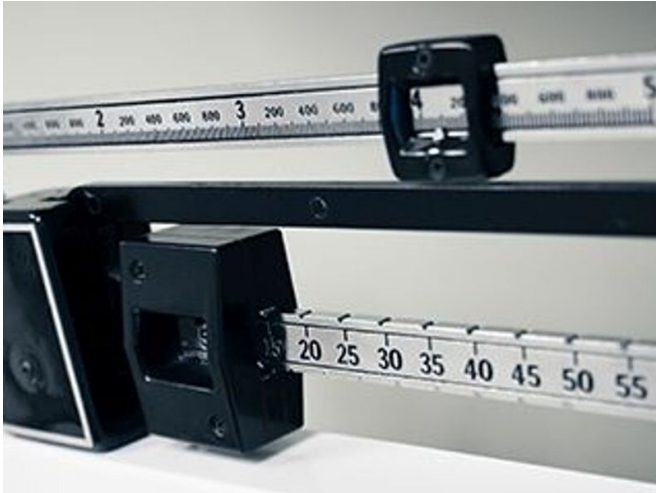


Practice's bariatric nonsurgical visits up with telehealth during pandemic

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(HealthDay)—New patient visit volumes decreased across the board at a comprehensive metabolic and weight loss center during the COVID-19 pandemic, but follow-up visits increased for certain nonsurgical providers, according to a study published in the December issue of the *Annals of Surgery*.

Andrew M. Brown, M.D., from Stony Brook University Hospital in New York, and colleagues evaluated how full-time [telemedicine](#) adoption impacted patient visit volume and attendance among patients at a comprehensive metabolic and weight loss center. The analysis compared new patient and follow-up [visits](#) for all clinical provider types before and after telehealth implementation (March 19, 2020) to a comparative period in 2019.

The researchers found there were 506 visits (162 new patient visits and 344 follow-ups) in the pretelehealth period versus 413 visits (77 new patient visits and 336 follow-ups) during the post-telehealth period. New visits for surgeons

decreased by 75 percent after telehealth implementation. Follow-up visits decreased by 55.06 percent for surgeons, but there was an increase by 27.36 percent for advanced practitioners and a 16.08 percent increase for the group of all other practitioners besides surgeons. There were higher rates of absenteeism with new patient visits for dietitians (10.00 versus 31.42 percent), while bariatricians experienced a decrease in follow-up visit absenteeism (33.33 versus 0 percent).

"Embracing telemedicine has been extremely effective for our practice and certainly can be for other practices during this pandemic," a coauthor said in a statement. "Our patients and multiple [health care providers](#) involved in [metabolic health](#) and bariatric surgery services find telemedicine to be effective, because in-person care is not necessary for certain aspects of patient care and follow-up, and telemedicine saves time and reduces exposure risks for patients and providers alike."

More information: [Abstract/Full Text](#) ([subscription or payment may be required](#))

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