



Title	Laparoscopic Adjustable Gastric Banding for Weight Loss in Obese Adults: Clinical and Economic Review
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Aim

To investigate the evidence on the clinical effectiveness and cost effectiveness of laparoscopic adjustable gastric banding (LAGB) as compared to open and laparoscopic Roux-en-Y gastric bypass (RYGB), open and laparoscopic vertical banded gastroplasty (VBG), lifestyle modification, or control groups.

Conclusions and results

Economic research suggests that investment in LAGB may lower the total future healthcare costs by lowering the severity and incidence of obesity-related comorbidities and associated costs. These calculations must consider the initial set-up costs, long-term costs, and costs of surgeons' learning curves. LAGB is shown to produce a significant loss of excess weight while maintaining low rates of short-term complications and reducing obesity-related comorbidities. LAGB may not result in the most weight loss, but it may be an option for bariatric patients who prefer, or who are better suited, to undergo less invasive and reversible surgery with lower perioperative complication rates.

Recommendations

If LAGB is to become a universal benefit, the proper infrastructure (eg, operating rooms, hospital beds, outpatient clinics) must be in place. Training programs are needed to ensure that bariatric surgeons are fully trained to perform surgery, treat the postoperative complications that may arise (eg, band erosion), and perform the surgical conversion that may be required if a patient does not achieve the weight-loss goal.

Methods

Published systematic reviews, health technology assessments, trials (including primary research), and economic studies were obtained by cross-searching online databases. A parallel search was performed on the Cochrane Library (Issue 1, 2007) database. The websites of regulatory agencies, health technology assessment agencies,

and related agencies were searched, as were specialized databases. Two external reviewers commented on this report.

Further research/reviews required

Findings from long-term research may become available, permitting adequate assessment of the long-term implications of LAGB as a surgery option on its own and in comparison to other surgeries such as LRYGB.