



ESGE Days 2026: Endoscopic procedure associated with greater short-term weight loss than oral semaglutide, study finds

Descrizione

COMUNICATO STAMPA - CONTENUTO PROMOZIONALE

MILAN, May 15, 2026 /PRNewswire/ - A comparative study, presented at ESGE Days 2026, has found that endoscopic sleeve gastropasty (ESG) is associated with significantly greater short-term weight loss than oral semaglutide in adults with obesity.

The retrospective cohort study included 150 patients treated in routine clinical practice and evaluated outcomes at six months.

Patients undergoing ESG achieved a mean total body weight loss of 12.7%, compared with 8.7% in those receiving 14mg of oral semaglutide, corresponding to a mean difference of approximately 4.0% ($p=0.0001$). This difference remained significant after adjustment for baseline characteristics, including age, sex, body mass index and diabetes status, and was supported by multiple sensitivity analyses.

Endoscopic sleeve gastropasty is a minimally invasive endoscopic procedure that reduces gastric volume, while semaglutide is a glucagon-like peptide-1 receptor agonist that promotes weight loss through appetite regulation. Direct real-world comparisons between procedural and pharmacological approaches remain limited, particularly for oral formulations.

Patients undergoing ESG were also more likely to achieve clinically meaningful weight loss. At six months, 70% of patients in the ESG group achieved at least 10% total body weight loss compared with 43% in the semaglutide group, while 36% achieved at least 15% weight loss compared with 7%, respectively. Adverse event rates were comparable between groups and were predominantly mild gastrointestinal symptoms, with no serious complications or mortality reported.

Dr Nitin G. Jagtap, lead author of the study, said the findings address a common clinical question. "In real-world practice, patients often ask whether they should choose a procedure or a medicine, but there has been very little comparative data to guide that decision. We focused on oral semaglutide because it was the most commonly available option during the study period, so this reflects a real-world

clinical decision, not an artificial comparison.â?•

He added, â??The approximately 4% greater weight loss with ESG is meaningful and may translate into improved control of obesity-related conditions such as diabetes and fatty liver disease.â?•

Dr Jagtap emphasised that treatment choice should remain individualised, taking into account patient preference, access and long-term adherence. â??A daily oral therapy requires sustained commitment, whereas ESG is a one-time intervention associated with more rapid weight loss. These approaches should be viewed as complementary,â?• he explained. â?•

â??The future of care lies in personalised treatment selection â?? matching the right approach to the right patient,â?• concluded Dr Jagtap.

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