

Endoscopic Plication CABPS 2022

Why?...
and How?



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Name: **Roberto Trasolini**- “Canadian Obesity Weekend – May 2022”

Financial Disclosures

(over past 24 months)

	Speaker	Advisory	Research	Consultant
AbbVie				
Allergan				
Janssen				
Lupin Pharma				
Mylan				
Olympus				
Pendopharm				
Pentax Medical				
Pfizer				
Shire				
Takeda				

CanMEDS Roles Covered: **Trasolini**- “Canadian Obesity Weekend 2022”

X	Medical Expert (as <i>Medical Experts</i> , physicians integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional values in their provision of high-quality and safe patient-centered care. <i>Medical Expert</i> is the central physician Role in the CanMEDS Framework and defines the physician’s clinical scope of practice.)
	Communicator (as <i>Communicators</i> , physicians form relationships with patients and their families that facilitate the gathering and sharing of essential information for effective health care.)
X	Collaborator (as <i>Collaborators</i> , physicians work effectively with other health care professionals to provide safe, high-quality, patient-centred care.)
X	Leader (as <i>Leaders</i> , physicians engage with others to contribute to a vision of a high-quality health care system and take responsibility for the delivery of excellent patient care through their activities as clinicians, administrators, scholars, or teachers.)
	Health Advocate (as <i>Health Advocates</i> , physicians contribute their expertise and influence as they work with communities or patient populations to improve health. They work with those they serve to determine and understand needs, speak on behalf of others when required, and support the mobilization of resources to effect change.)
X	Scholar (as <i>Scholars</i> , physicians demonstrate a lifelong commitment to excellence in practice through continuous learning and by teaching others, evaluating evidence, and contributing to scholarship.)
	Professional (as <i>Professionals</i> , physicians are committed to the health and well-being of individual patients and society through ethical practice, high personal standards of behaviour, accountability to the profession and society, physician-led regulation, and maintenance of personal health.)

Why Endoscopy?... Surgery isn't for everyone..

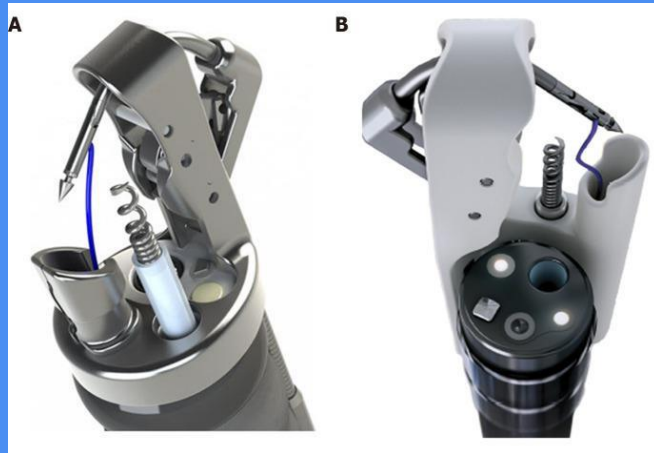
2019 Obesity Canada Report Card

Limited resources for bariatric surgery and an increasing number of referrals have led to unacceptable wait times, though marginal improvements were noted over 2017.

	Wait Time Between Referral & Consultation	2019 Grade	Change in Grade vs 2017	Wait Time Between Consultation & Surgery	2019 Grade	Change in Grade vs 2017
Newfoundland and Labrador	8 months	C	Improvement	8 months	B	Improvement
Nova Scotia	106 months	F	No	3 months	A	Improvement
New Brunswick	48–84 months	F	No	Up to 12 months	B	Improvement
Quebec	24 months	F	No	6–12 months	B	No
Ontario	Referral to medical program: up to 24 months	F	No	6–12 months	B	No
Manitoba	72 months	F	No	6–8 months	B	Improvement
Saskatchewan	36 months	F	No	6–12 months	B	No
Alberta	18–24 months	F	No	More than 12 months	C	No
British Columbia	Up to 24 months	F	No	Up to 12 months	B	No

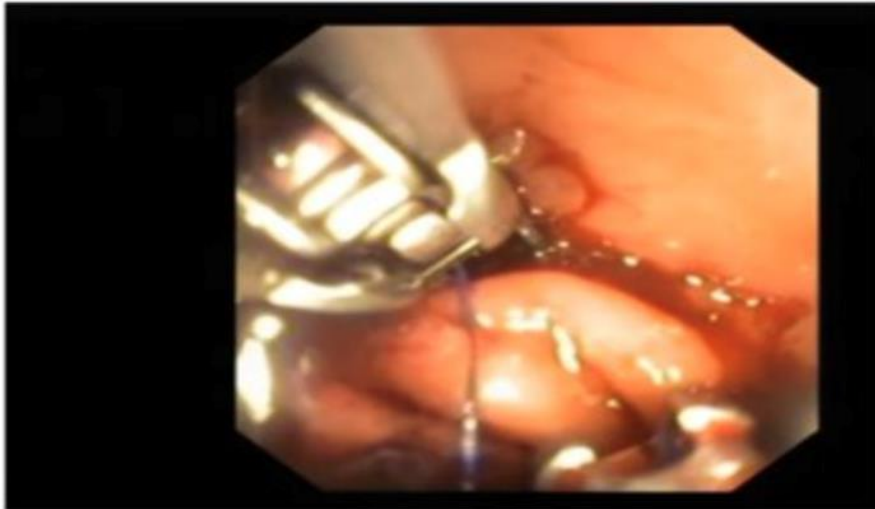
Potential of Bariatric Endoscopy

- Shorter hospital stay
 - Scarless
 - Reversible
 - Safe
 - Acceptable*
 - Cheap?
 - Durable?
-
- Surgery not an option for all



Best Current Endoscopic Plication Technique: “Endoscopic Sleeve Gastroplasty” (ESG)

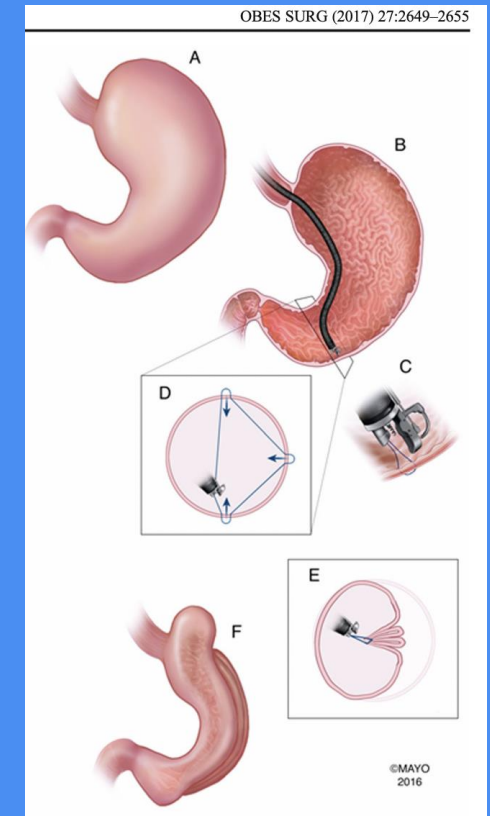
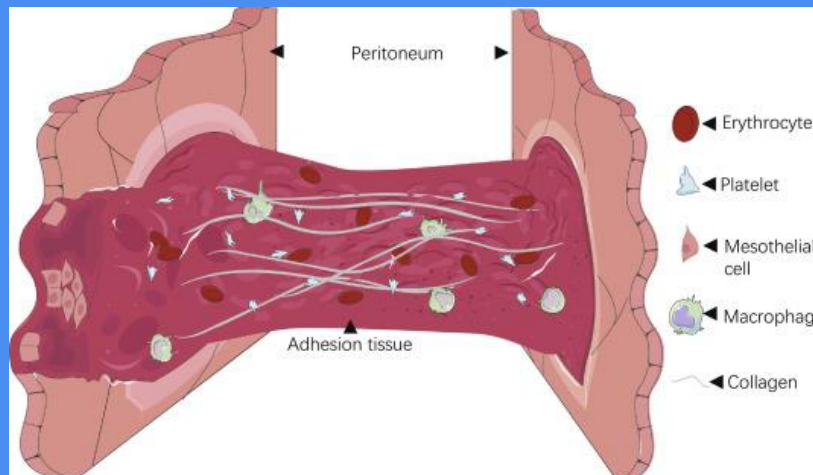
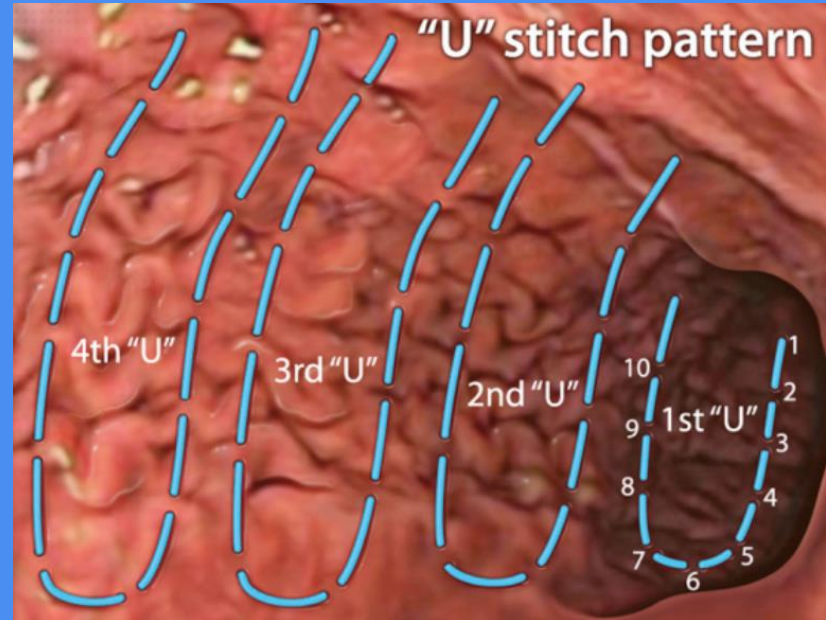
Apollo First-in-Human cases
Thompson and Hawes
ENDOCON April 2012

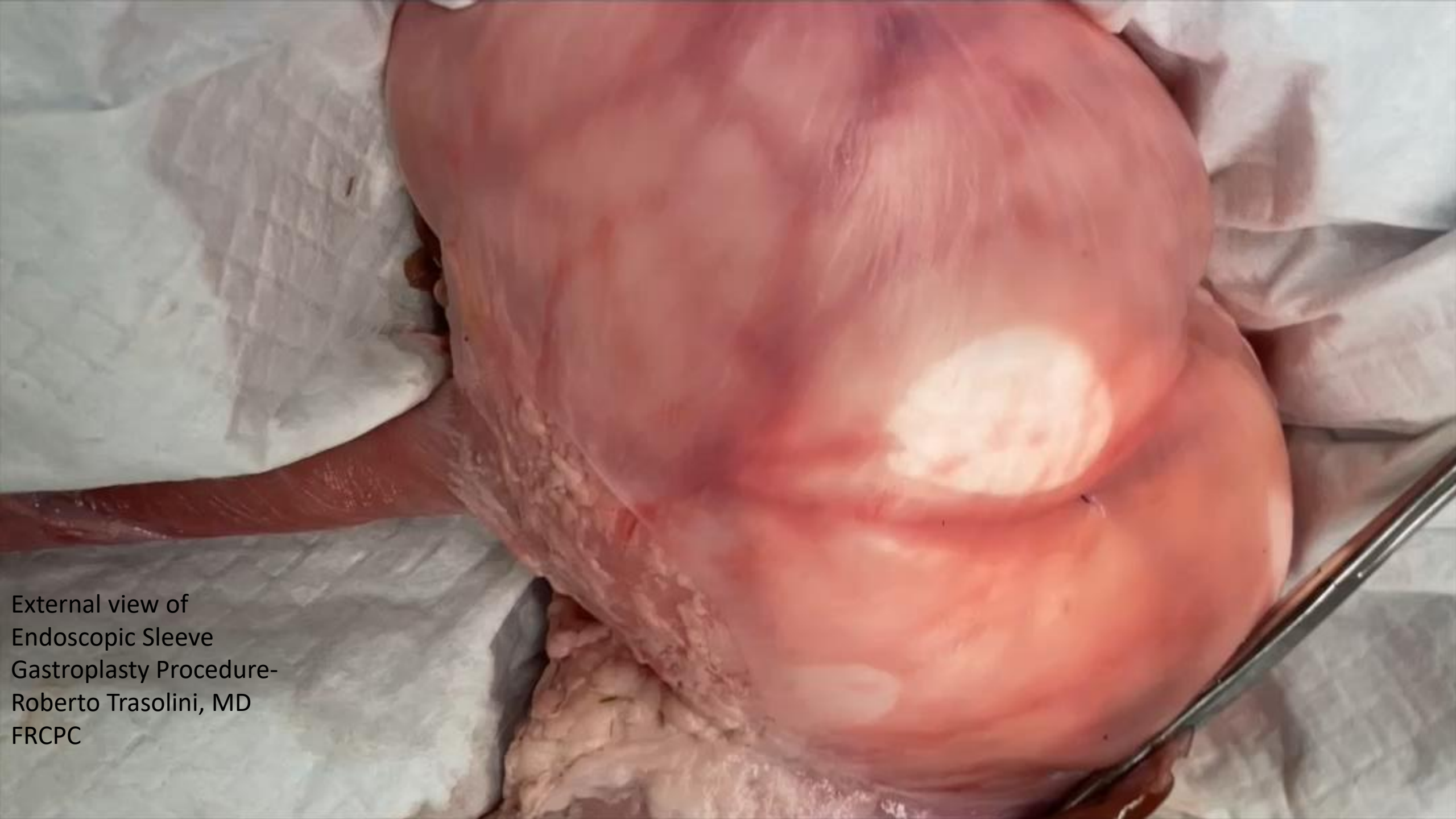


“Endoscopic Sleeve Gastroplasty” (ESG) Technique

1. Capture tissue with helix device
2. Pass full thickness 2-0 prolene suture
3. Repeat
4. Tighten and lock with suture cinch

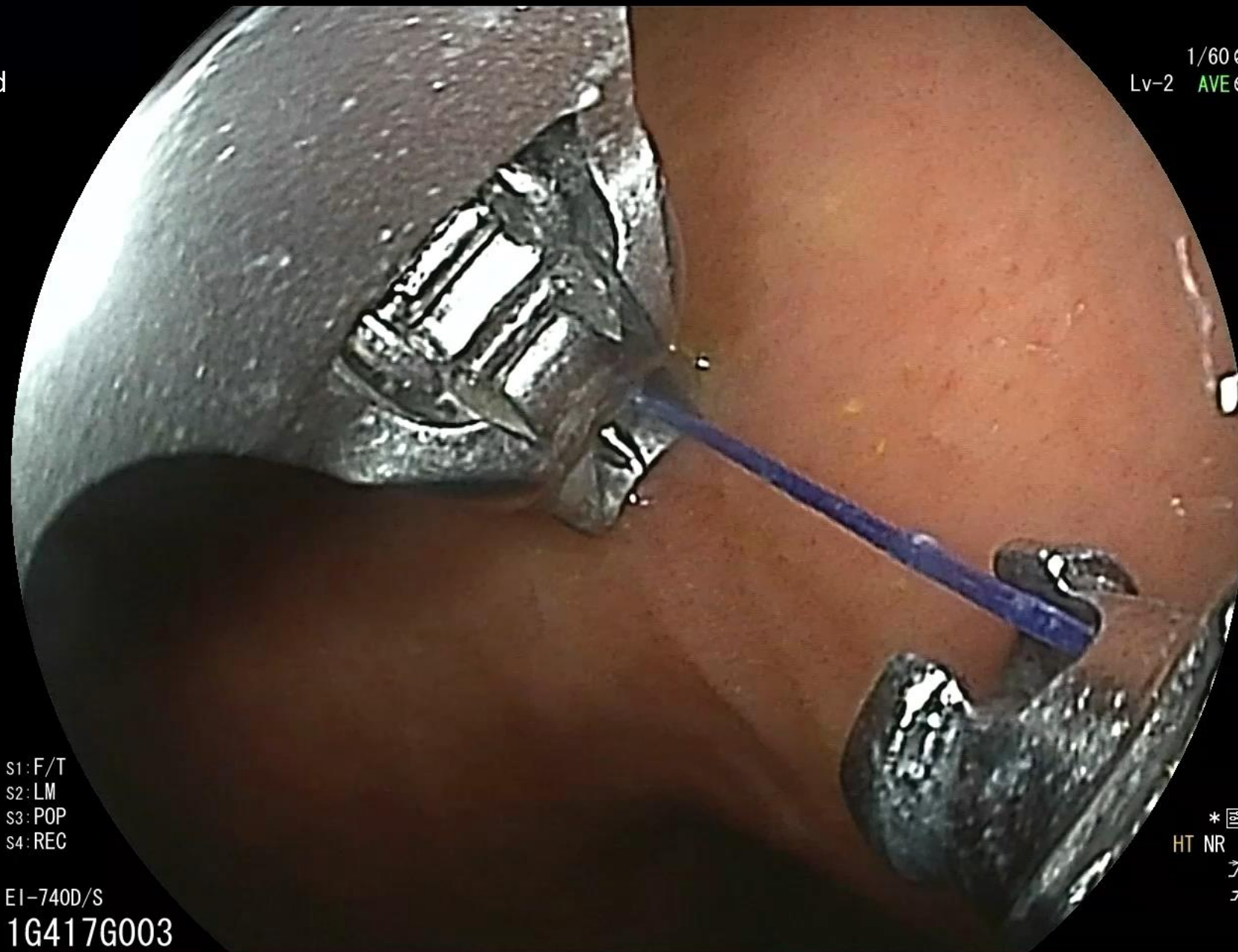
Long-term creation of serosa-serosa adhesions, 70-80% volume reduction, increased satiety





External view of
Endoscopic Sleeve
Gastroplasty Procedure-
Roberto Trasolini, MD
FRCPC

Video Courtesy of Chris
Thompson, Brigham and
Women's Hospital



1/60 ⊗
Lv-2 AVE ⊗

S1: F/T
S2: LM
S3: POP
S4: REC

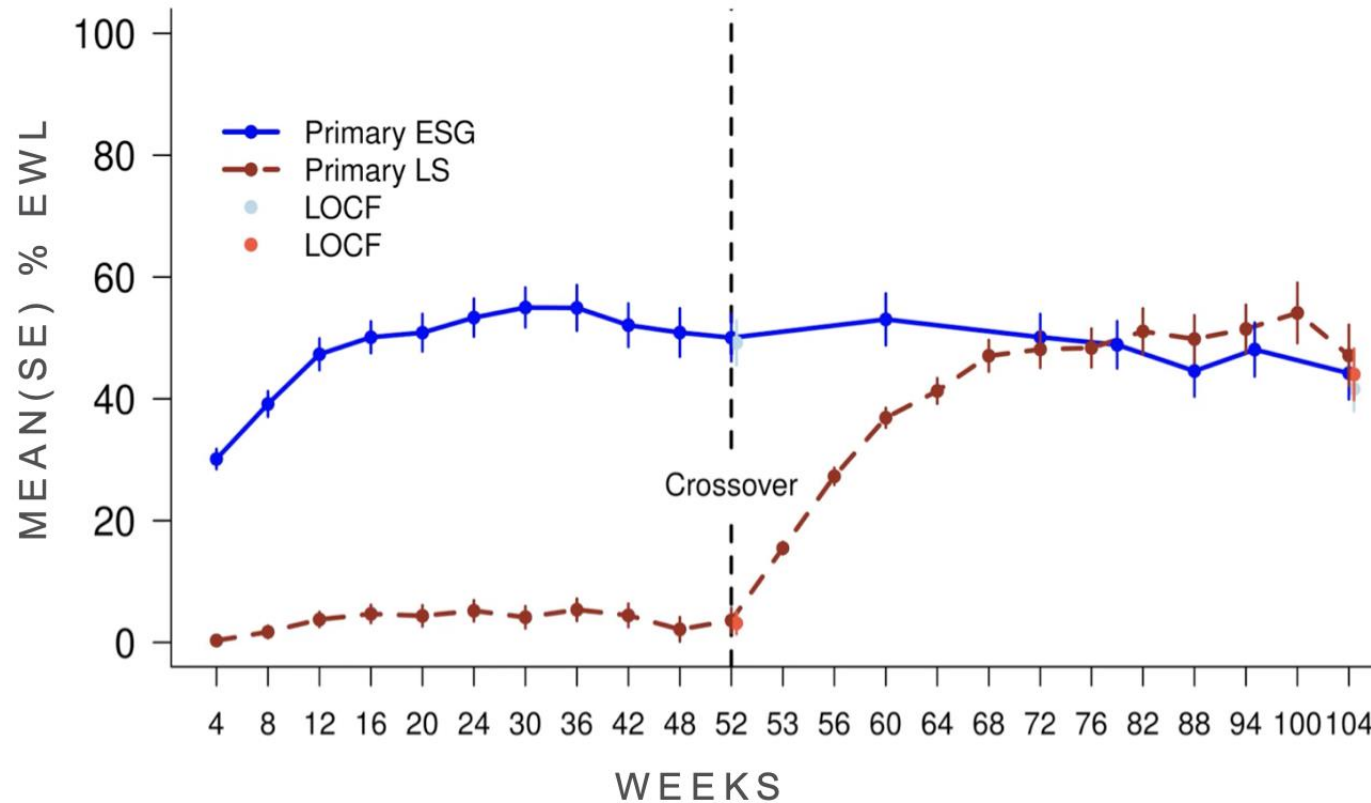
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HT NR

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MERIT Study Prospective RCT 2021, efficacy



metabolic syndrome

ESG: 82.8% improvement
SoC: 35.4% improvement
P<0.001



diabetes type II

ESG: 35% improvement, 35% partial or complete remission
SoC: 40% worsening, 20% improvement, 6.6% partial / complete remission
P=0.002



hypertension

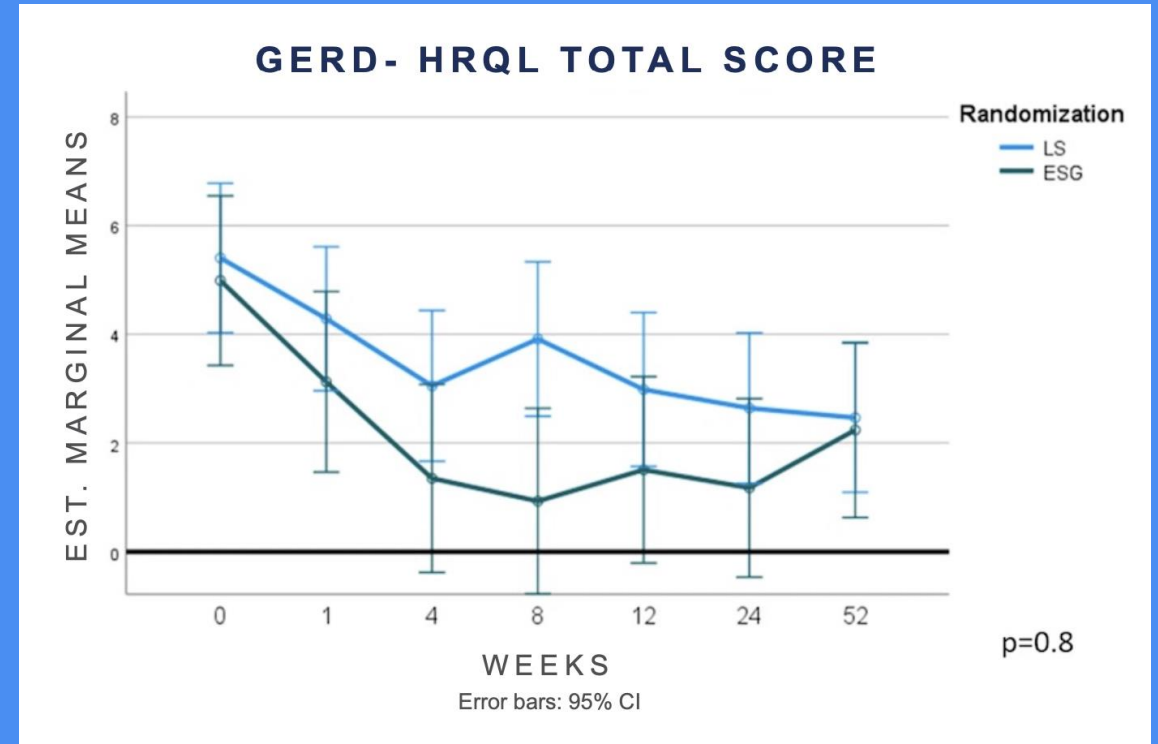
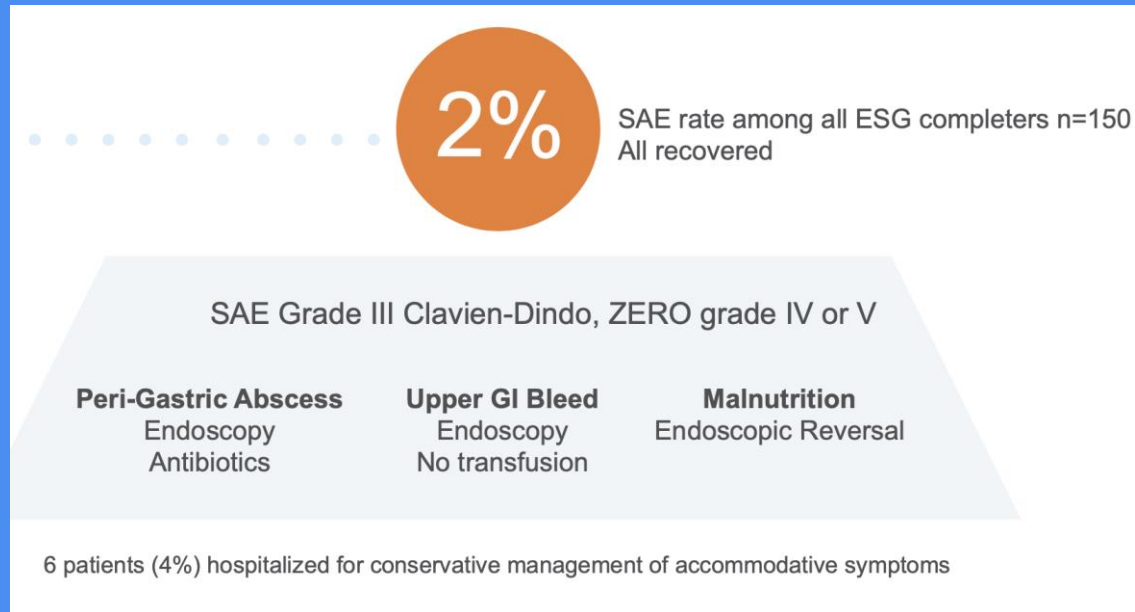
ESG: 45% improvement, 17% partial remission
SoC: 34% worsening, 1.7% partial remission
P=0.007



quality of life

Significantly improved compared to SoC IWQoL +SF36
p<0.001

MERIT Trial 2021 Complications



Summary

- Endoscopic full thickness suturing has expanded the potential for bariatric endoscopy
- MERIT Prospective RCT full publication 2022
- Endoscopic Sleeve Gastroplasty: 16-18% TBW in large meta-analyses, significant reduction in metabolic risk factors

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