

(19)



(11)

EP 1 553 878 B1

(12)

EUROPEAN PATENT SPECIFICATION

(45) Date of publication and mention
of the grant of the patent:

24.02.2010 Bulletin 2010/08

(51) Int Cl.:

A61B 17/08 (2006.01)

(86) International application number:

PCT/US2003/026678

(21) Application number: **03791781.2**

(22) Date of filing: **26.08.2003**

(87) International publication number:

WO 2004/019671 (11.03.2004 Gazette 2004/11)

(54) **FATIGUE-RESISTANT GASTRIC BANDING DEVICE**

ERMÜDUNGSFESTE MAGENBANDVORRICHTUNG

DISPOSITIF DE CERCLAGE GASTRIQUE RESISTANT A L'USURE

(84) Designated Contracting States:

**AT BE BG CH CY CZ DE DK EE ES FI FR GB GR
HU IE IT LI LU MC NL PT RO SE SI SK TR**

(72) Inventor: **BIRK, Janel**

Oxnard, CA 93111 (US)

(30) Priority: **28.08.2002 US 407219 P**

(74) Representative: **HOFFMANN EITLE**

Patent- und Rechtsanwälte

Arabellastrasse 4

81925 München (DE)

(43) Date of publication of application:

20.07.2005 Bulletin 2005/29

(56) References cited:

WO-A-00/00108 US-A- 4 558 699

US-A- 4 592 339 US-A- 5 152 770

US-A- 5 449 368 US-A- 5 601 604

US-A- 5 938 669 US-A1- 2003 208 212

(73) Proprietor: **Allergan, Inc.**
Irvine, CA 92612 (US)

Note: Within nine months of the publication of the mention of the grant of the European patent in the European Patent Bulletin, any person may give notice to the European Patent Office of opposition to that patent, in accordance with the Implementing Regulations. Notice of opposition shall not be deemed to have been filed until the opposition fee has been paid. (Art. 99(1) European Patent Convention).

EP 1 553 878 B1

Description

BACKGROUND OF THE INVENTION

1. FIELD OF THE INVENTION

[0001] The present invention relates to laparoscopically implantable gastric bands for encircling the stomach having ribs and chambers in the inflatable portion to reduce fatigue or crease fold failure in the device, while increasing the range of adjustment. A method for treating morbid obesity utilizing a fatigue-resistant gastric banding device is also disclosed.

2. DESCRIPTION OF THE RELATED ART

[0002] A belt-like gastric band for encircling the stomach to control morbid obesity is disclosed by Vincent in U. S. Pat. 5,601,604.

[0003] The band comprises a belt that can be passed around the stomach and locked into an encircling position in order to create a stoma opening within the stomach. An adjustable portion of the band comprises an inflatable member, which permits fine adjustment of the stoma opening after the stoma is created by locking the band in place. The stoma opening may be adjusted by injecting or withdrawing a fluid into or from an inflatable member. The means for injecting the fluid into the inflatable member usually comprises a fill port located beneath the skin that can be accessed extracorporeally by transdermal injection. Thus, following implantation, the gastric band can be adjusted to enlarge or reduce the stoma as required.

[0004] The gastric band is implanted surgically, via open or laparoscopic surgery, which may involve placement of a calibrating apparatus in the stomach to position the stoma and size the pouch created above the stoma. The gastric band is imbricated in position about the stomach to prevent slippage, usually by gastro-gastric sutures (i. e. tissue is wrapped over the band and sutured to itself).

[0005] As disclosed by Vincent, the inflatable member or shell is preferably substantially coextensive with an inner stomach-facing surface of the gastric band.

[0006] Furthermore, it has been observed that the inflatable member should not wrinkle or fold when adjusted, so as to present a substantially smooth contour along the inner circumference. This ensures not only that stomach tissue will not be pinched by the inflatable member, which could lead to discomfort or necrosis, but also protects the shell from a phenomenon known as crease fold failure, which may occur if it is inflated beyond its intended range of adjustment. In the field, it has been observed that silicone or other elastomeric materials commonly used in the manufacture of gastric bands can fatigue or fail if repeatedly compressed, folded, wrinkled, buckled under stress or creased by, for example, over-inflation. This failure mode, which may include abrasion of the opposing surfaces against one another, abrasion of the in-

ner surface of the fold "peak" against the opposing chamber wall, or fatigue of the material at folder intersections (the most highly-stressed areas), is sometimes referred to as crease fold failure.

[0007] In some cases, it has also been noted that existing adjustable gastric bands do not provide the overall size or range of adjustment desirable for use in particular patients. For instance, existing gastric bands may be either too large or too small to encircle a patient's stomach, while still allowing for a properly sized stoma. This may be due, for instance, to variations from patient to patient and their individual internal physiologies. Thus, gastric bands are now available in several different sizes, measured according to the circumference of the band (*e.g.* 9.75 cm, 11 cm, etc.). But due to variations in not only patient physiology, but also in the location and encircling position of the band, the surgical technique used, etc., it may not be evident what size band is necessary until a patient is undergoing surgery. Rather than have a variety of different sizes of gastric bands on hand during the surgical procedure, it would be desirable to have one universal size gastric band available that is adjustable over a wider range than those bands known in the prior art.

[0008] If the overall size of the gastric band is increased, the inflatable shell portion may not be capable of being adjusted to form a relatively small stoma without creases, wrinkles or folds forming on the inner stomach-facing surface, which may lead to fatigue or failure of the inflatable member, necessitating additional surgery. It would therefore be desirable to provide a universal size of a fatigue-resistant gastric band having an inflatable member that can be adjusted over a wide range of stoma openings.

[0009] US 5,152,770 discloses an occlusion device for application around a newly-shaped orifice of the stomach in obese patients. The device comprises bulbs which together form a substantially rectangular balloon. The device was found not to be adapted for laparoscopic placement (T 1240/05).

[0010] Finally, WO 00/00108 A1 discloses a food intake restriction device which may be designed to form a row of bulges along the band so that the formation of creases on the inner side of the tubing as the band is bent into a loop is avoided. This is said to dramatically increase the lifetime of the band. Adjacent bulges are spaced from each other when the cavity of the band is filled with fluid. The band is surgically implanted.

SUMMARY OF THE INVENTION

[0011] The foregoing demonstrates a need for a laparoscopically implantable gastric band having a universal size and offering a range of adjustability suitable for use in a variety of patients with varying internal physiologies, which reduces pinching of the stomach upon initial placement.

[0012] The present invention provides a gastric band

as recited in claim 1 below. Advantageous embodiments are recited in the dependent claims. The invention accordingly provides a gastric band having an inflatable member that is substantially coextensive with an inner stomach-facing surface of the gastric band.

[0013] The present invention also provides a gastric band having an inflatable member that does not wrinkle or fold when adjusted over a wide range, so as to present a substantially smooth contour along the inner circumference, and to avoid fatigue or failure of the member itself.

[0014] The invention provides a fatigue-resistant gastric banding device for the treatment of morbid obesity. The device has a gastric band suited for laparoscopic placement around the stomach of a patient to form an adjustable stoma opening. The gastric band has a multi-chambered inflatable member for adjusting the inner circumference of the band. The inflatable member is substantially coextensive with an inner stomach-facing surface of the gastric band. The inflatable member is chambered so as to not wrinkle or fold when adjusted over its range of adjustment, thereby presenting a substantially smooth contour along the inner circumference and reducing fatigue or failure of the device.

[0015] Separating the chambers is at least one reinforcing rib. Upon inflation of the gastric band, the chambers ribs, preferably in conjunction with notches, eliminate creasing, folding or wrinkling of said inflatable shell, thereby reducing fatigue on the device.

[0016] The fatigue-resistant gastric band of the present invention may be adjusted by adding fluid to or removing fluid from the chambered inflatable member or shell by means of a subcutaneous access port, via a remotely controllable pump, using pressurized fluid or through other means well known to one skilled in the art.

BRIEF DESCRIPTION OF THE DRAWINGS

[0017] The following detailed description given by way of example, but not intended to limit the invention solely to the specific embodiments described, may best be understood in conjunction with the accompanying drawings in which:

Figure 1 is a top view of a gastric band according to one embodiment of the present invention;

Figure 2 is a cross-sectional view of the gastric band shown in Figure 1 taken along line 2-2;

Figure 3 is a top and side view of the encircling portion of a fatigue-resistant inflatable shell of the gastric band of Figure 1;

Figure 4 is a cross-sectional top view of the fatigue-resistant inflatable shell of Figure 3 taken along line 4-4;

Figure 5 is a close up cross-sectional view of a convolution point of the fatigue-resistant inflatable shell of Figure 4 taken in area 5.

Figure 6 is a cross-sectional view of the fatigue-re-

sistant inflatable shell of Figure 3 showing the relative thickness of a reinforcing rib;

Fig. 7 is a perspective view of the encircling portion of a fatigue-resistant inflatable shell of a gastric band according to the present invention; and

Figure 8 is a top and side view of a portion of the gastric band of Figure 1 straightened to show the width and projection of the chambers in relation to the inner band portion.

DETAILED DESCRIPTION OF CERTAIN PREFERRED EMBODIMENTS

[0018] An inflatable gastric band 10 according to the present invention is shown in FIG. 1. The gastric band 10 has a body portion 11 and an inflatable portion or shell 16. The body portion 11 has a head end 12 and a tail end 13. The head end 12 of the body portion 11 has a buckle 19 with a pull-tab 18. The tail end 13 includes a belt tab 17. Upon insertion of the tail end 13 including a fill tube 14 through the buckle 19, the tail end 13 is drawn through the buckle 19 until the belt tab 17 catches on the exit side 20. In this position the gastric band 10 is releasably locked in a closed loop position and secured by the buckle 19 and the belt tab 17.

[0019] The fill tube 14, which is generally a tube having a single lumen (not shown) coextensive therewith, is connected to an end of the gastric band 10. In FIG. 1 it is shown attached to the tail end 13 and in fluid communication with an inflatable shell 16. It will be apparent to one of skill in the art that other arrangements of the fill tube 14 could be made including attachment to the head end 12 without departing from the scope of the present invention.

[0020] The inflatable shell 16 is formed to receive the body portion 11 as shown in FIG. 2, which is a cross sectional view of FIG. 1 taken along line 2-2. The inflatable shell 16 is preferably substantially coextensive with the body portion 11, as shown in FIG. 1. The body portion 11 may be attached to the interior of the inflatable shell 16 through the use of adhesives compatible for use within the body or other methods known to those skilled in the art of implantable medical device manufacture. The inflatable shell 16 includes an inner stomach-facing surface 15 that forms a stoma when placed around the stomach. It is this surface that has traditionally been the location of failure due to crease fold fatigue.

[0021] To reduce the potential for crease fold failure or high stresses in the inner surface 15, the inflatable shell 16 has pre-formed stress-reducing notches 8 separating chambers 6. FIG. 3 shows a top view of the inflatable shell 16 of gastric band 10 with plurality of chambers 6 each separated by a respective notch 8. FIG. 3 differs from FIG. 1 in that it shows just the inflatable shell 16 without the inner portion 11 of the gastric band 10.

[0022] Similarly, FIG. 4 shows a cross-sectional top view of the inflatable shell 16 shown in FIG. 3. In FIG. 4, the inside of the inflatable shell 16 is depicted with rein-

forcing ribs 7 at each of the notches 8 separating each of the chambers 6.

[0023] However, as shown in FIG. 3 the first chamber 24 and last chamber 26 of the inflatable shell 16 may be formed with only one rib 7.

[0024] The band may be formed with a single notch 8 along the inner stomach-facing surface 15 of the inflatable shell 16, or more preferably, with multiple notches 8. Similarly, the band may be formed with a single reinforcing rib 7 inside the inflatable shell 16, or more preferably, with multiple ribs 7. Most preferably, the inflatable shell 16 is formed with corresponding ribs 7 and notches 8. The notches 8, chambers 6, and ribs 7 are formed in the inflatable shell 16 during the manufacturing process and are a feature of the inflatable shell 16 of the gastric band 10 whether filled or unfilled (i. e. whether the band is inflated or un-inflated). This helps to ensure that upon initial positioning of the gastric band 10 there is no pinching of the stomach.

[0025] FIG. 6 shows a cross sectional view of the inflatable shell 16 of FIG. 3. In FIG. 6 the thickness of the rib 7 can be seen relative to the thickness of the inflatable shell 16. FIG. 6 also shows that the width of the chambers 6 may extend beyond the width of an outer surface 22 of the inflatable shell 16. Similarly, FIG. 8 shows the chambers 6 extending beyond the width of the body portion 11 (designated by the dotted line). The greater size of the chambers 6 relative to the body portion 11 helps to evenly distribute the forces applied to the stomach through the inflation of the gastric band 10.

[0026] FIG. 5 shows a close-up view of a notch 8 and rib 7 of the inflatable shell 16. Also shown in FIG. 5 are chambers 6 on either side of the rib 7. From FIG. 5 it can be seen that the portions of the inner surface 15 immediately adjacent to the notches 8 will not come in contact with one another upon inflation of a gastric band 10 having an inflatable shell 16 so designed. This prevents wear and rubbing of the inner surface 15. Also as a result of the notch 8, a crease will not form in the inner surface 15 of the inflatable shell 16. Further, because of this the chamber 6 can be inflated to a much greater volume forming a smaller stoma than similar sized gastric bands known in the prior art.

[0027] The effects of the notch 8 can be described as follows: the notch 8 acts as a pre-formed crease in the inflatable shell 16. The notch 8 acts similarly to the crease that may form in gastric bands known in the prior art as it provides a point around which the body portion 11 is allowed to bend the inner surface 15 of the gastric band 10 to form a substantially circular band. One with basic geometry skills will understand that the inner surface 15 and the body portion 11 have substantially similar lengths. As a result of this, if the body portion 11 and inflatable shell 16 are not pre-formed in a circle, when they are subsequently bent into a circular form, the interior surface 15 must in some fashion eliminate a portion of its overall length to form a circle having a smaller inner circumference than outer circumference. This reduction

in circumference has heretofore occurred in prior art gastric bands through the formation of undesirable creases on the inner stomach-facing surface of the gastric band, resulting in a reduced range of inflation for such bands.

5 The formation of these creases alleviates the material stresses in forming the circular shape, but causes point loading at the top and bottom of the creases as well as providing a point of friction between two facing sides of the crease. By forming the inflatable shell 16 in a circle
10 with pre-formed notches 8, the aforementioned stresses are drastically reduced because the notch 8, alone or in combination with a rib 7, is formed in a fashion that prevents opposing sides of the notch 8 from buckling and reduces stress, while allowing for a great range of inflation versus prior art devices. Additionally, the effects of the point loading associated with the extremities of the crease can be alleviated by the notch 8, especially when the notch 8 is formed in conjunction with a reinforcing rib 7.

20 **[0028]** In practice, the gastric band is placed in an encircling position around the stomach using known surgical techniques, including, preferably laparoscopy. Laparoscopic placement is accomplished by introducing the fill tube 14 through a laparoscopic cannula (not shown)
25 into the patient's abdomen. Laparoscopic placement begins with blunt dissection behind the stomach, usually two to three centimeters below the gastro-esophageal junction. Typically, the end of the fill tube 14 and tail end 13 are passed around the stomach and drawn through the buckle 19, past the exit side 20 so that the belt tab 17 and buckle 19 are releasably locked together. In this sense, the band is a "one-size-fits-all" device-like that described by Vincent-but because of its notched design, the gastric band is adjustable over a greater range without creasing or folding than Vincent and other known prior art bands.

35 **[0029]** The stoma-the narrow opening in the stomach created by the band-may be adjusted after the band is secured in this single position. Prior art gastric bands employ an adjustable balloon portion that is used for post-operative adjustment of the stoma as necessary. These adjustable balloons, as discussed above, are prone to creasing. The pre-formed notches 8, chambers 6 and ribs 7 of the inflatable gastric band 10 described herein
40 provide for increased fill volumes, e.g. up to 10 cc, without wrinkles or folds forming in the shell. As in the Vincent band, the inflatable shell 16 is preferably coextensive with the inner stomach-facing surface 15 of the band between the belt tab 17 and buckle 19. The interior of the inflatable shell 16 is in fluid communication with an injection reservoir, remote pump, pressure reservoir or other adjustment means (not shown) via fill tube 14, as with prior art adjustable gastric bands. The inflatable shell 16 is gradually inflated with saline or other biocompatible fluid via
45 the adjustment means such that the inflatable shell 16, and in particular the inner surface 15 thereof presses on and constricts the stomach underlying the band. This results in a decrease of the opening (stoma) inside the

stomach directly under the encircling gastric band 10.

[0030] During inflation of the gastric band 10, the notches 8 and the ribs 7 resist deflection. At the same time, the chambers 6 do not comparatively resist deflection. This results in the areas of the inflatable shell 16 where the ribs 7 are located forming deeper notches 8 upon inflation. Accordingly, these notches 8 reduce the stresses in the inflatable shell 16 and reduce the potential for crease fold failure by eliminating contact between the two sides of the notch 8.

[0031] Despite the addition of the notches 8 and ribs 7, the gastric band 10 forms a substantially circular constriction around the stomach upon inflation. The chambers 6 of the inflatable shell 16 direct the locations of inflation. Because of the greater deflections of the inflatable shell 16 in the chambers 6 as compared to the area of the notches 8 and ribs 7, the gastric band 10, and in particularly the inner surface 15 is prevented from pinching the surface of the stomach between two chambers 6 when in its inflated state, thereby reducing the potential for patient discomfort and necrosis.

[0032] The gastric band 10, as shown in FIG. 1, allows for greater adjustability and fill volume range than current gastric bands, while reducing the potential for fatigue failure, crease fold failure, or pinching of the stomach. Through the use of the chambers 6, notches 8, and the elimination of crease points, the inflatable shell 16 is provided a greater expandable range and is able to produce a smaller opening without fear of pinching the stomach. Similarly, because the crease points are eliminated, the likelihood of crease fold failure is also reduced. It is the possibility of pinching the stomach, and the potential for crease-fold failure that limit the operable range of currently known devices. The reduction of these possibilities increases the range of the stoma opening that may be formed with a single gastric band, while safely treating the obese patient.

[0033] Another embodiment of the present invention is an inflatable gastric band with an inflatable shell that is separated into multiple, isolated inflatable compartments or chambers. The inflation of the isolated chambers may or may not be circular, but will not crease, wrinkle or fold. Each isolated chamber may be inflated separately or simultaneously with other isolated chambers and will expand without creasing, wrinkling or folding. A compartmentalized gastric band allows for even greater adjustability and fill volume ranges than current gastric bands while reducing the potential for fatigue failure or crease fold failure.

[0034] For example, it may be desirable to reduce the size of the stoma in a particular direction. In such instances, a chamber on that side of the gastric band could be inflated without changing the size of the remaining chambers.

[0035] Accordingly, greater flexibility is available in a device having isolated chambers that may be independently filled and adjusted. Such an arrangement requires independent filling pathways for each chamber.

[0036] The design of the present invention has been described for use in gastric banding devices, but may also be incorporated into any inflatable or expandable device that uses silicone or other elastomeric or polymeric materials where there may be a concern over crease fold failure.

[0037] Although the invention has been particularly shown and described with reference to certain preferred embodiments, it will be readily appreciated by those of ordinary skill in the art that various changes and modifications may be made therein, without departing from the scope of the claims. It is intended that the claims be interpreted as including the foregoing as well as various other such changes and modifications.

Claims

1. A gastric band (10) for the treatment of obesity suitable for laparoscopic placement around the stomach of a patient to create a stoma comprising:

a body portion (11) for encircling the stomach said body portion having an inner stomach-facing surface (15); and

a multi-chambered inflatable member (16) substantially coextensive with said inner stomach-facing surface of said body portion of said gastric band when said band is placed around the stomach, wherein said chambers (6) are in fluid communication with one another and separated by at least one rib (7) inside said inflatable member, the at least one rib contributing to eliminate creasing, folding or wrinkling along the inner stomach-facing surface of said inflatable member, thereby reducing fatigue on the inflatable member.

2. The gastric band of claim 1, further comprising at least one notch (8) adjacent to said at least one rib (7).
3. The gastric band of claim 1 or 2, wherein said body portion is affixed to said inflatable member.
4. The gastric band of any of claims 1 to 3, wherein said chambers (6) extend beyond the width of said body portion.
5. The gastric band of any of claims 1 to 4 further comprising a fill tube (14) for inflation of said inflatable member (16).
6. The gastric band of any of the preceding claims further comprising a buckle (19) for receiving a portion of said body portion to secure said gastric band in a circle.

7. The gastric band of claim 6, wherein said gastric band is releasably secured.
8. The gastric band of any of the preceding claims, wherein fluid may be added to or removed from said multi-chambered inflatable member by means of a subcutaneous access port or via a remotely controllable pressurized fluid.

band lösbar fixiert wird.

8. Magenband nach einem der vorhergehenden Ansprüche, bei dem Fluid durch eine subkutane Zugangsöffnung oder über ein fernsteuerbares unter Druck stehendes Fluid in das mehrkammerige aufblasbare Element zugefügt oder aus diesem entfernt werden kann.

Patentansprüche

1. Magenband (10) zur Behandlung von Adipositas, das für eine laparoskopische Anordnung um den Magen eines Patienten herum zum Erzeugen einer Öffnung geeignet ist, umfassend:

einen Körperabschnitt (11) zum Umgeben des Magens, wobei der Körperabschnitt eine innere, dem Magen zugewandte Oberfläche (15) aufweist; und

ein mehrkammeriges aufblasbares Element (16), das im Wesentlichen koextensiv mit der inneren, dem Magen zugewandten Oberfläche des Körperabschnitts des Magenbands ist, wenn das Band um den Magen herum angeordnet ist, wobei die Kammern (6) miteinander in Fluidkommunikation und durch wenigstens eine Rippe (7) innerhalb des aufblasbaren Elements getrennt sind und die wenigstens eine Rippe dazu beiträgt, ein Abkanten, Falten oder Knittern entlang der inneren, dem Magen zugewandten Oberfläche des aufblasbaren Elements zu verhindern, wodurch eine Ermüdung des aufblasbaren Elements verringert wird.

2. Magenband nach Anspruch 1, ferner umfassend wenigstens eine Kerbe (8) neben der wenigstens einen Rippe (7).

3. Magenband nach Anspruch 1 oder 2, bei dem der Körperabschnitt an dem aufblasbaren Element befestigt ist.

4. Magenband nach einem der Ansprüche 1 bis 3, bei dem sich die Kammern (6) über die Breite des Körperabschnitts hinaus erstrecken.

5. Magenband nach einem der Ansprüche 1 bis 4, ferner umfassend eine Füllröhre (14) zum Aufblasen des aufblasbaren Elements (16).

6. Magenband nach einem der vorhergehenden Ansprüche, ferner umfassend eine Schnalle (19) zum Aufnehmen eines Abschnitts des Körperabschnitts, um das Magenband in einem Kreis zu fixieren.

7. Magenband nach Anspruch 6, bei dem das Magen-

Revendications

1. Bande gastrique (10) pour le traitement de l'obésité, adaptée pour une mise en place laparoscopique autour de l'estomac d'un patient afin de créer un stoma, comprenant :

une partie de corps (11) pour encercler l'estomac, ladite partie ayant une surface orientée vers l'estomac interne (15) ; et

un élément gonflable à multiples chambres (16) sensiblement co-extensible avec ladite surface orientée vers l'estomac de ladite partie de corps de ladite bande gastrique, quand ladite bande est placée autour de l'estomac, **caractérisée en ce que** lesdites chambres (6) sont en communication fluide les unes avec les autres et séparées par au moins une nervure (7) à l'intérieur dudit élément gonflable, ladite au moins une nervure contribuant à éliminer le froissement, le pliage ou les plis le long de la surface orientée vers l'estomac dudit élément gonflable, en réduisant ainsi la fatigue sur l'élément gonflable.

2. Bande gastrique selon la revendication 1, comprenant en outre au moins une encoche (8) adjacente à ladite au moins une nervure (7).

3. Bande gastrique selon la revendication 1 ou 2, dans laquelle ladite partie de corps est fixée audit élément gonflable.

4. Bande gastrique selon l'une quelconque des revendications 1 à 3, dans laquelle lesdites chambres (6) s'étendent au-delà de la largeur de ladite partie de corps.

5. Bande gastrique selon l'une quelconque des revendications 1 à 4, comprenant en outre un tube de remplissage (14) pour le gonflage dudit élément gonflable (16).

6. Bande gastrique selon l'une quelconque des revendications précédentes comprenant en outre une boucle (19) pour recevoir une partie de ladite partie de corps pour fixer là bande gastrique en un cercle.

7. Bande gastrique selon la revendication 6, dans laquelle ladite bande gastrique est fixée de manière libérable.
8. Bande gastrique selon l'une quelconque des revendications précédentes, dans laquelle le fluide peut être ajouté audit élément gonflable à chambres multiples ou enlevé de celui-ci, au moyen d'un orifice d'accès sous-cutané ou par le biais d'un fluide pressurisé contrôlable à distance.

10

15

20

25

30

35

40

45

50

55

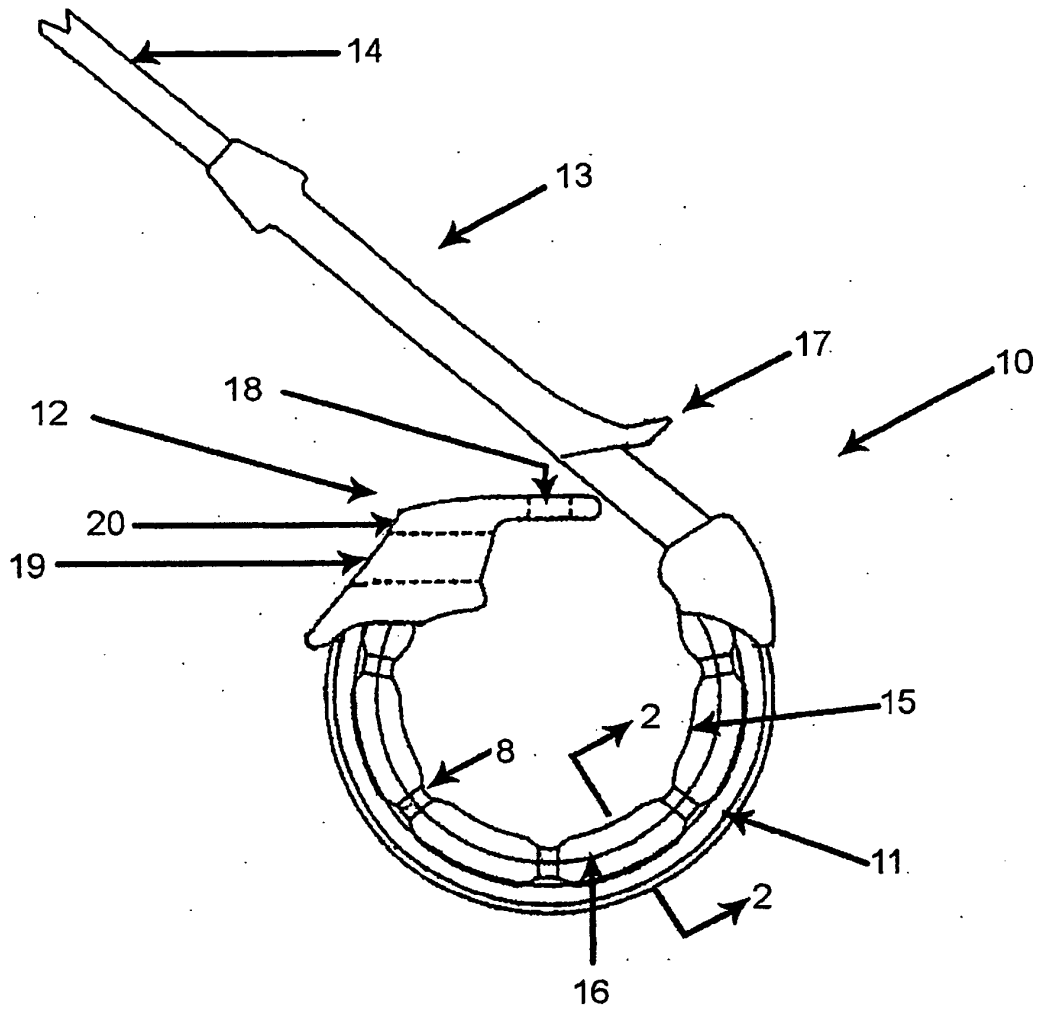


FIG. 1

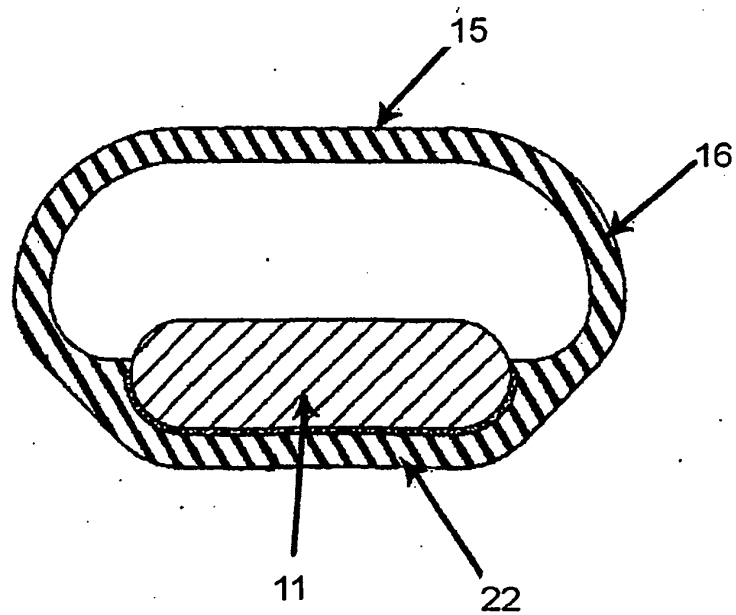


FIG. 2

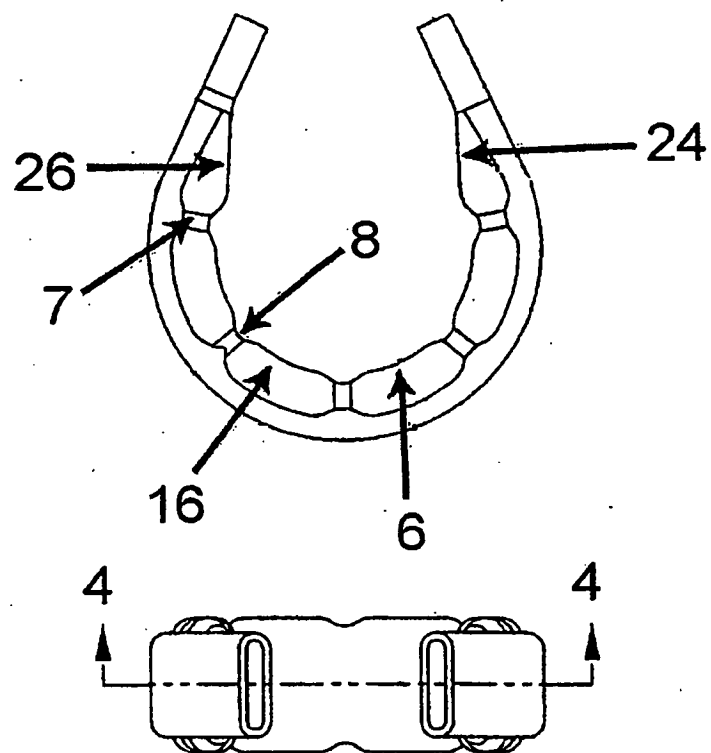


FIG. 3

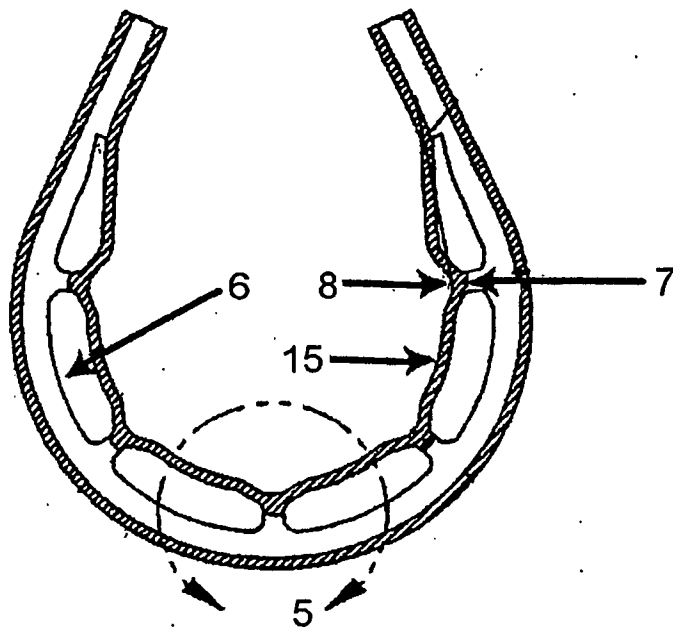


FIG. 4

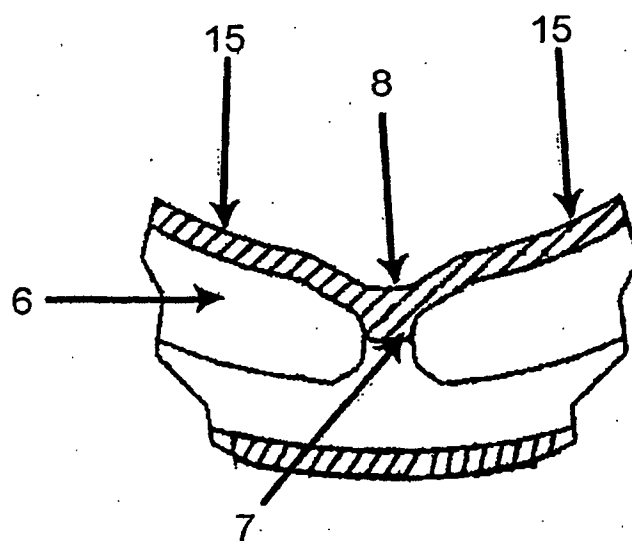


FIG. 5

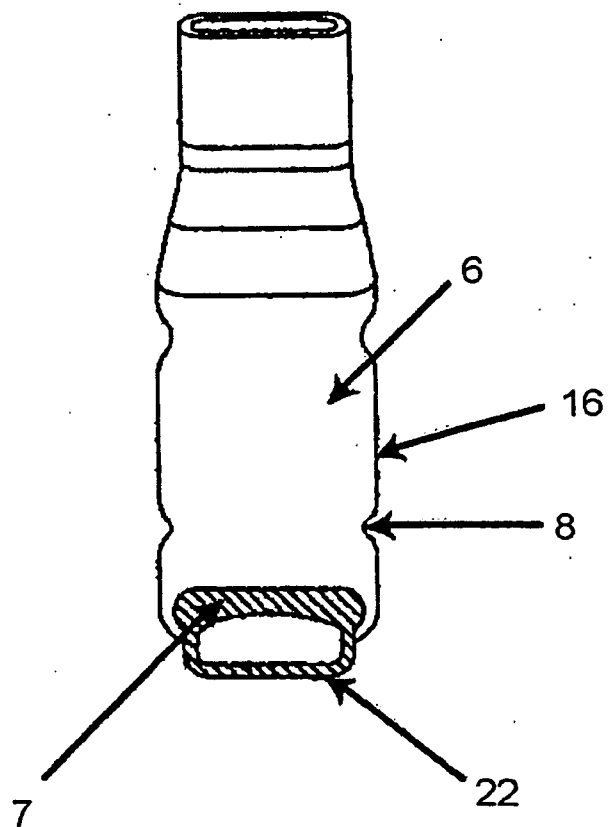


FIG. 6

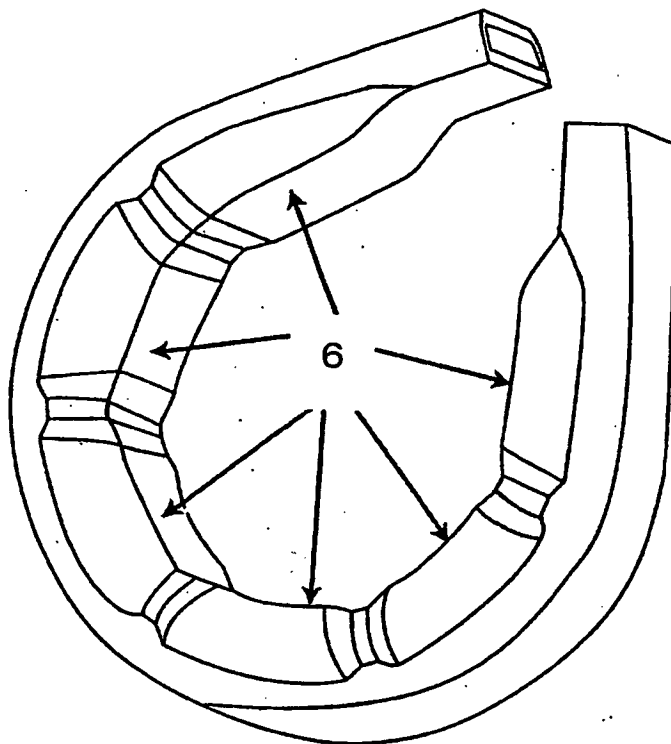


FIG. 7

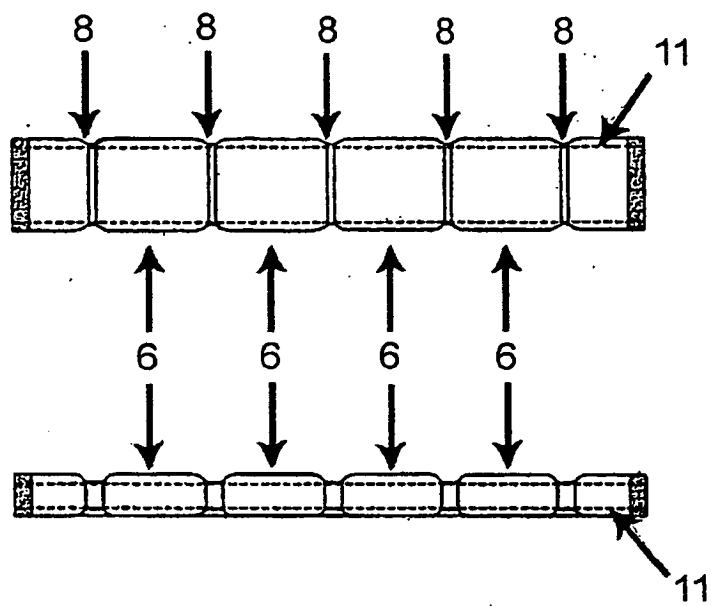


FIG. 8

REFERENCES CITED IN THE DESCRIPTION

This list of references cited by the applicant is for the reader's convenience only. It does not form part of the European patent document. Even though great care has been taken in compiling the references, errors or omissions cannot be excluded and the EPO disclaims all liability in this regard.

Patent documents cited in the description

- US 5601604 A, Vincent [0002]
- US 5152770 A [0009]
- WO 0000108 A1 [0010]

专利名称(译)	抗疲劳胃束带装置		
公开(公告)号	EP1553878A4	公开(公告)日	2008-04-09
申请号	EP2003791781	申请日	2003-08-26
[标]申请(专利权)人(译)	INAMED医疗PROD		
申请(专利权)人(译)	INAMED医疗产品公司		
当前申请(专利权)人(译)	INAMED医疗产品公司		
[标]发明人	BIRK JANEL		
发明人	BIRK, JANEL		
IPC分类号	A61B17/08 A61F5/00 A61M29/00		
CPC分类号	A61F5/0066 A61F5/0033 A61F5/005		
代理机构(译)	法思博事务所		
优先权	60/407219 2002-08-28 US		
其他公开文献	EP1553878A2 EP1553878B1		
外部链接	Espacenet		

摘要(译)

公开了一种抗疲劳的可充气胃束带，其适于腹腔镜放置在患者的胃周围以治疗肥胖症。该装置包括胃带（2），该胃带（2）具有回旋的可充气构件（16），其基本上与带的面向胃的内表面共同延伸，在调节时不会折皱，起皱或折叠，从而呈现基本上光滑的轮廓。沿着内圆周（8），以避免构件本身的疲劳或失效。

