CLAIMS

-1- Orogastric catheter (20) comprising a body (21) whose distal part is in particular intended, in the context of the bariatric surgical technique of longitudinal gastrectomy, to guide the surgeon for resection of a part of the stomach and to define the closure line after resection, wherein the body (21) extends between a proximal end (22) and a distal end (23), and presents an outer face and a distal part at the vicinity of the distal end (23), ~~characterized in that~~ said distal part ~~carries~~ carrying a balloon (25) having a deflated state and an inflated state,

characterized in that the balloon (25) is arranged transversally on the outer face of the body (21) at a distance *d* from the distal end (23) of the body (21),

and in that, in the inflated state, the balloon (25) has a shape substantially matching that of the pyloric antrum (4), the inflated balloon (25) having a truncated conical shape that is asymmetric and distorted with a terminal diameter *Dt* at an end (26) of the balloon (25), a diameter *Db* at a base of the balloon (25) and a diameter *Dm* of a middle part of the balloon (25), with $Dt < Db \leq Dm$; the end (26) being offset relative to an axis of the base of the balloon (25), upwards towards a part of the body (21) of the catheter (20) arranged above the inflated balloon (25), so that an upper face (28) of the inflated balloon (25) directed towards the proximal end (22) of the body (21) and intended to be arranged opposite the angular notch (9) of the stomach (1), has a less pronounced curvature than that of a lower face of the inflated balloon (25) directed towards the distal end (23) of the body (21),

in such a way that ~~it~~ the balloon (25) can be lodged in said pyloric antrum (4), the end (26) of the inflated balloon (25) then preferably being in abutment against the pylorus (5) and the distal end of the body of the catheter (20) for its part preferably being in abutment against the pyloric antrum (4), whereas the part of the body (21) of the catheter (20) arranged above the inflated balloon (25) is wedged against the wall of the lesser curvature (6) of the stomach (1), and thus permit:

- determining the position of the start of the closure resection line in the area of the pyloric antrum (4),
- defining the closure resection line,
- and calibrating the pyloric antrum (4) and the gastric sleeve to be preserved.

-2- Catheter (20) according to claim 1, ~~characterized in that~~ wherein the inflated balloon (25) has ~~the~~ dimensions ~~of the inflated balloon (25)~~ in right cross-section ~~determine~~ determining the volume of the pyloric antrum (4) preserved after resection and ~~in that~~ wherein the body (21) has ~~the~~ dimensions ~~of the body (21)~~ in right cross-section which determine the volume of stomach (1) preserved after resection.

~~-3- Catheter (20) according to claim 1 or 2, characterized in that the inflated balloon (25) has a (truncated) conical general shape, preferably a truncated conical shape that is asymmetric and distorted with a terminal diameter *Dt*, a diameter at the base *Db* and a diameter *Dm* of the middle part, such that: *Dt* < *Db* ≤ *Dm*; an end that is offset relative to the axis of the base of the balloon (25), upwards towards the part of the body of the catheter (20) arranged above the inflated balloon (25), so that the upper face of the inflated balloon (25), intended to be arranged opposite the angular notch of the stomach, has a less pronounced curvature than that of the lower face.~~

~~-4~~3- Catheter (20) according to ~~at least one of the preceding~~ claims 1 or 2, ~~characterized in that~~ wherein the inflated balloon (25) is conformed so that the upper face (28) of the inflated balloon (25) ~~intended to be arranged opposite the angular notch (9) of the stomach (1)~~ makes, with the body (21) of the catheter (20), an angle α between 70 and 110°, preferably between 80 and 100°, and even more preferably

of the order of 90°.

~~-5~~4- Catheter (20) according to claim 1 or 2, ~~characterized in that~~ wherein ~~the balloon (25) is mounted on the outer face of the wall of the catheter body (20), in such a way that~~ the distance *d* between the distal end (23) of the body (21) of the catheter (20) and the point of the base of the inflated balloon (25) closest to said distal end (23), is less than or equal to 30 mm, preferably less than or equal to 20 mm, and even more preferably is between 1 and 15 mm.

~~-6~~5- Catheter (20) according to ~~at least one of the preceding~~ any of claims 1 to 4, ~~characterized in that~~ wherein the body (21) is provided with a reference mark (36) enabling the surgeon to position the balloon correctly (25) in the patient's stomach, so that once inflated, this balloon (25) can be lodged in abutment in the pyloric antrum (4), said reference mark (36) preferably comprising a mark coaxial to the body and arranged on some or all of the length, advantageously the entire length, of the wall of the body (21), on the same side as the balloon (25).

~~-7~~6- Catheter (20) according to ~~at least one of the preceding~~ any of claims 1 to 5, ~~characterized in that it comprises~~ comprising a tube connecting the balloon (25) to the proximal end of the body, and inflating means ~~allowing~~ for inflation/deflation of said balloon (25) from this proximal end through the tube.

~~-8~~7- Catheter (20) according to ~~at least one of the preceding~~ any of claims 1 to 6, characterized in that it comprises:

- a tubular body of silicone with a length between 600 and 1200 mm, preferably between 700 and 1100 mm, and even more preferably between 850 and 950 mm and with an outside diameter *De* between 24 Fr and 75 Fr (i.e. between 8 mm and 25 mm), and preferably between 30 Fr and 40 Fr (i.e. between 10 mm and 13.33 mm), said body also being provided in its distal part with a rounded distal tip and lateral holes intended to provide communication between the interior of the stomach and the exterior of the alimentary canal via the lumen of the tubular body;
- an inflated balloon (25) with a diameter at the base *Db* between 35 and 60 mm and with a height *H* of 50 +/- 10 mm, preferably +/-5 mm, and even more preferably +/- 3 mm;
- a positioning reference mark formed by a contrasting mark on the entire length of the wall of the body, on the same side as the balloon (25), in the diametrical plane common to the body and to the balloon (25);
- and optionally means for deflecting the distal part of the catheter (20).

~~-98-~~ Catheter (20) according to claim ~~8~~7, characterized in that the tubular body (21) and the balloon (25) are sized so that $H + De$ = 50 to 100 mm, even better 60 to 80 mm.

~~-109-~~ Catheter (20) according to ~~at least one of the preceding~~ any of claims 1 to 8, characterized in that it is designed for:

i. being introduced in the patient's mouth until its distal end reaches the patient's stomach -1-,
ii. extracting fluids from the stomach -1-;
iii. inflating the balloon (25) and lodging it in the pyloric antrum (4) in such a way that the end of the inflated balloon (25) is in abutment against the pylorus, that the distal end of the body of the catheter (20) is in abutment against the pyloric antrum (4), preferably at a distance from 5 to 10 cm, even better 6 to 8 cm from the pylorus, and that the part of the body of the catheter (20) arranged above the inflated balloon (25) is wedged against the wall of the lesser curvature of the stomach,
iv. on the one hand, for guiding the surgeon for resection of a part of the stomach by determining the position of the start of the line for resection and closure (stapling-suture) in the area of the pyloric antrum (4) and, on the other hand, defining the closure resection line, giving him anatomical reference points and a support for his instruments during these closure resection steps,
v. calibrating the gastric sleeve and the pyloric antrum (4) to be preserved,
vi. injecting and then withdrawing coloured liquid in the patient's stomach, after closure, to verify the hermeticity of the closure line,
vii. and optionally introducing means for visualization (light source) into the stomach.