

Anastomotic Stenosis: Complication of Gastric Bypass Surgery

When you get gastric bypass surgery, there can be complications. Some are related to what you eat (or don't eat), others are related to the surgery itself. One complication that can develop after weight loss surgery is called anastomotic stenosis, or a stricture. A stricture is when the new connection your surgeon constructed between your stomach pouch and your small intestine narrows. The anastomosis does not fully heal, and leaks digestive juices and partially digested food into your abdomen. Stricture is one of the more serious types of complications from gastric bypass surgery.

It's unknown why strictures happen after gastric bypass surgery; it could be because of a few factors, such as when the surgeon uses staples, particularly circular ones, during surgery, rather than using sutures or stitches. There is also evidence that scarring at the site can contribute to anastomotic stenosis forming, and that not enough blood flowing to the area could play a part, too. Smokers have higher rates of strictures because smoking causes the dilation of blood vessels, which leads to complications in healing and recovery after surgery. Additionally, taking high qualities anti-inflammatory medications (NSAIDs) and aspirin can cause stomach ulcers at the anastomosis.

Anastomosis most often occurs around three to four weeks after you have gastric bypass surgery. If you begin experiencing things like difficulty swallowing, nausea, or if you vomit food that is undigested, especially after eating, you might be experiencing stricture. Another indication is if you have a persistent feeling of fullness in your upper abdominal area, or if you have trouble eating certain kinds of foods.

If you think you may be experiencing anastomotic stenosis, go see your doctor right away. They might recommend an abdominal test called an "upper GI" which can show any stricture. You also might have an upper endoscopy, where the doctor inserts a flexible tube down your esophagus and inflates a special kind of balloon in the anastomosis, which will help them see any narrowing of the anastomotic area. If you have a stricture, they may perform an endoscopic dilation, where they inflate a special balloon in the area, which will hopefully cause the opening to stretch back to its original size. If that does not work, you might need surgery to fix the issue, and perhaps take a medication called a proton pump inhibitor which will help keep your stomach acid under control.

In order to reduce the chances of having stenosis, you have to follow your doctor or the instructions of your healthcare provider carefully, especially about what to eat after you've had gastric bypass surgery. Make sure you discuss how much medication you take for pain, especially NSAIDs like aspirin and ibuprofen, because they can influence the development of stenosis. Quitting smoking and getting exercise will also help.

The commitment to lose weight is one that has to last a lifetime and having weight loss surgery can be part of that commitment. There may be bumps on the road to your goal weight, and anastomotic stenosis could be one of the bumps you endure. However, it is something that can be addressed and managed.