

Sleeve gastrectomy, gastric bypass may be better for teens

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were estimated to be ?29 and ?25 percent, respectively.

"Adolescents undergoing SG and RYGB experienced greater declines in BMI at one- and three-year follow-up time points, while laparoscopic adjustable gastric banding was significantly less effective for BMI reduction," the authors write.

More information: [Abstract/Full Text](#)

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(HealthDay)—Adolescents with severe obesity achieve substantial and sustainable weight loss with sleeve gastrectomy (SG) and gastric bypass procedures but not with gastric banding, according to a study published in the September issue of *Surgery for Obesity and Related Diseases*.

Thomas H. Inge, M.D., from the University of Colorado Denver in Aurora, and colleagues identified 544 adolescents who underwent a primary bariatric [procedure](#) from 2005 through 2015. The percent change in body mass index (BMI) at one, three, and five years was estimated using electronic health records.

The researchers found that procedures included Roux-en-Y gastric bypass (RYGB; 177 individuals), SG (306 individuals), and laparoscopic adjustable gastric banding (61 [individuals](#)). Mean BMI changes for those undergoing RYGB, SG, and laparoscopic adjustable gastric banding were ?31, ?28, and ?10 percent, respectively, at one year. For RYGB and SG, BMI changes at three years

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