

Gastro Congress 2017: Impact of bariatric surgery in adolescent population: AIIMs experience - Global Journal of Digestive Diseases 2018 - Sandeep Aggarwal - All India Institute of Medical Sciences, New Delhi, India

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There is an increase in prevalence of obesity among adolescents. Bariatric surgery is being considered for adolescents as an effective weight loss option with recent evidence suggesting that surgery resolves the co-morbid conditions and associated complications in future. However, there is scant prospective data to demonstrate the safety and efficacy of the bariatric surgery amongst adolescents. Aim: To study the impact of bariatric surgery on the weight loss and co-morbidities among morbidly obese adolescents. Methods: This is retrospective analysis of the prospectively collected data of the adolescent patients (BMI greater than 40 or 35 with co-morbidities) who underwent bariatric surgery at our institute from July 2009 till July 2016. Results: Of the 10 patients, 4 of them had syndromic forms of obesity. The median age was 16.40 yrs. The median preoperative weight and height were 123.5 kg and 151 cm respectively, with a BMI of 46 kg/m². There were no intra-operative or post-operative complications. Median follow up period was 1 year (0-5 years). The patients had the maximum excess weight loss (EWL) of 59% at 1 year. There was a regain of weight between 1st and 2nd year, followed by a sustained weight loss achieving 44.8% EWL at 3 years and 63% at end of 5 years. Similar results were found in syndromic patients. Six patients had one or more co-morbidities. Among the four diabetic patients, three of them had complete resolution and one had improvement. Conclusion: Bariatric surgery helps in attaining significant weight loss and co-morbidity resolution in adolescent age group. Hence bariatric surgery is safe and can be offered to morbidly obese adolescents.

Adolescent bariatric medical procedure has developed optional to the developing scourge of youth corpulence. With more than 33% of American youngsters and youths being viewed as overweight or hefty, the occurrence of this ailment has about

significantly increased since 1960. Roughly 4% of young people are considered incredibly fat, characterized as loads at or over the 99th percentile. There is a lot of harshness with regards to why teenagers are encountering such a precarious ascent in heftiness. At the point when clinical treatment neglects to give sturdy weight decrease, bariatric medical procedure ought to be thought of. There are various techniques being performed, both prohibitive and malabsorptive, with changing degrees of adequacy. In a significant forthcoming randomized preliminary, Adjustable Gastric Banding (AGB) was appeared to have a 26.9% decrease in BMI at 1 year. The Roux-en-Y Gastric Bypass (RYGB) went to the cutting edge for treatment of juvenile heftiness after its broad accomplishment in the grown-up populace with sturdy weight reduction, enhancement of comorbidities and a 37.5% decrease in BMI in a single late report. The Laparoscopic Sleeve Gastrectomy (LSG) gives off an impression of being rising as a decent choice for effective weight reduction in teenagers with a 36.1% decrease in BMI and noteworthy comorbidity goals. The drawn out effect of sullen weight in young people isn't completely seen, yet it has been reported that these patients build up a similar comorbidities as found in the fat grown-up population. One of the more common comorbid conditions, Type 2 Diabetes Mellitus (T2DM), is a developing pestilence that reacts well to bariatric medical procedure. The youthful populace has a higher pace of improvement of T2DM after RYGB (90.9%) than detailed in grown-ups (83.7%). Besides, the improvement in lipid profiles and decrease in circulatory strain in young people is of incredible hugeness since cardiovascular dangers are diminished before lasting harm is brought about. Starter information proposes the LSG has comparable viability to RYGB in inversion of comorbidities including a 93.8% goals of T2DM.

Notwithstanding the standard careful inconveniences, post-employable youthful bariatric patients ought to be firmly checked for gastrointestinal dying, minor ulceration, anastomotic stenosis and ailing health. It is vital to have a bariatric dietitian acquainted with the dynamic high protein diet plan that starts with in any event .5 g/kg of protein broken into 5-6 little dinners. [8] Dumping condition can happen after RYGB, particularly with a high sugar supper. Other normal nourishing confusions remember insufficiencies for B12, folate, calcium, and thiamine. [8, 12] Menstruating young people may require iron supplementation and solid conception prevention to forestall a conceivably high hazard pregnancy during the sensational weight reduction in the primary year. Most patients arrive at a weight reduction level after the primary year by which time an economical eating regimen plan ought to be actualized. [10] Lifelong clinical administration is objective and patients ought to preferably catch up yearly with their multidisciplinary bariatric group. Routine blood work ought to incorporate blood checks and science profiles to identify disturbances in physiology optional to bariatric life structures. Mental guiding is additionally urged to assist patients with adapting to the psychosocial issues and post-employable way of life changes, particularly in the high school populace. As we acquire information about the impacts of bariatric medical procedure in a youthful, reproductively dynamic populace, it is essential to have long haul follow-up to evaluate how these methodology influence our patients further down the road.

Obesity is the most significant modifiable hazard factor for T2D. Most youth with type 2 diabetes have in any event one influenced relative, yet all young with T2D are fat. In this manner, early stoutness treatment might be relied upon to slow or end the movement to T2D in patients who don't yet have diabetes. A significant issue looked by pediatricians, notwithstanding, is that clinical administration for corpulence in kids is constrained and regularly ineffectual. Moreover, heftiness is normal, influencing just about one-fifth of American kids. Propelled by progress as a treatment for grown-up heftiness, bariatric medical procedure has as of late developed as

a treatment for juvenile patients too. Clinical examinations exhibit an away from of bariatric medical procedure to improve glycemic control and regularly inspire total abatement of T2D, remembering for young people. This survey will talk about the potential for bariatric medical procedure as a treatment for T2D in corpulent and overweight teenagers.