

## First experience of laparoscopic sleeve gastrectomy for morbid obesity in our OR

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*Introduction:* Laparoscopic approach to bariatric surgeries has been penetrating into our country and first case of laparoscopic restrictive surgery for morbid obesity has been performed until 2010 in our hospital. Perioperative nursing experience of the case will be reported. *Patient and Methods:* A 39-year-old, 132 kg man (height 170cm, BMI 45.7) was planned to undergo laparoscopic sleeve gastrectomy for weight reduction under general anesthesia. His medical background included hypertension, sleep apnea and gall stone. Setting in operating theatre was designed on the basis of that for laparoscopic gastrectomy for gastric cancer in our OR. The patient was positioned supine with thighs abducted and 30 degrees reverse Trendelenburg. Lithotomy positioning device (Levigator™), which was routinely used for the operating position of laparoscopic gastrectomy, were revealed to be too small for the patient, thus, leg section of electric operating table was switched between right and left part to obtain wide area for abducted thighs. Intermittent pneumatic compression devices were also equipped during surgery. *Results:* Operative procedures were completed within 3 hours with little blood loss. However, the patient noted numbness and mild foot drop of right leg right after surgery. Examination by a neurologist on the second postoperative day revealed right peroneal palsy. Slow, but complete recovery occurred over three month. *Discussions:* Photographical review of the OR setting could not reveal any mechanical compression of the site. However, repeated checkup of the whole body of patient during operation was suggested to be important to this type of surgery.