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Quality of life in the long-term after Roux-en-Y gastric bypass surgery (GBP): A cohort study of Brazilian severely obese patients

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QoL improves substantially in the first years after GBP. However, physical and psycho-social issues that ensue after surgery might impact on QoL in the long-term. We aimed to evaluate QoL and associated factors in the long-term after GBP in severely obese patients operated in the Hospital das Clínicas of UFMG. We performed a retrospective cohort study with random selection of 115 patients operated for \geq five years. The SF-36 questionnaire, which provides physical (PCS) and mental (MCS) component scores of QoL, was applied to all patients, as well as consultation of patient records, clinical exam and laboratorial tests. Pre and post-operative characteristics were compared by Wilcoxon or McNemar tests. Ordinal logistic regression models were performed to investigate the association between PCS and MCS and demographic, clinical and laboratorial characteristics.

Female sex was predominant (95; 82.6%). Mean age and pre-operative BMI were 40.2 (13.2) years and 51.9 (8.3) kg/m². Over 8.7 (2.9) years of follow-up, mean percentage of excessive BMI loss (%EBL) was 58% (22.1). The prevalence of hypertension and diabetes decreased ($p < 0.001$) after surgery, but not of depression ($p = 0.25$). Median PCS and MCS were 48.5 (9.8) and 48.7 (15.9), respectively. Higher PCS were associated with %EBL (OR 1.03; 95%CI 1.01-1.06) and improvement of metabolic comorbidities (OR 7.88; 95%CI 1.08-57.3). None of the characteristics investigated was associated with MCS. In conclusion, physical well-being in the long-term after GBP depends on maintenance of weight loss and good control of metabolic comorbidities.

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