

Study shows bariatric surgery better than intensive lifestyle and drug interventions at reversing diabetes

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New research shows that bariatric surgery (also known as obesity surgery) is much more effective than an intensive lifestyle/medication intervention at reversing type 2 diabetes in patients with only mild-to-moderate obesity.

The study is published in *Diabetologia* (the journal of the European Association for the Study of Diabetes [EASD]) and is by Dr David E. Cummings, Department of Medicine, University of Washington, Seattle, WA, USA, and colleagues including at the Group Health Research Institute, Seattle, WA, USA. The study underlines that it may no longer be appropriate to consider someone for bariatric surgery based primarily on just their [body mass index](#), but also on whether they have [diabetes](#).

Mounting evidence indicates that Roux-en-Y gastric bypass (RYGB) - a type of bariatric surgery - can reverse type 2 diabetes, through mechanisms beyond just reduced food intake and body weight. Large observational studies report that in severely obese individuals, bariatric surgery is associated with long-term reductions in all major cardiovascular disease (CVD) risk factors, CVD events such as heart attacks and strokes, cancer and all-cause mortality, including a 92% decrease in diabetes-related deaths. However, since these data are from observational studies, it is impossible to be certain of the size of the effect of surgery without randomised controlled trials comparing surgical with non-surgical care.

Thus in this study, the authors compared RYGB to an intensive lifestyle and medical intervention (ILMI) for type 2 diabetes, including among only mildly obese patients with a BMI

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