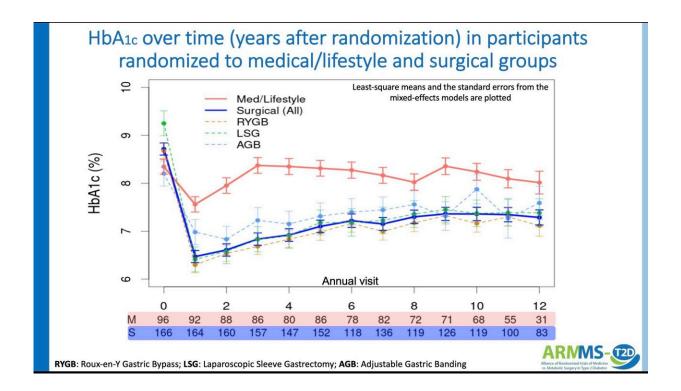


Bariatric surgery shows long-term success over standard diabetes management

June 28 2023



The 12-year study affirms that metabolic surgery provides better results, less regression, as confirmed by Pennington Biomedical researchers and partners. Credit: ARMMS

Metabolic or bariatric surgery results in superior glycemic control, less medication usage and high rates of remission of Type 2 diabetes than medical or lifestyle intervention in patients with class 1 obesity, as described in a recently published report by researchers of Pennington



Biomedical Research Center and others.

The study, which evaluated more than 250 participants for up to 12 years, represents the largest cohort of people assessed for the long-term durability of the two treatments. The results were presented at the 83rd Scientific Sessions Conference by the American Diabetes Association in San Diego.

"The longer the study duration, the stronger the message in terms of remission of type 2 diabetes," said ARMMS-T2D Principal Investigator John Kirwan, MSc, Ph.D., Executive Director and the George A. Bray, Jr. Endowed Super Chair in Nutrition, Pennington Biomedical Research Center. "The study addressed the durability of glycemic control after surgery, the longer-term efficacy and safety, and potential reasons some patients experience relapse."

The study is the longest running of its kind. From May 2007 to August of 2013, 262 participants with Type 2 diabetes were recruited and randomized into either the metabolic surgery group or medical/lifestyle intervention group. With a median follow-up of 11 years, those in the metabolic surgery group saw an increased reduction in <u>blood sugar</u>, great rates of diabetes remission, and significantly greater weight loss than those in the medical/lifestyle intervention group.

"These landmark results further enforce the confidence we have in the success and efficacy of metabolic and <u>bariatric surgery</u>. For those patients who are in serious need of weight loss, and for whom diet, exercise and medication did not produce the desired results, these <u>patients</u> can be assured that this operation is safe, and the results are well established," said Dr. Philip Schauer, Director of Metamor Metabolic Institute at Pennington Biomedical.

At the American Diabetes Association's conference, Assistant Chief of



Clinical Affairs in the Division of Endocrinology, Diabetes and Metabolism at Weill Cornell Medicine New York Presbyterian Dr. Sangeeta Kashyap introduced the study and presented The Case for an RCT of Metabolic Surgery and Type 2 Diabetes. Physician-scientist Dr. Mary-Elizabeth Patti, an Associate Professor of Medicine at Harvard Medical School, reviewed and shared the <u>study design</u>. Dr. Anita Courcoulas, MPH, FACS, and Chief of the Division of Minimally Invasive Bariatric and General Surgery at the University of Pittsburgh, discussed the long-term outcomes and diabetes remission resulting from the study. Dr. Robert H. Eckel, past ADA President, Medicine & Science, shared the implications of clinical management of type two diabetes.

Provided by Louisiana State University

Citation: Bariatric surgery shows long-term success over standard diabetes management (2023, June 28) retrieved 11 May 2024 from <u>https://medicalxpress.com/news/2023-06-bariatric-surgery-long-term-success-standard.html</u>

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