Citation (APA)	Sample size	Methods	Demographics	Results	Conclusions
lenca, R., Aljaralah, M. Cabalero, A., Garridalo, C., Rosa, M., Kolmer, S., Sebbag, H., Hanssoule, J., Quantranro, G., Zowaph, S., Jurneja, G., Murcia, S., Turro, R., Pagan, A. Baduddin, F., Dargent, J., Urbain, P., Pavelis, S., di Cola, R. S., Selvaggio, C., Al Kuwari, M. (2020). The Procedureless Elipse Gastric Balbon Program: Multicenter Experience in 1770 Consecutive Patients.  Obeshy surgery, 30(9), 3354–3362. https://doi.org/10.1007/s11695-020-04539-8	1770	19 centers Physical follow-up visits	1254 women 506 men Mean age : 47,2 ± 10,3 Mean TW: 110,5 ± 21,9 kg Mean BM: 32 ± 6,7 kg/m² WC: 123,5 ± 16,9	Mean weight loss: 13.5 ± 5.8 kg. %TBML: 14.2 ± 5%, 5% kg. %TBML: 14.2 ± 5%, 5% kBML: 67 ± 64.2 kg. kg. change in BMI: 4.9 ± 2 kg/m2, 41 metabolic false decreased significantly, 52 (2.9%) were intolerant. 11 (0.5%) balloons deflated early. 52 (2.9%) were intolerant. 11 (0.5%) balloons deflated early. 52 (2.9%) were intolerant. 11 (0.5%) balloons of entangles of the common of the control of the common of th	The Elipse <sup>IM</sup> Balloon demonstrated an excellent safety profile. The balloon also exhibited remarkable efficacy with 14.2% TBWL and improvement across all metabolic parameters
Vantanasiri, K., Matar, R., Beran, A. et al. The Efficacy and Safety of a Procedureless Gastric Balloon for Weight Loss: a Systematic Review and Meta-Analysis. OBES SURG 30, 3341–3346 (2020). https://doi.org/10.1007/s11695- 020-04522-3	2013	Meta-analysis of 6 studies		6 studies included (lenca 2019, Raffopoulos 2019, Espinet 2019, Jamai 2019, Alsabah 2017, Machylka 2016) Overal % TBWL (4M): 12,75% Overal % TBWL (17): 10,94 % Overal early balloon removat: 0,023%	This meta-analysis demonstrates that EIGB is a safe device offering an effective weight loss that warrants further studies for its long-term weight loss outcomes. Severe adverse events are rare, and the rate of early removal is low.
Jamal, M.H., Almutairi, R., Elabd, R. et al.  The Safety and Efficacy of Procedureless Gastric Balloon. a Study Examing the Effect of Elipse Intragastric Balloon Safety. Short and Medium Term Effects on Weight Loss with 1-Year Follow-Up Post-ermoval.  OBES SURG 29, 1236–1241 (2019).	112	Single-center 1 year post excretion follow-up	78 women (77%) 28 men (26%) Mean age : 31,3 Mean TW: 92.2 kg Mean BMI: 34,3	90/106 patients successfully followed-up (1y) %TBW. (3M): 10.9% %TBW. (17): 7.9%. Change in BMI (49): 3.7 kg/m². Change in BMI (1y): 2.95 kg/m². 6 removals due in inibitarance. At excretion time, 6 vomitted the balloon (12%). 1 (small) bowel obstruction. 3 early defiators.	EIGB are effective, safe, and feasible non- invasive method for weight bas.
018-03671-w lenca R, Giardiello C, Scozzarro A, Schiano R, Di Cola, N. Di Lorenzo G, Juneja G, Lopez G, Badiuddin, F. Improving Nausea and Vomiting Post-Elipse Balloon: A Novel Single-Dose Regimen of 300 mg Netuplant/ 0.5 mg Palonosetron.  Obesity Surgery (2019)	30	Patients received Akynzeo at placement	9 males, 21 women Mean weight: 97,8 Mean BMI 34,7	4/30 (13%) reported vomiting on days 1, 2, and 3; 9/30 (30%) reported nausea higher than score 4 on days 1, 2, and 3; 8/30 (26.6%) reported gastric pain higher than score 4 on days 1, 2, and 3.	easy to administer and effective in reducing
29:2952-2956 Ernesti I, Ienca R, Basciani S, Mariani S, Genco A(2018) Effect of A New Swalbowable Intragastric Balloon (Elipse™) on Weight Loss and Metabolic Syndrome.  J Obes Nutr Disord: JOND-120. DOI: 10.29011/JOND-120.	42	Single-center Physical follow-up visits	29 women 13 men Mean age : 47,2 ± 10,3 Mean TW: 110,5 ± 21,9 kg Mean BMI: 39,2 ± 6,7 kg/m2 WC: 123,5 ± 16,9	Mean weight loss: 12,9 kg, %18WL: 11,9%, %EWL: 27%, change in BMI: 4,5 kg/m2, WC: 111 ± 16,2 cm Significant reduction in major comorbidities: blood pressure, WC, triglycerrises, blood glucose and HOMA-IR index. No complication	The main finding of the present study was a significant BMI reduction and MS remission rate within 4 months of treatment riseaso for months, as happen with other balboons.
Al-Subais, S., Khalfa, S., Buhaimed, W., & Al-Rashid, S. (2017).  A prospective plot study of the efficacy and safety of Elipse intragastric balloon: A single-center, single-surgeon experience.  International journal of surgery (London, England), 48, 16–22. https://doi.org/10.1016/j.jsu.2017. 10.001	51	Single-center 4 months duration	47 women (92%) 4 men (8%) Mean age : 33,6 (18-65) Mean TW: 83,9 ± 12,3 kg Mean BM: 32,1 (27,3-39,7) Mean WC: 95,3 ± 9,2 cm	Total weight loss : 8.84 kg, %TBW.: 10.44%, %EWL: 40.84%, hangs in BMI: 3.42 kg/m2, total WC reduction : 8.62 cm, for enoused but initiolerance. 1 balloon vomitted. 1 early deflation. Symptoms after insertion were severe, whereas those during excretion were mild and self-limiting. OSAE Overall satisfaction above average.	These data proves that Elipse is safe and effective for weight loss. Nevertheless, some limitations were observed that need to be overcome for better outcomes.
Genco, A., Ernesti, I., Ienca, R., Casella, G., Mariani, S., Francomano, D., Soricelli, E., Lorenzo, M., & Monti, M. (2018). Saflety and Efficacy of a New Swallowable Intragastric Baloon Not Needing Endoscopy: Early Italian Experience. Obesity surgery, 28(2), 405–409. https://doi.org/10.1007/s11695- 017.2877-1	38	Single-center Phone follow-up	28 women 10 men Mean age : 46,4 ± 10,6 Mean TW: 109,7 ± 21,9 kg Mean BMI: 38,6 ± 6,7 kg/m2	Mean weight loss: 12,7 kg, %TBML: 11,8%, %EML: 25%, change in BM: 4,2 kg/m2, Significant reduction in major comorbidities: blood pressure, WC, trigVicerides, blood glucose and HOMA-IR index. No complication during balbon passage. 37 normal stool excretion, 1 endoscopic removal.	The results of this study on 38 consecutive patients demonstrate that the Elipse "Balloon is sale, effective, and very well accepted by patients.
Raflopoulos, I., & Giannakou, A. (2017).  The Elipse Balton, a swallowable gastric balton for weight loss not requiring sedation, anesthesia or endoscopy: a plot study with 12-morth outcomes.  Surgery for obesity and related diseases: official journal of the American Society for Baristric Surgery, 13(7), 1174–1182.  https://doi.org/10.1016/j.soard.2017.02.016	12	Single-center (Athens, Greece) 1Y follow-up	7 women 5 men ge: 41 mean BM: 35.9 kg/m² Mean weight: 103.5 kg Mean WC: 117.6 cm	Mean excess weight loss percentage and total weight loss percentage were 50.2% and 14.8% at balloon excretion and 17.8% and 5.9% at 12 months, respectively. There was a statistically significant improvement in patients' weight, BMI, body falt, waist circumference, disablote blood pressure, HbA1C, cholesterol, thyroid stimulating hormone, asparatte transaminaes, and alamine transaminaes at balloon excretion. Quality of life was significantly improved at excretion and 12 months.  No SAE reported	This study is the first to demonstrate 12-month efficacy and performance outcomes of the Elipse Balloon.
Alsabah, S., Al Haddad, E., Ekrouf, S., Almula, A., Ak-Subale, S., & Al Kendar, M. (2018). The safety and efficacy of the procedureless htragastric balcon. Surgery for obesity and related diseases official purnal of the diseases official purnal of the American Society for Baristric Surgery, 14(3), 311–317. https://doi.org/10.1016/j.soard.2017. 7.12.001	135	Multi-center (3 in Kuwait) 4 months follow-up	111Women 24 men Mean age: 33,5 Mean BMI: 33,7 kg/m² Mean weight: 88,8kg	At 4 months:  Mean W1: 13kg Mean BMI loss: 4,9 kg/m² Mean TBWI: 15,1%  1 small bowel obstruction	This study aimed to evaluate the safety and effectiveness of the Elipse balboon in the largest population studied as of date. It was also able to demonstrate that it can be safely and successfully evaluoved, filled, imaged, and passed. In addition, it effectively aided in weight loss, showing promising results.
Machylka, E., Gaur, S., Chutlani, R., Bolkova, M., Kupka, T., Buzga, M., Giannakou, A., Ionarnis, K., Mathus-Villegen, E., Levy, S., & Raftopoulos, I. (2017). Elipse, the first procedureless gastric balloon for weight loss: a prospective, observational, openiable, multicenter study.  Endoscopy, 49(2), 154–160. https://doi.org/10.1055/s-0042-119298	34	Multi-center (2) Follow-up every 2 weeks	23 women 11 men ge- 42 (18-59) Mean age- 42 (18-59) Mean Bill: 34,8 kg/m² (27- Mean weight: 101,9 kg (73- 134)	16 weeks follow-up:  %TBWL: 10 0 %  BMI Loss: 3.9 kg/m2  WC reduction: 8.4 cm  Metabolic parameters: Reduction in HtAhC:: 0,16%  Mean LDL reduction: 9,7 mg/clL  mean trigly-certides reduction: 16,4 mg/clL  Spec-fically, overall quality of life, physical function, self- esteem, sexual life, public distress, and work-related quality of life improved by 12,2,12,9,18,9,17,77, and 9,2  respectively. These values at are significant.  Safety: No SAEs, all AE were anticipated.	These results demonstrate clinically significant weight loss with the Elipse, the first procedureless gastric balloon. The weight loss was similar to that seen in previous studies of endoscopically placed balloons. In addition, Elipse therapy led to improvements in waist crumference, several metabolic parameters, and overall quality of life.