

Surgery recognized as effective treatment for type 2 diabetes

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A first-of-its-kind consensus statement by 50 medical experts from around the world has pronounced surgery to be a legitimate and effective treatment for type 2 diabetes, bringing the procedure a significant step closer to wider use and acceptance.

The report, recently published in the *Annals of [Surgery](#)*, illustrates the findings of the first [Diabetes](#) Surgery Summit (DSS), an international conference held at the Catholic University of Rome, Italy, where more than 50 scientific and medical experts agreed on a set of guidelines and definitions to guide the use and study of gastrointestinal surgery to treat type 2 diabetes.

"This is very good news for people in Qatar and other Gulf countries where diabetes continues to be a major health concern," says Bakr Nour, MD, professor of surgery at Weill Cornell Medical College in Qatar and vice chair of surgery at Weill Cornell Medical College in New York. "It is estimated that 15 to 20% of GCC nationals suffer from diabetes, though many may be unaware that they have it. The disease rates continue to rise both in adults and children, and prevalence among Qatari children has doubled in the past 10 years."

"While more study has been recommended, consensus about surgery as an effective treatment for select patients with type 2 diabetes means that many more patients will be considered as candidates for the procedure," says Dr. Nour. "It could mean a dramatic improvement in the quality of life for those patients for whom lifestyle changes and less invasive

therapies prove insufficient."

"The recommendations from the DSS are an opportunity to improve access to surgical options supported by sound evidence, while also preventing harm from inappropriate use of unproven procedures," says the consensus paper's lead author Dr. Francesco Rubino, director of the gastrointestinal metabolic surgery program at New York-Presbyterian Hospital/Weill Cornell Medical Center and associate professor of surgery at Weill Cornell Medical College.

The article in the [Annals of Surgery](#) summarizes the mounting body of evidence showing that bariatric surgery effectively reverses type 2 diabetes in a high proportion of morbidly obese patients, sometimes within weeks or even days, well before the patients have lost a significant amount of body weight.

Currently, bariatric surgery is only available as a treatment for severe obesity, defined as a body mass index of 35 kg/m² or more, according to National Institutes of Health guidelines established in 1991. The consensus statement acknowledged that the cutoff is arbitrary and not supported by scientific evidence. "With an emphasis on caution and patient safety, the statement boldly advances a revolutionary concept, the legitimacy of gastrointestinal surgery as a dedicated treatment for [type 2 diabetes](#) in carefully selected patients," explains Dr. Rubino.

Based on earlier studies and on clinical experience in other countries, Dr. Rubino and his colleagues have found that removing portions of the jejunum or duodenum — the upper part of the small intestine right below the stomach — leads to spontaneous improvement or even resolution of diabetes. The same holds true when the surgeon simply inserts a tube in that part of the intestine, allowing food to pass through without coming into contact with the area. These findings suggest that when food normally passes from the stomach into the upper end of the

small bowel, it triggers a cascade of hormonal reactions that cause diabetes.

"Prevention will always be the best strategy to approach the global epidemic of diabetes," says Dr. Rubino. "But gastrointestinal surgery promises to be an important addition to the treatments available, and its study may also allow us to understand the disease mechanism in depth. We can only prevent what we truly understand."

Provided by Weill Cornell Medical College

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