

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

28 May 2026

### Evaluating the Effectiveness of Concomitant Cruroplasty with Sleeve Gasterectomy for Preventing De-novo Gastric Reflux after Sleeve in Patients with Severe Obesity in Comparison to Control Group Who Will Recieve The Only Sleeve Gasterectomy

#### Protocol summary

##### Study aim

Evaluating and comparison of the incidence of de-novo GERD and de-novo hiatal hernia after concomitant cruroplasty and sleeve gasterectomy with the sleeve gasterectomy alone. Evaluating and comparison of the mean of GERD-QL Questionnaire score after concomitant cruroplasty and sleeve gasterectomy with sleeve gasterectomy itself.

##### Design

Single-blinded randomized controlled parallel clinical trial

##### Settings and conduct

This study is going to be conducted as a single-blinded randomized controlled parallel clinical trial in Isfahan center of excellence for bariatric surgery on patients with severe obesity and otherwise health and evaluate the preventing effects of concomitant cruroplasty with sleeve gasterectomy on postoperative gastric reflux

##### Participants/Inclusion and exclusion criteria

Patient with severe obesity who are a candidate for bariatric surgery without any sign and symptoms for gastric reflux without any history of it and with consuming no PPIs drugs, and without any clinical evidence of GERD and hiatal hernia in endoscopy who are willing to participate in this study and will complete all the postoperative evaluations and visits including postoperative endoscopy.

##### Intervention groups

Intervention: Routine sleeve gasterectomy with concomitant cruroplasty Control/Placebo: Just routine sleeve gasterectomy without cruroplasty

##### Main outcome variables

Incidence of de-novo gastric reflux after sleeve gasterectomy by asking clinical symptoms of GERD (e.g. heartburn and regurgitation), esophagitis and hiatal hernia in endoscopy, and filling the GERD-QL questionnaire.

#### General information

##### Reason for update

Recruiting was expected to start after confirmation of trial and receiving the registration code. Because the approval was issued sooner, we started recruiting sooner than what has been estimated.

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20201020049087N1**

Registration date: **2020-11-13, 1399/08/23**

Registration timing: **prospective**

Last update: **2020-12-14, 1399/09/24**

Update count: **1**

##### Registration date

2020-11-13, 1399/08/23

##### Registrant information

##### Name

shahab shahabi

##### Name of organization / entity

##### Country

Iran (Islamic Republic of)

##### Phone

+98 31 3667 1832

##### Email address

shshahabi@yahoo.com

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2020-11-17, 1399/08/27

##### Expected recruitment end date

2021-01-14, 1399/10/25

##### Actual recruitment start date

empty

**Actual recruitment end date**  
empty

**Trial completion date**  
empty

**Scientific title**  
Evaluating the Effectiveness of Concomitant Cruroplasty with Sleeve Gastrectomy for Preventing De-novo Gastric Reflux after Sleeve in Patients with Severe Obesity in Comparison to Control Group Who Will Recieve The Only Sleeve Gastrectomy

**Public title**  
Sleeve and Cruroplasty for Preventing De-novo Gastric Reflux

**Purpose**  
Prevention

**Inclusion/Exclusion criteria**  
**Inclusion criteria:**  
Have indications for bariatric procedure according to ASMBS guideline (i.e. body mass index>40 kg/m2)  
Normal gastroesophageal junction view on endoscopy No hiatal hernia on endoscopy H.pylori stool antigen negative No history of gastroesophageal reflux disease symptoms No history of consuming PPIs or antibiotics  
Willingness to participate in this study Age within 20-60 years old  
**Exclusion criteria:**  
Not willing to participate in this study Pregnancy during the follow-up Severe or uncontrolled psychological disease Not respecting to the dietician and supplement use protocols Not participating in postoperative follow-up visits Not willing to do postoperative endoscopy >20% lack in medical document data Finding hiatal hernia during the operation

**Age**  
From **20 years** old to **60 years** old

**Gender**  
Both

**Phase**  
N/A

**Groups that have been masked**  

- Participant

**Sample size**  
Target sample size: **170**

**Randomization (investigator's opinion)**  
Randomized

**Randomization description**  
The patients are allocated into either the intervention or control group using a non-stratified block randomization method to keep an even randomization ratio of (1:1). Random Allocation Software is used by our expert analytics to determine the list and group of patients. He is blinded to the selecting process, and pre- and post-operative assessments. The block size will be equal and is set to 2, the sufficient and estimated sample size will be 170, then the allocation code is set to sequential. The analytics will use the output of software to determine the sequence and allocation of patients. Then each code is written on a non-transparent envelope and a paper is put

in it in which the intervention or control is written on the paper. The series of the envelope will be according to the software's list and they will keep in a large box with a locker. The analytics has the key for the box and this box will be kept in his room which the analytics has its only key and has no windows. As the patients enrolled in the study sequentially, the analytics use the designated envelope and give it to the surgeon at the time of surgery.

**Blinding (investigator's opinion)**

Single blinded

**Blinding description**

Cruroplasty will be performed at the end of sleeve gastrectomy while patient is under anesthesia. After the randomization process and defining the group of patients, the analytics say the group only to the surgeon and the surgeon who is involved in selecting patients and assessing outcomes will know about the group. Although the patient will be informed about the probability of receiving cruroplasty or not, is blinded during the surgery because of anesthesia.

**Placebo**

Used

**Assignment**

Parallel

**Other design features**

**Secondary Ids**

empty

**Ethics committees**

**1**

**Ethics committee**

**Name of ethics committee**

isfahan university of medical sciences deputy of ethics in medical research

**Street address**

Heza jarib blv. azadi sq.

**City**

isfahan

**Province**

Isfahan

**Postal code**

81746

**Approval date**

2020-04-12, 1399/01/24

**Ethics committee reference number**

IR.MUI.MED.REC.1399.037

**Health conditions studied**

**1**

**Description of health condition studied**

severe obesity

**ICD-10 code**

E66.01

**ICD-10 code description**

Morbid (severe) obesity due to excess calories

## 2

### **Description of health condition studied**

Bariatric surgery status

### **ICD-10 code**

Z98.84

### **ICD-10 code description**

Bariatric surgery status

## 3

### **Description of health condition studied**

Gastro-esophageal reflux disease without esophagitis

### **ICD-10 code**

K21.9

### **ICD-10 code description**

Gastro-esophageal reflux disease without esophagitis

## 4

### **Description of health condition studied**

Gastro-esophageal reflux disease with esophagitis

### **ICD-10 code**

K21.0

### **ICD-10 code description**

Gastro-esophageal reflux disease with esophagitis

## **Primary outcomes**

### 1

#### **Description**

Incidence of GERD clinical manifestations

#### **Timepoint**

before-after the surgery

#### **Method of measurement**

Taking history of reflux symptoms e.g. heartburn, regurgitation

## **Secondary outcomes**

### 1

#### **Description**

GERD-Quality of Life questionnaire score

#### **Timepoint**

change in score before-after the surgery

#### **Method of measurement**

GERD-QL questionnaire

### 2

#### **Description**

Evidence of reflux in gastroesophageal endoscopy

#### **Timepoint**

before-after the surgery

#### **Method of measurement**

gastroesophageal endoscopy

### 3

#### **Description**

Evidence of hiatal hernia in endoscopy

## **Timepoint**

before-after surgery

## **Method of measurement**

upper endoscopy

## **Intervention groups**

### 1

#### **Description**

Intervention group: Concomitant cruroplasty with routine sleeve gastrectomy. The sleeve is performed after releasing the stomach from the surrounding soft-tissue and omentum. Next, parallel to greater curvature, and with a 36 french Bougie in place, the gasterectomy will be performed using staplers. For cruroplasty, the cruses of the diaphragm bring closer with nonabsorbable sutures.

#### **Category**

Prevention

### 2

#### **Description**

Control group/placebo: Just routine sleeve gastrectomy without cruroplasty. The sleeve is performed after releasing the stomach from the surrounding soft-tissue and omentum. Next, parallel to greater curvature, and with a 36 french Bougie in place, the gasterectomy will be performed using staplers. The cruses of diaphragm will be observed laparoscopically for concealed hiatal hernia, but no cruroplasty with non-absorbable suture will be performed.

#### **Category**

Placebo

## **Recruitment centers**

### 1

#### **Recruitment center**

##### **Name of recruitment center**

Isfahan Minimally Invasive Surgery and Obesity Research Center

##### **Full name of responsible person**

Masoud Sayadi

##### **Street address**

Alzahra University Hospital, Sofe Blvd.

##### **City**

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##### **Postal code**

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##### **Email**

drsayadi@yahoo.com

## **Sponsors / Funding sources**

## 1

### Sponsor

**Name of organization / entity**

Esfahan University of Medical Sciences

**Full name of responsible person**

Shaghayegh Haghjoo from Isfaha University of  
Medical Sciences Deputy of Research

**Street address**

Hezar Jarib blvd.

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research@mui.ac.ir

**Grant name****Grant code / Reference number****Is the source of funding the same sponsor organization/entity?**

Yes

**Title of funding source**

Esfahan University of Medical Sciences

**Proportion provided by this source**

100

**Public or private sector**

Public

**Domestic or foreign origin**

Domestic

**Category of foreign source of funding**

*empty*

**Country of origin****Type of organization providing the funding**

Academic

### Person responsible for general inquiries

**Contact****Name of organization / entity**

Esfahan University of Medical Sciences

**Full name of responsible person**

Shahab Shahabi

**Position**

Advanced Laparoscopic Surgery Fellowship, General  
Surgeon

**Latest degree**

Subspecialist

**Other areas of specialty/work**

General Surgery

**Street address**

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Research Center, Alzahra University Hospital, Sofe  
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### Person responsible for scientific inquiries

**Contact****Name of organization / entity**

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**Full name of responsible person**

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### Person responsible for updating data

**Contact****Name of organization / entity**

Esfahan University of Medical Sciences

**Full name of responsible person**

Shahab Shahabi

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## Sharing plan

**Deidentified Individual Participant Data Set (IPD)**

Undecided - It is not yet known if there will be a plan to make this available

**Study Protocol**

Undecided - It is not yet known if there will be a plan to

make this available

**Statistical Analysis Plan**

Undecided - It is not yet known if there will be a plan to make this available

**Informed Consent Form**

Undecided - It is not yet known if there will be a plan to make this available

**Clinical Study Report**

Undecided - It is not yet known if there will be a plan to make this available

**Analytic Code**

Undecided - It is not yet known if there will be a plan to make this available

**Data Dictionary**

Undecided - It is not yet known if there will be a plan to make this available