

Sleeve gastrectomy surgery improves diabetes control better than medical care

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Adults with Type 2 diabetes achieve better blood glucose (sugar) control two years after undergoing laparoscopic sleeve gastrectomy than do patients who receive standard medical diabetes care without this weight loss surgery, a new study finds. The results were presented Monday at the joint meeting of the International Society of Endocrinology and the Endocrine Society: ICE/ENDO 2014 in Chicago.

In addition, 76 percent of surgery [patients](#) were able to reduce their use of [diabetes medications](#), compared with only 26 percent of patients in the nonsurgical group, study authors reported.

"Individuals with obesity now have another treatment option that can help reduce weight and manage [diabetes](#)," said the study's principal investigator, Pietra Greenberg, MD, an endocrinologist at James J. Peters Veterans Affairs (VA) Medical Center in Bronx, N.Y.

Sleeve gastrectomy, a newer minimally invasive technique for making the stomach smaller, is gaining popularity, and several studies have found it is effective for [weight loss](#). However, Greenberg said few prior studies of diabetes outcomes in diabetic patients who underwent this surgical procedure compared results with those of nonsurgically treated patients who have the disease.

She and fellow researchers compared the [medical](#) records from 2010 to 2014 of 53 veterans with Type 2 diabetes: 30 patients who underwent sleeve gastrectomy and 23 who received medical diabetes care but did

not receive any [weight loss surgery](#) (controls). Study participants—nearly all of whom were men—ranged in age from 29 to 80 years, and had diabetes for an average of 10 years..

Nonsurgical control subjects did not lose weight on average over a two-year follow-up period and therefore had no change in average body mass index, or BMI, Greenberg said. In the sleeve gastrectomy group, BMI decreased from 41 kg/m² (morbidly obese) to 34 kg/m² two years after surgery.

Hemoglobin A1c, a measure of blood sugar control over the past few months, also was significantly different between the two groups. It fell from an average of 7.25 percent before sleeve gastrectomy (but after lifestyle changes, such as diet and exercise) to 5.98 percent.. Among controls, the average Hemoglobin A1C at two years was not significantly changed.

As is common when people with Type 2 diabetes lose a great deal of weight, most (76 percent) of the patients after sleeve gastrectomy took fewer diabetes medications, such as insulin, she said.

"This research highlights the benefits of a surgical approach such as sleeve gastrectomy to help improve diabetes outcomes, especially compared to more conservative medical management," Greenberg commented.

She noted, however, that the improvement in diabetes measures in the surgical group reached a plateau at the end of two years. "Surgery may not be a permanent solution to improving diabetes control,. However the procedure does have immediate benefits that appear to set the patient on a path to a healthier future.

Sheetal Malhotra, MD, MS, internal medicine resident at James J. Peters

VA Medical Center, will present this research.

Provided by The Endocrine Society

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