EFFICACY OF MGB IN DIABETIC PATIENTS WITH BODY MASS INDEX <35 KG/M²

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Background: A lot of reports have shown that patients with body mass index (BMI)>35kg/m² who underwent metabolic surgery experienced resolution of type 2 diabetes (T2DM). One of those bariatric surgery proved to be safe, effective, reliable and reversible is Mini-gastric bypass (MGB). Little studies addressed the efficacy of MGB on the resolution of T2DM in patients with BMI< 35 kg/m².

Objectives: We aimed to evaluate the efficacy of MGB on resolution of T2DM in patients with BMI< 35 kg/m².

Methods: From March 2011 to May 2015; 135 patients with T2DM and BMI<35 kg/m2 underwent MGB were enrolled in this study. The changes in fasting blood sugar (FBS), glycosylated haemoglobin (HbA1c), alanine transaminase (ALT), C-peptide, total body weight and the use of oral hypoglycemic agents and insulin at the end of one year were studied.

Results: 108 patients (80 %) showed resolution, 25 patients (18.5 %) showed remission and only two patients (1.5 %) failed to respond after surgery as shown in fig1. There was statistically significant changes in BMI, FBS, and HbA1c (fig 2) one year post operatively with p-value<0.05. The duration of T2DM, preoperative treatment, ALT, and C-peptide seem to be of paramount importance as prognostic factors for resolution of T2DM after surgery.

Conclusion: Our study showed that MGB is associated with a high rate of resolution of T2DM at 12 months after surgery in diabetic patients.