



Bariatric Surgery Improves Long-Term Survival



According to a study published in JAMA, obese patients who received care in the Veterans Affairs health systems and underwent bariatric surgery had a lower all-cause rate of death at 5 years and up to 10 years following the procedure, as compared to those who did not have the surgery.

Bariatric surgery has proven to improve weight, obesity related conditions and the quality of life of obese adults. Evidence also suggests that the procedure improves survival among patients with severe obesity. However, these studies are limited to the evaluation of low-risk, predominantly female patients. The long-term outcome of the surgery in patients with co-existing illnesses still remains unknown.

This particular study was conducted by David E. Arterburn, MD, MPH, of the Group Health Research Institute, Seattle, and colleagues. The long term survival of 2500 patients who underwent bariatric surgery in Veteran Affairs bariatric centres from 2000-2011 were examined and matched with 7,462 control patients who did not undergo bariatric surgery. Bariatric procedures included gastric bypass, sleeve gastrectomy, adjustable gastric banding, and other. The average age of patients undergoing surgery was 52 years with an average BMI of 47. The average age of the control group was 53 years with an average BMI of 46.

The study period was for duration of 14 years. At the end of the study, there were 263 deaths in the surgical group as compared to 1277 deaths in the control group. The estimated mortality rates for the surgical group were 2.4 percent at 1 year, 6.4 percent at 5 years, and 13.8 percent at 10 years. The estimated mortality rates for the control group were 1.7 percent at 1 year, 10.4 percent at 5 years, and 23.9 percent at 10 years. While bariatric surgery was not associated with all-cause mortality in the first year of follow-up, there was significantly lower mortality in the surgical group after 1 to 5 years and 5 to 14 years.

No significant differences were found in the association of bariatric surgery on mortality across groups defined by sex, diabetes diagnosis, and super obesity (BMI greater than 50). The study authors point out that there is a need to conduct future studies with larger samples and longer-term follow-up in order to confirm these findings. They conclude that the findings from this study “provide further evidence for the beneficial relationship between surgery and survival that has been demonstrated in younger, predominantly female populations.”

Source: JAMA

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