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Título
Large Bowel Obstruction Secondary to Gastric Band String Entrapment: A Delayed Mechanical Complication

Introdução
Laparoscopic adjustable gastric banding is an effective bariatric procedure. However recent data suggests an higher rate of complications than what was previously described. We report an unusual case of large bowel obstruction secondary to gastric band connecting string entrapment, occurring 16 years after placement.

Material e Métodos
A 64-year-old male with a history of gastric banding for obesity (initial BMI 37.8, current BMI 28.1) presented with four days of absent gastrointestinal transit and progressive abdominal distension.

Resultados
The patient was hemodynamically stable, with a distended but non-tender abdomen and no peritoneal signs. Laboratory findings were unremarkable. Computed tomography demonstrated a mesenteric root strangulation caused by the gastric band string, with a competent ileocecal valve leading to marked distension of the ascending colon (80 mm). Exploratory laparoscopy confirmed the diagnosis, and the gastric band was removed. The postoperative course was uneventful, and the patient was discharged on day four. At six-month follow-up, he remained asymptomatic.

Discussão
Late mechanical complications of gastric banding are rare but can be life-threatening. This case illustrates a delayed presentation of colonic obstruction due to the gastric band connecting string, emphasizing the need for long-term vigilance in patients with history of bariatric procedures presenting with bowel obstruction symptoms.

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