

Clinical Image

Pregnancy During Intra-gastric Balloon Treatment, Case Report

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Clinical Image

The prevalence of people who are overweight or obese has increased dramatically in high-income countries over the past 20 years. Endoscopic Intra-gastric Balloon (IGB) placement is one of the minimally invasive methods of obesity treatment because IGB are safe and effective for weight loss. There is a strong association between obesity and infertility, and weight loss can result in increased fecundity in obese women [1]. We report a case of a patient who presented an overweight body of 108 kg for 1.65 m. For 13 years in a row, she tried to become pregnant but without success. Through IVF, she became pregnant 1 year after we placed the intra-gastric balloon (500 ml of digestion and 200 ml of air). Before becoming pregnant, she had lost 36 kg. Due to the fear of abortion, she decided to keep the intra-gastric balloon. Throughout the pregnancy, she was closely followed by the gynecologist and the surgeon. Although according to the literature, patients with IGB have about 63% vomiting and 55% nausea, that patient had very few such symptoms [2]. Finally, we removed the gastric balloon after she had stopped breastfeeding; she had kept the IGB for 3 years. The removal was difficult because the structure of the balloon had changed, and it was too difficult to penetrate with a needle. The gastric mucosa was completely normal.

Currently, there are no clear recommendations for keeping or removing the intra-gastric balloon in case of pregnancy. The aforementioned patient has tolerated the intra-gastric balloon very well for 3 years. Normally, this type of balloon is recommended to be kept only for 6 months.

Keywords: Obesity; Intra-gastric balloon; IVF; Pregnancy

References

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Figure 1: Intra-gastric balloon after removal.

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