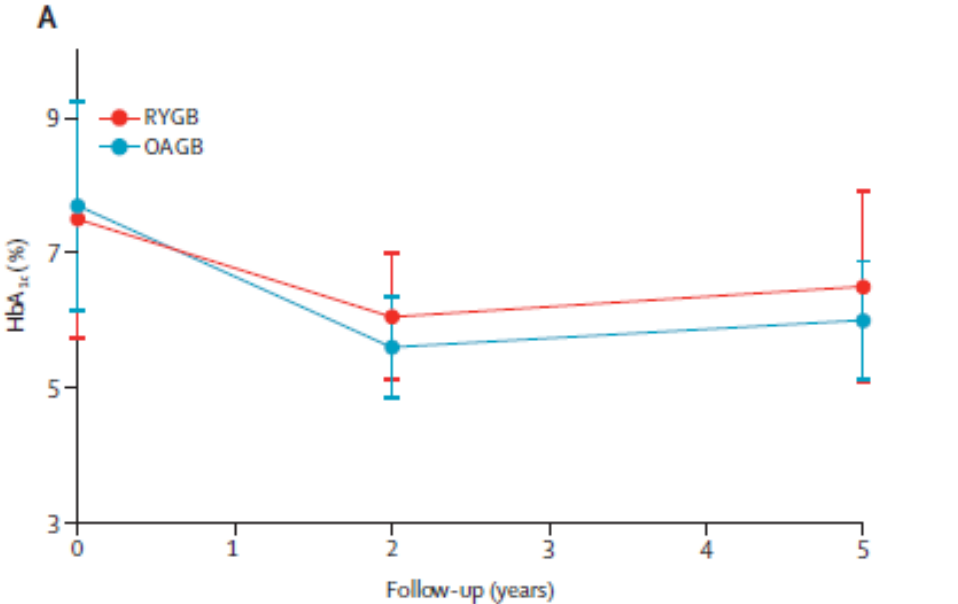
Efficacy and safety of one anastomosis gastric bypass versus Roux-en-Y gastric bypass at 5 years (YOMEGA): a prospective, open-label, non-inferiority, randomised extension study

Lancet Diabetes Endocrinol
2024; 12: 267-76

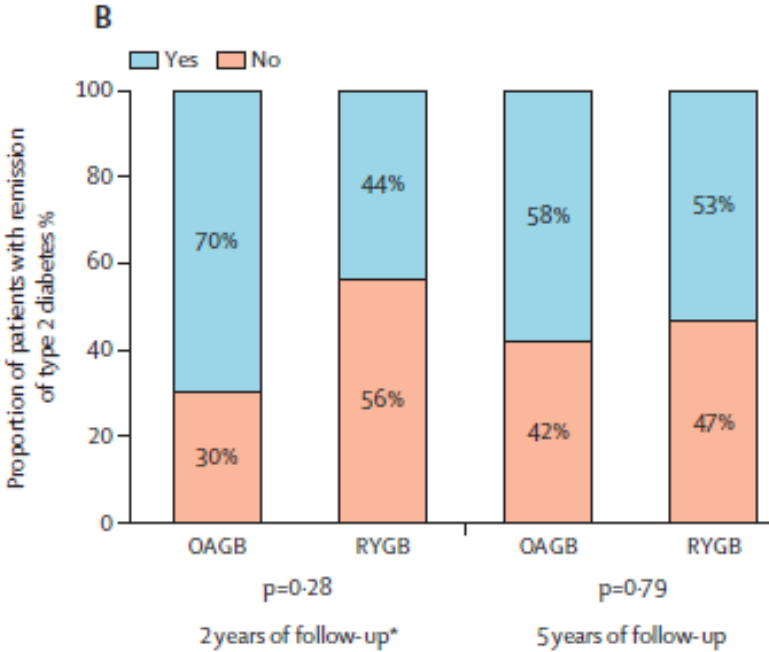
RCT



REMISSIONE DEL DIABETE



	Baseline	2 years of follow-up	5 years of follow-up
OAGB group	Mean 7.7% (SD 1.6; 61 mmol/mol [18]); n=26	Mean 5.6% (SD 0.8; 38 mmol/mol [9]); n=21	Mean 6.0% (SD 0.9; 42 mmol/mol [10]); n=12
RYGB group	Mean 7.5% (SD 1.8; 58 mmol/mol [20]); n=28	Mean 6.1% (SD 1.0; 43 mmol/mol [11]); n=17	Mean 6.5% (SD 1.4; 48 mmol/mol [16]); n=12



129 OAGB
124 RYGB

Follow up 5 anni

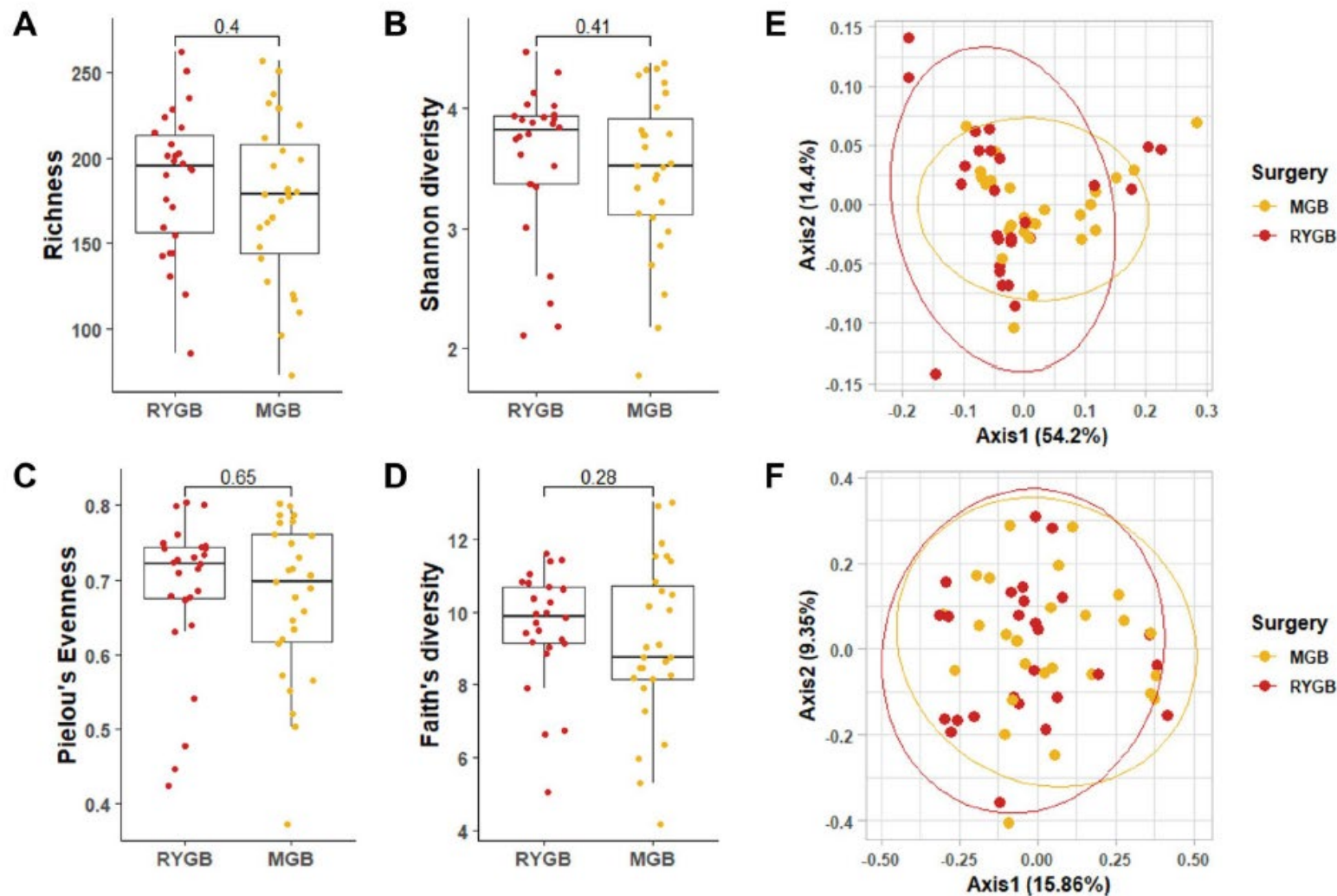
OAGB
Persi al FU 31%
89/129 dati disponibili

RYGB
Persi al FU 29%
88/124 dati disponibili

Short-term gut microbiota's shift after laparoscopic Roux-en-Y vs one anastomosis gastric bypass: results of a multicenter randomized control trial

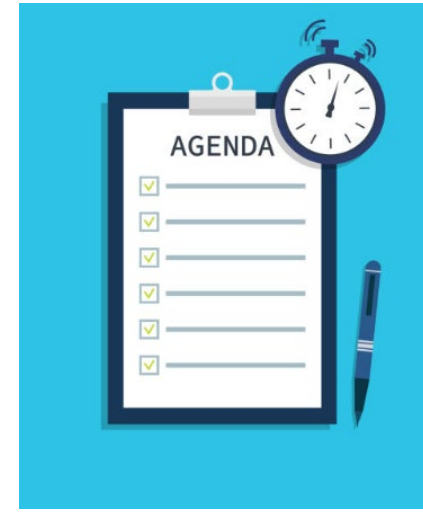
Surgical Endoscopy (2024) 38:6643–6656

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MICROBIOTA 27 OAGB vs 27 RYGBP

This is the first prospective, multicenter, randomized study evaluating the GM shift in a very homogeneous cohort subjected to OAGB vs RYGB ≥ 24 months after surgery,



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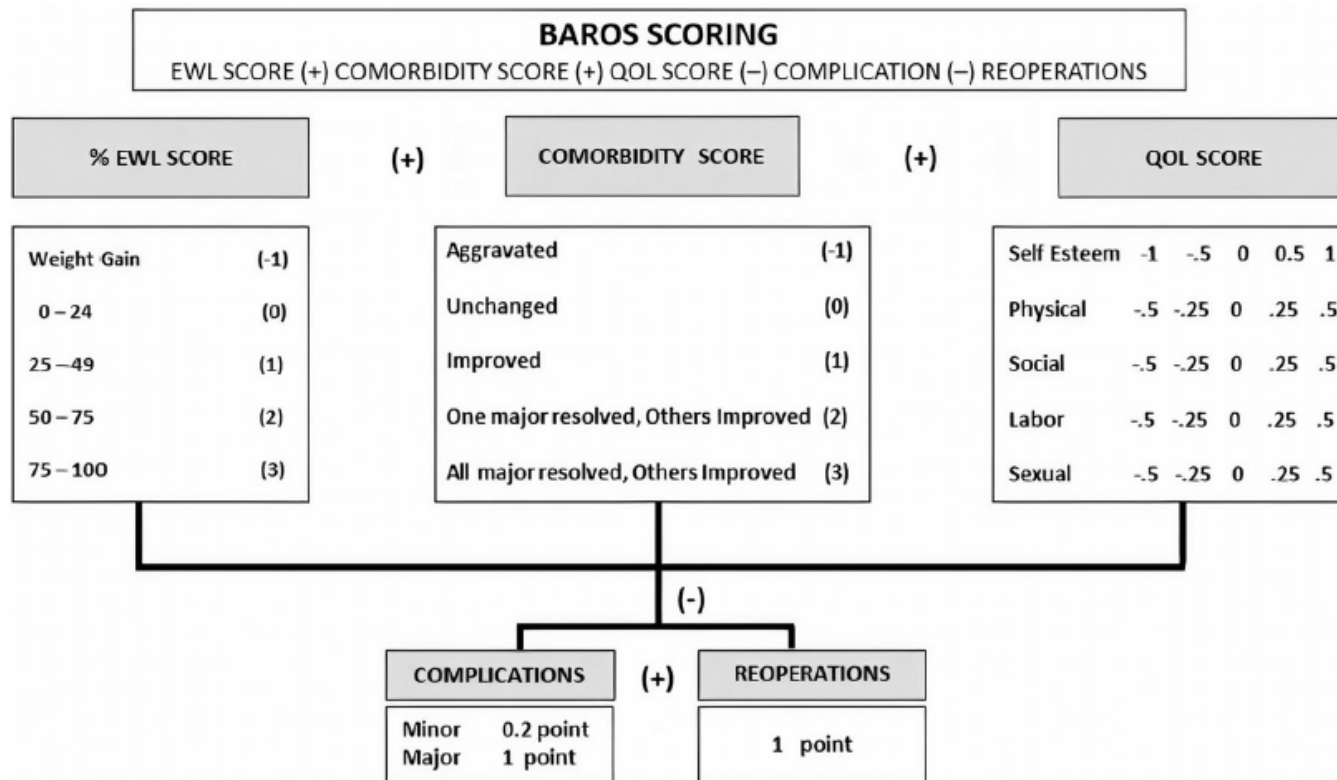
LSG vs OAGB: 7-Year Follow-up Data of a Randomised Control Trial and Comparative Outcome Based on BAROS Score

Obesity Surgery (2024) 34:1295–1305

COMORBIDITY	PRE-OPERATIVE DIAGNOSIS	POST-OPERATIVE		
		RESOLVED	IMPROVED	NO IMPROVEMENT
DM	On medicines and/or HbA1c>6.5	HbA1c <6.5 without medications	HbA1c <6.5 on medications	HbA1c >6.5 on medications
HTN	On medicines and/or BP>140/90	BP <140/90 without medicines	BP <140/90 on lower doses of medicines	Needs medicines in pre-operative doses
OSA	STOP BANG Score>4	STOP BANG Score <3	STOP BANG Score 3,4	STOP BANG Score >4
DJD	On medicines and/or Symptomatic	Asymptomatic and off medicines	Occasional symptoms or need lower doses	Symptomatic and Needs medicines in pre-operative doses

107 OAGB
107 SG

Follow up 7 anni



BAROS Score Outcome Assessment					
	Failure	Fair	Good	Very Good	Excellent
Patient with Comorbidity	1 or less	>1 to 3	>3 to 5	>5 to 7	>7 to 9
Patient without comorbidity	0	>0 to 1.5	>1.5 to 3	>3 to 4.5	>4.5 to 6

BAROS Score

Sistema a punteggio per quantificare entità calo ponderale e remissione delle complicanze

107 OAGB
107 SG

Follow up 7 anni

FOLLOW UP 7 ANNI

Follow-up	LSG	OAGB	p value
%EWL score	1.50 ± 1.11 (66)	1.97 ± 0.98 (64)	< 0.0001*
QoL score	1.11 ± 1.18 (66)	2.58 ± 0.33 (64)	< 0.0001*
Comorbidity score	1.46 ± 1.42 (54)	2.22 ± 1.01 (46)	0.0031*
Total BAROS score (with comorbidity)	4.15 ± 2.68 (54)	6.61 ± 1.95 (46)	< 0.0001*
Total BAROS score (without comorbidity)	2.37 ± 2.04 (12)	4.86 ± 0.88 (18)	< 0.0001*

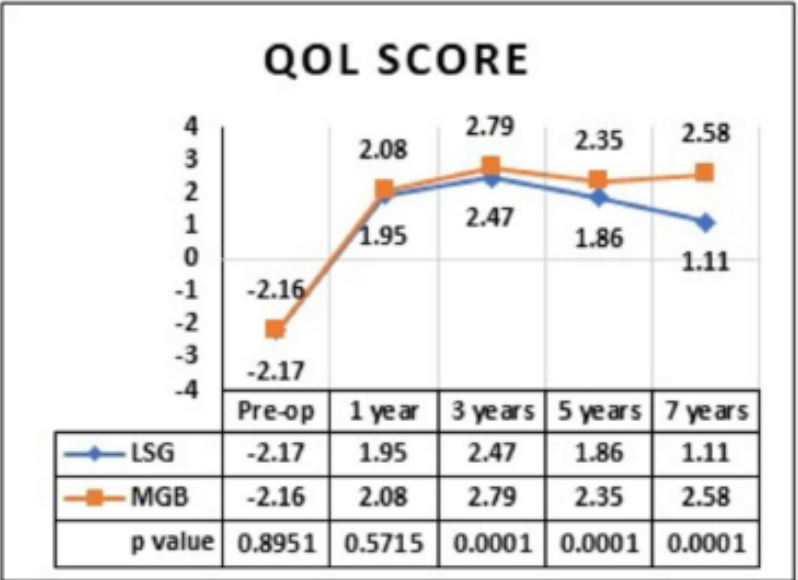
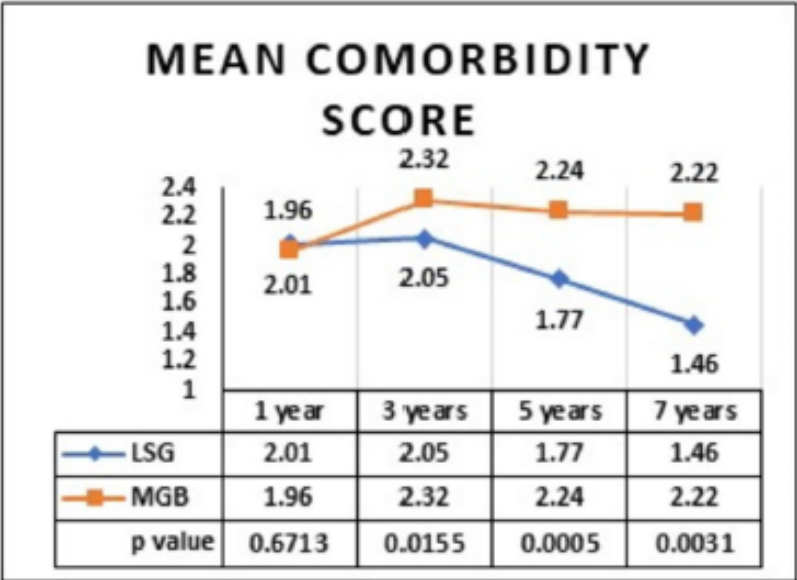
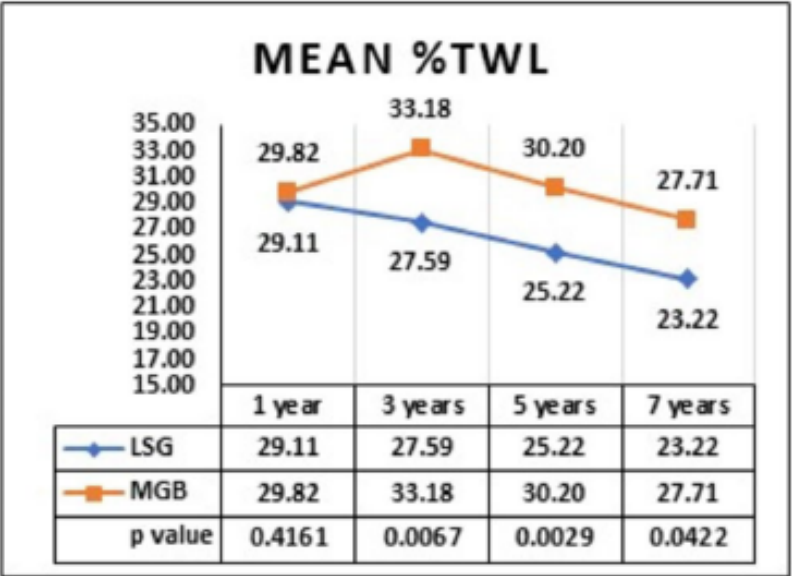
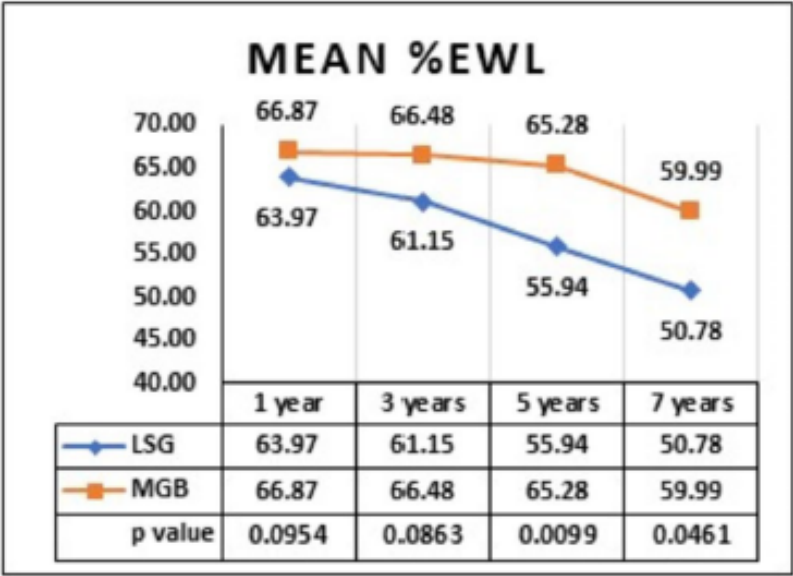
*P < 0.01

107 OAGB
107 SG

Follow up 7 anni

OAGB
Persi al follow up 41%
64/107 dati disponibili

LSG
Persi al follow up 40%
67/107 dati disponibili



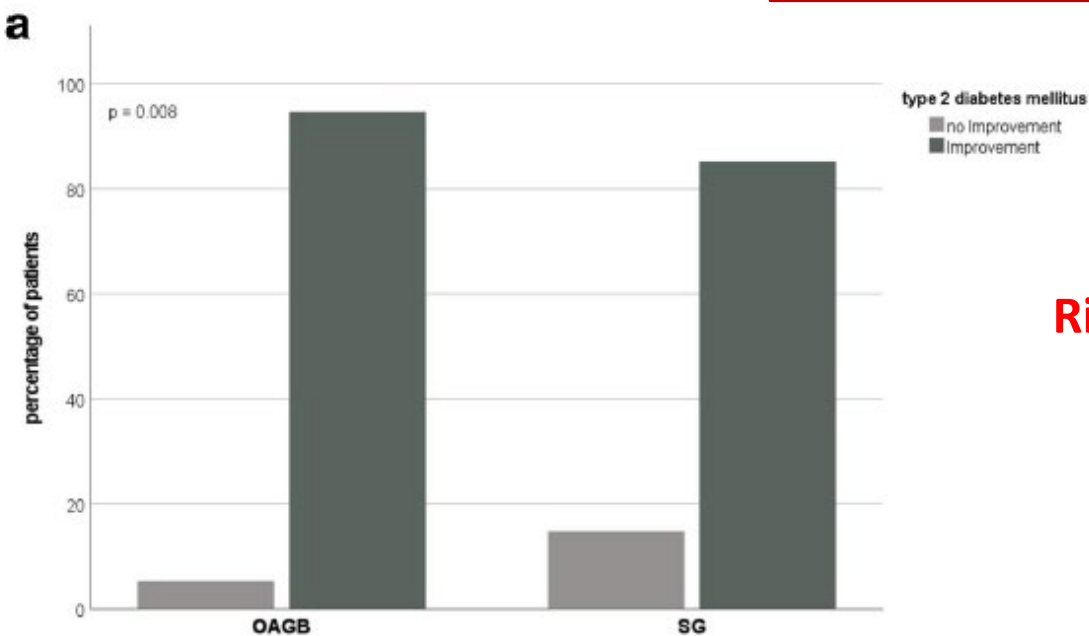
A Long-Term Comparative Study Between One Anastomosis Gastric Bypass and Sleeve Gastrectomy

Journal of Gastrointestinal Surgery (2023) 27:47–55

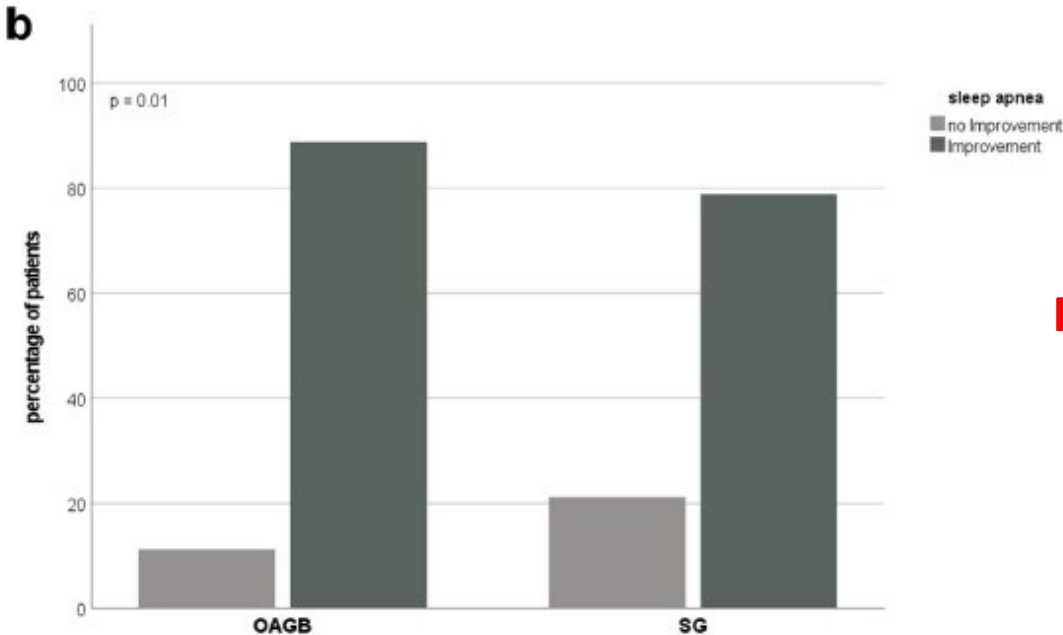
STUDIO RETROSPETTIVO su 1152 pazienti

911 OAGB
241 SG

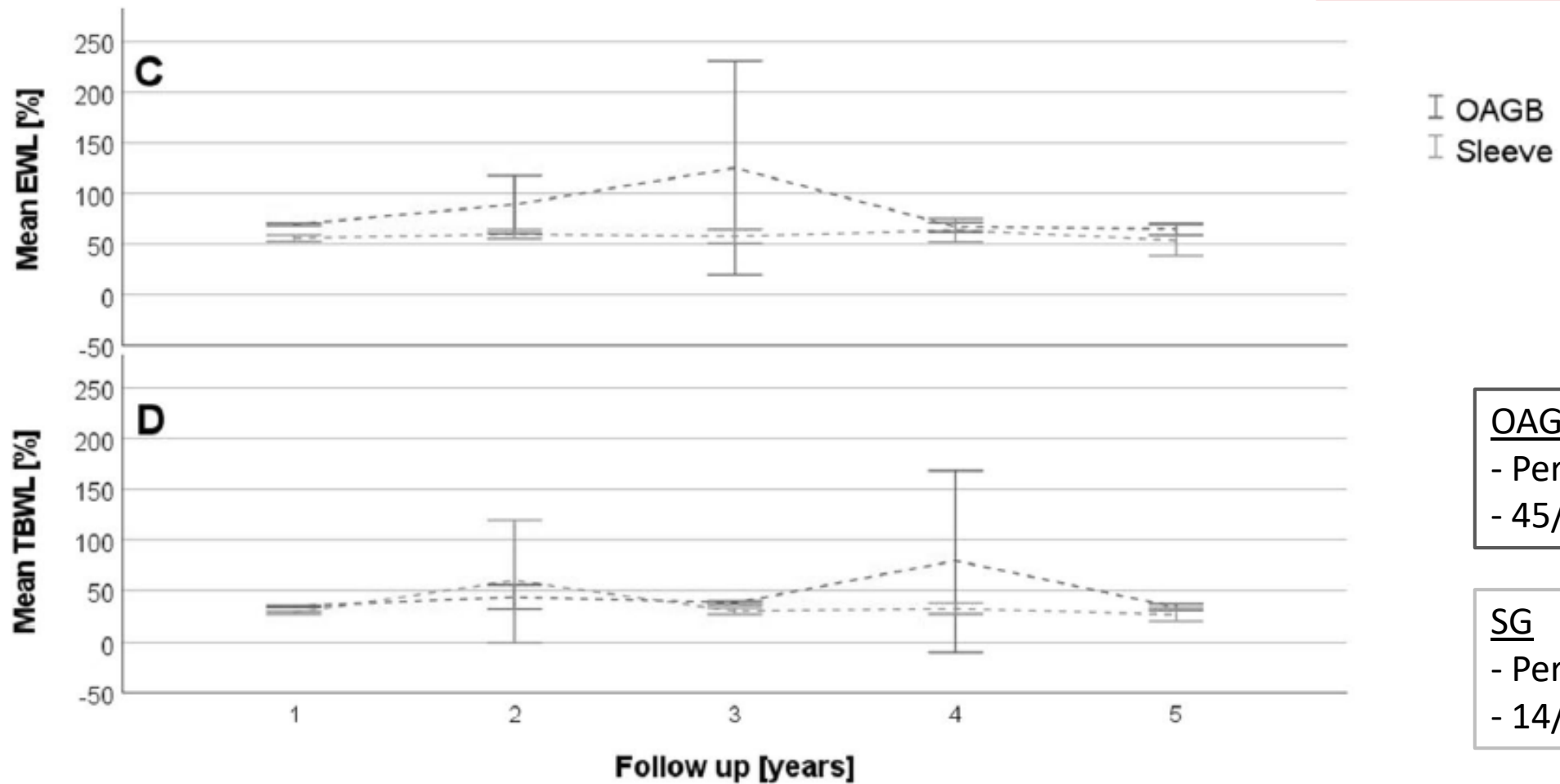
Follow up 5 anni



Risoluzione del diabete



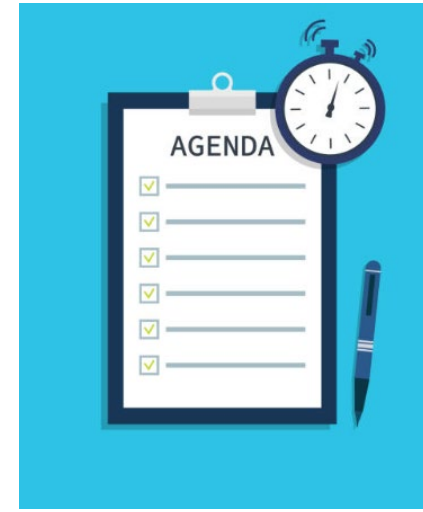
Risoluzione di OSAS



OAGB
- Persi al follow up 95%
- 45/911 dati disponibili

SG
- Persi al follow up 94%
- 14/241 dati disponibili

total numbers of measurement					
OAGB	766	438	157	73	45
SG	187	114	53	22	14



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CRITICITA'

Lost at follow up

Article

Characteristics of Patients Lost to Follow-up after Bariatric Surgery

Nutrients **2024**, *16*, 2710. <https://doi.org/10.3390/nu16162710>

Diagnosi pre-operatoria di diabete

Molti studi continuano ad includere pazienti come diabetici solo perchè assumono metformina o GLP1 analoghi

Diagnosi di remissione del diabete

HbA1c < 6,5%, in assenza di farmaci ipoglicemizzanti da almeno 3 mesi

Is Type 2 Diabetes Really Resolved after Laparoscopic Sleeve Gastrectomy? Glucose Variability Studied by Continuous Glucose Monitoring

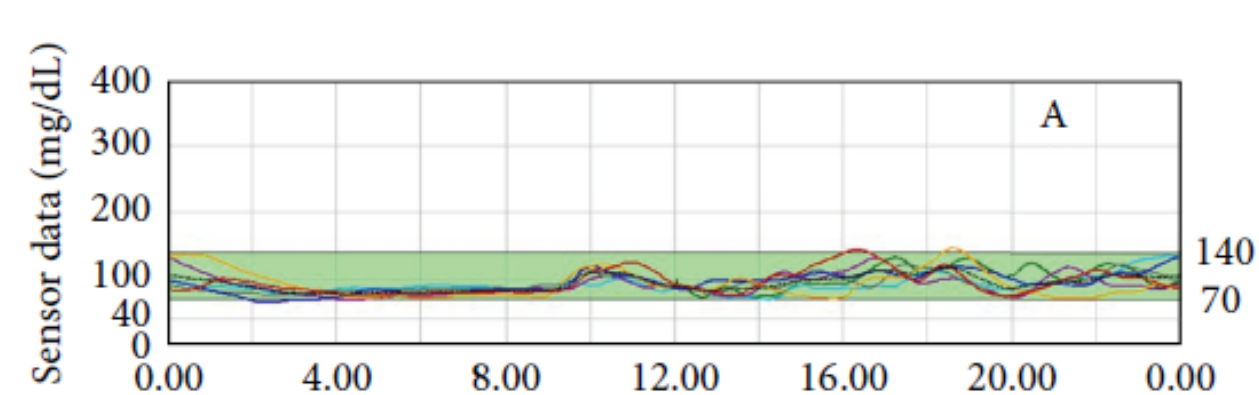
D. Capoccia,¹ F. Coccia,¹ A. Guida,¹ M. Rizzello,² F. De Angelis,²
G. Silecchia,² and F. Leonetti¹

Journal of Diabetes Research March 2015

REMISSIONE

HbA1c < 6,5%

In assenza di farmaci di ipoglicemizzanti da oltre 1 anno

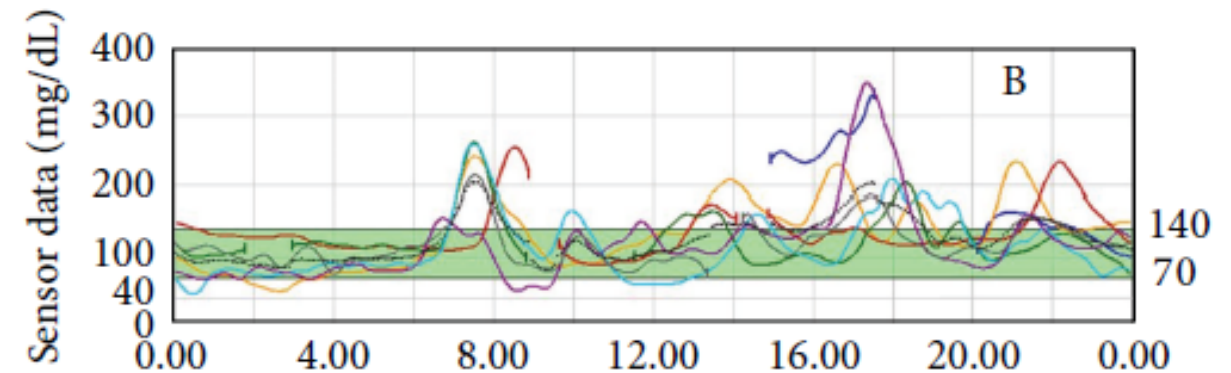


Mito o realtà?

REMISSIONE

HbA1c < 6,5%

In assenza di farmaci di ipoglicemizzanti da oltre 1 anno



Take home message

- Ci sono **dati a lungo termine su efficacia e sicurezza** di OAGB (massimo 10 anni)
- **Nessun RCT** che confronta OAGB con **terapia farmacologica**
- **Ci sono RCT** con follow up a lungo termine che **confrontano OAGB con RYGB o con SG** (massimo 7 anni)
- È stata dimostrata la **non-inferiorità di OAGB vs RYGBP** in termini di EWL e risoluzione/miglioramento delle comorbidità
- È stata dimostrata la **superiorità di OAGB vs SG** in termini di EWL e risoluzione/miglioramento delle comorbidità
- Ci sono ancora diverse **criticità** sui **lost at follow up** e sulla definizione di **remissione del diabete**