

Gastric bypass surgery improves diabetic patients' quality of life

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An intensive weight loss program involving lifestyle modifications improves obese diabetic patients' physical and mental health as well as gastric bypass surgery does over two years, but the weight loss surgery leads to a greater reduction in adverse effects of obesity on quality of life. These results, from a new study in patients with Type 2 diabetes, were presented Tuesday at the joint meeting of the International Society of Endocrinology and the Endocrine Society: ICE/ENDO 2014 in Chicago.

Gastric bypass also led to [patients](#) having a somewhat greater reduction in problems associated with managing their diabetes, according to the study's lead investigator, Donald Simonson, MD, MPH, ScD, from Brigham and Women's Hospital, Boston.

"Patients with obesity and Type 2 diabetes should consider these long-term results when making decisions about their [weight loss](#) treatment," Simonson said.

The researchers evaluated the effects of weight loss on 38 patients' self-reported health status for both physical and mental health, as well as the impact of their weight on their quality of life and on problem areas in managing their Type 2 diabetes.

Fifteen men and 23 women participated in the Surgery or Lifestyle with Intensive Medical Management in the Treatment of Type 2 Diabetes (SLIMM-T2D) trial. Of the 38 patients, 19 were randomly assigned to

undergo gastric bypass surgery at Brigham and Women's Hospital, and 19 patients, to a medical diabetes and weight management program, called Why WAIT (Weight Achievement and Intensive Treatment), at the Joslin Diabetes Center in Boston. The program consisted of exercise, diet with meal replacements, 12 initial weekly group sessions and nine additional months of individual counseling. Follow-up evaluation ranged from 18 to 24 months.

Before treatment, patients reported high scores on the questionnaire Impact of Weight on Quality of Life, which included physical function, self-esteem, sex life, public distress and work. Up to two years after treatment, patients who underwent [gastric bypass surgery](#) had nearly twice the improvement (reduction) in the [adverse effects](#) of weight on their quality of life, which Simonson said strongly correlated with the greater amount of weight they lost.

Two years after treatment, the surgical patients lost an average of 64.4 pounds versus 11 pounds in the Why WAIT group, he noted.

At 18 to 24 months after treatment, patients in the surgical group also reported a 60 percent greater reduction in problems with managing their diabetes, as found by an eight-point better score on the Problem Areas in Diabetes scale than the medical group. Problems surveyed included emotional distress, eating behaviors, and difficulty with [diabetes](#) self-management.

Although the Why WAIT program improved self-reported physical and mental health more than gastric bypass did at three months, improvements were generally similar in the two groups after one and two years of follow-up and were in the moderate range, Simonson reported.

Provided by The Endocrine Society

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