

The importance of assessing weight control practices, eating behaviors, after bariatric surgery

April 20 2016

Assessing certain weight control practices and eating behaviors after bariatric surgery can significantly influence the amount of weight loss after surgery, according to a study published online by *JAMA Surgery*.

It is important to identify variables that are associated with, or predictive of, successful [weight loss](#) outcomes to better evaluate potential risks and benefits to the use of [bariatric surgery](#) for treating those with severe obesity. Much research in this area has focused on preoperative factors. Postoperative predictors of [weight](#) loss have not been adequately examined. James E. Mitchell, M.D., of the Neuropsychiatric Research Institute, Fargo, N.D., and colleagues examined postoperative eating behaviors and [weight control](#) and their effects on change in weight among adults undergoing first-time bariatric surgical procedures. Participants completed detailed surveys regarding eating and weight control behaviors prior to [surgery](#) and then annually after surgery for 3 years. Twenty-five postoperative behaviors related to eating [behavior](#), eating problems, weight control practices, and the problematic use of alcohol, smoking, and illegal drugs were examined.

The sample included a total of 2,022 participants (median body mass index [BMI], 46): 1,513 who had undergone Roux-en-Y gastric bypass (RYGB) and 509 who had undergone laparoscopic adjustable gastric banding (LAGB). The researchers found that the 3 behaviors that explained most of the variability (16 percent) in 3-year percent weight

change following RYGB were weekly self-weighing, continuing to [eat](#) when feeling full more than once a week, and eating continuously during the day. A participant who postoperatively started to self-weigh, stopped eating when feeling full, and stopped eating continuously during the day after surgery would be predicted to lose an average of 39 percent of their baseline weight, which is about 14 percent greater weight loss compared with participants who made no positive changes in these variables.

"The results of this study suggest that certain behaviors, many of which are modifiable, are associated with weight loss differences of significant impact in patients undergoing RYGB or LAGB. The magnitude of this difference is large and clinically meaningful. In particular, the data suggest that developing positive changes in behavior, including ceasing negative behaviors or increasing positive behaviors, can affect the amount of weight loss," the authors write.

"This suggests that structured programs to modify problematic eating behaviors and eating patterns following bariatric surgery should be evaluated as a method to improve weight outcomes among patients undergoing bariatric surgery. The results also underscore the need for health care professionals to target these behaviors in the postoperative period."

More information: *JAMA Surgery*. Published online April 20, 2016.
[DOI: 10.1001/jamasurg.2016.0395](https://doi.org/10.1001/jamasurg.2016.0395)

Provided by The JAMA Network Journals

Citation: The importance of assessing weight control practices, eating behaviors, after bariatric surgery (2016, April 20) retrieved 5 May 2024 from
<https://medicalxpress.com/news/2016-04-importance-weight-behaviors-bariatric-surgery.html>

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