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## Abstract

### Aim

Preoperative OGD in patients undergoing bariatric surgery, has been a subject for debate for decades. The aim of this study is to evaluate the pathology pick up rate in routine preoperative endoscopy in patients undergoing Gastric Bypass surgery (LRYGB) in our unit.

### Method

Retrospective review of patients' records who underwent LRYBG in our unit from February 2009 to March 2020. Patients were divided into two groups according to the presence or absence of symptoms prior to bariatric surgery: Group A (Asymptomatic) and Group B (Symptomatic). Data from prospectively kept electronic OGD reports, CLO test results, histology reports and changes in management plan were collected and analysed.

### Results

114 patients were included in the analysis, 85 (74.56%) were in group A and 29 in group B. OGD detected pathology in 34 patients in group A and 21 in group B ( $p=0.004$ ). Those included hiatus hernia (HH) (17.65% group A, 44.83% group B,  $p=0.006$ ); stomach ulcer (7.06% group A, 3.45% group B,  $p=0.676$ ), H. pylori infection (12.86% group A, 29.41% group B). This led to change of management in 22 patients in group A and 12 of group B ( $p=0.157$ ) excluding PPI prescription. Those changes included H. pylori eradication (10.59% group A, 17.24% group B,  $p=0.153$ ), HH repair (3.53% group A, 24.14% group B,  $p=0.002$ ). There was no cancellation or change in bariatric surgery offered in both groups.

### Conclusions

Preoperative OGD has only significantly impacted the bariatric patient's pathway in symptomatic patients. However, in Asymptomatic patients, OGD could be replaced by cheaper and non-invasive alternatives.