

# Long-term followup of type of bariatric surgery finds regain of weight, decrease in diabetes remission

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While undergoing laparoscopic sleeve gastrectomy induced weight loss and improvements in obesity-related disorders, long-term followup shows significant weight regain and a decrease in remission rates of diabetes and, to a lesser extent, other obesity-related disorders over time, according to a study published online by *JAMA Surgery*.

Obesity was recognized as a global epidemic by the World Health Organization 15 years ago and rates of obesity have since been increasing. Obesity is currently considered a severe health hazard and a risk factor for [diabetes](#) mellitus, hypertension, abnormal lipid levels, heart failure, and other related disorders. Bariatric procedures are reportedly the most effective strategy to induce weight loss compared with nonsurgical interventions. Laparoscopic sleeve gastrectomy (LSG) is a common and efficient bariatric procedure with increasing popularity in the Western world during the last few years, but data on its long-term effect on obesity-related disorders are scarce, according to background information in the article.

Andrei Keidar, M.D., of Beilinson Hospital, Petah Tikva, Israel, and colleagues collected data on all patients undergoing LSGs performed by the same team at a university hospital between April 2006 and February 2013, including demographic details, weight followup, blood test results, and information on medications and comorbidities.

A total of 443 LSGs were performed. Complete data were available for 54 percent of patients at the 1-year follow-up, for 49 percent of patients at the 3-year follow-up, and for 70 percent of patients at the 5-year follow-up. The percentage of excess [weight loss](#) was 77 percent, 70 percent, and 56 percent, at years 1, 3 and 5, respectively; complete remission of diabetes was maintained in 51 percent, 38 percent, and 20 percent, respectively, and remission of hypertension was maintained in 46 percent, 48 percent, and 46 percent, respectively.

The decrease of [low-density lipoprotein cholesterol](#) level was significant only at years 1 and 3. The changes in total cholesterol level (preoperatively and at 1, 3, and 5 years) did not reach statistical significance.

"The longer follow-up data revealed weight regain and a decrease in remission rates for type 2 [diabetes mellitus](#) and other obesity-related comorbidities. These data should be taken into consideration in the decision-making process for the most appropriate operation for a given obese patient," the authors write.

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