

Clinical practice guidelines for bariatric surgery are updated

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Jeffrey I. Mechanick, M.D., from the Icahn School of Medicine at Mount Sinai in New York City, and colleagues from the American Association of Clinical Endocrinologists, The [Obesity](#) Society, and the American Society for Metabolic & Bariatric Surgery reviewed current evidence to develop updated guidelines for the perioperative nutritional, metabolic, and nonsurgical support for patients undergoing bariatric

surgery.

In contrast to the 2008 guideline with 164 recommendations, the 2013 update included 74 recommendations, comprising 56 revisions and two new guidelines, which reflect recent additions to the evidence base. The proportion of strong studies (evidence levels 1 and 2) was 40.4 percent, which was higher than the 16.5 percent in the 2008 guidelines. New evidence in these [guidelines](#) is related to sleeve gastrectomy, which is no longer considered an investigational procedure. In addition, bariatric surgery was discussed in specific patient populations, including those with mild to moderate obesity, type 2 diabetes, and patients at extremes of age.

"An enriched evidence base, expanding eligible patient populations, and safer, innovative surgical treatments for obesity will likely result in a greater number of obese patients undergoing surgery," the authors write. "This [clinical practice guidelines](#) update aims to keep pace with the evidenced-based literature, and along with the accompanying checklist, assist physicians and allied health professionals with both routine and difficult clinical decision making."

Several authors disclosed financial ties to the pharmaceutical and nutrition industries.

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