

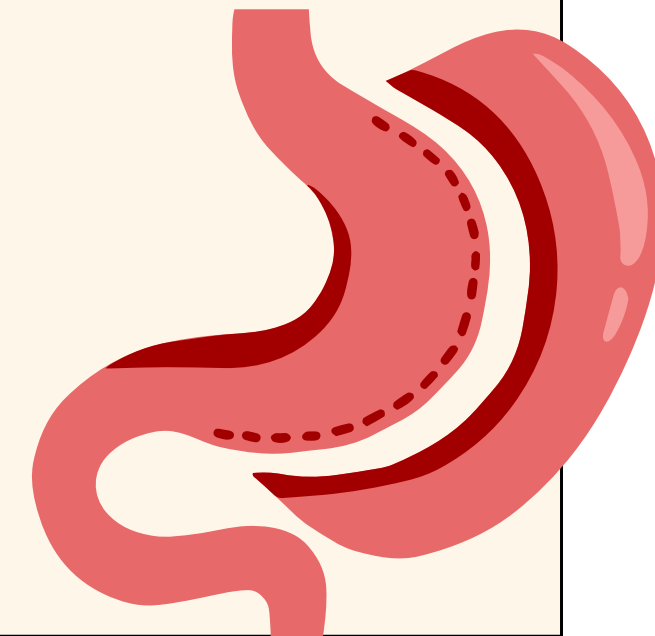
Patient Reported Outcome Measures Following Post-Bariatric Body Contouring: A Systematic Review and Meta-analysis

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INTRODUCTION

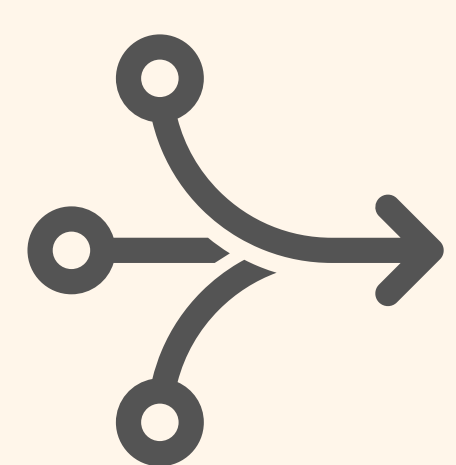
- **Massive weight loss** after **bariatric surgery (BS)** often leads to excess skin¹.
- This can cause physical discomfort and **reduced quality of life (QoL)**².
- **Body contouring surgery (BCS)** can restore body image, improve function, and enhance QoL.
- Its impact on **patient-reported outcomes (PROMs)** remains underexplored.



METHODS



PubMed
Cochrane
Scopus
Embase
Web of Science



All screened up
to March 2025



1. **Primary PROM tool: BODY-Q domains (body image, physical, psychological, sexual, social function).**
2. **Secondary outcome: Total weight loss.**



Pooled analyses were conducted using random effects models on R software.

RESULTS

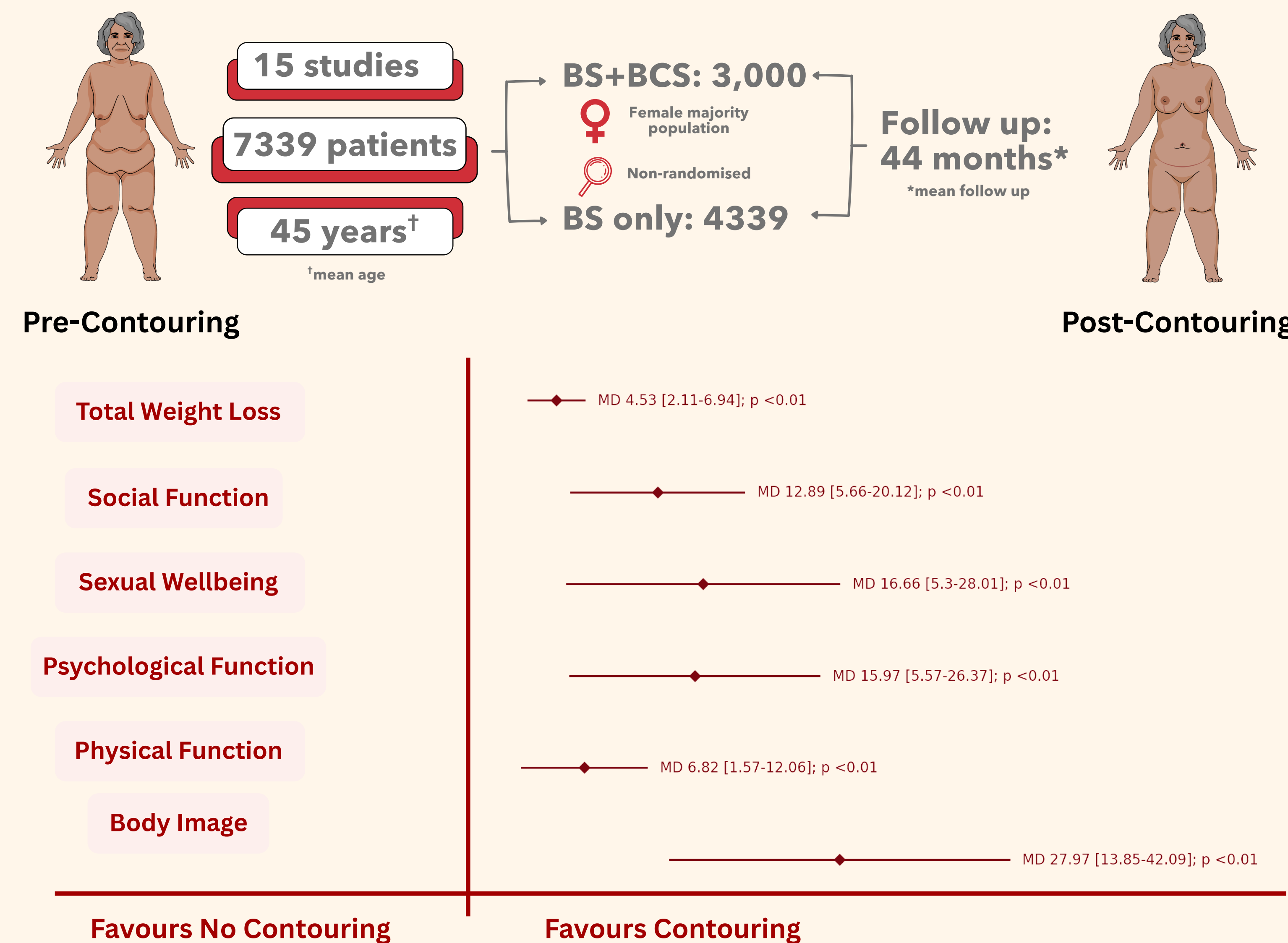


Figure 1 - Mean differences (MDs) for BODY-Q domains (body image, physical function, psychological function, sexual well-being, social function) and total weight loss comparing BS+BCS vs BS-only.

Significant differences noted in favour of BCS+BS



Body image



Physical function



Psychological function



Sexual well-being



Social function



Total weight loss

CONSLUSIONS

- **Body contouring surgery (BCS) is not merely a cosmetic procedure**; it is a meaningful intervention that addresses both **physical and psychological recovery after bariatric surgery (BS)**.
- It should be **incorporated into post-bariatric care pathways** for eligible patients.
- The **BODY-Q tool** can be used to **guide patient selection** and determine the optimal timing for surgery.
- Incorporating **BCS in follow-up care can help maximise quality of life (QoL), functional recovery, and sustained weight outcomes.**

DISCUSSION

- BCS after BS is associated with **significant improvements in body image, physical, psychological, and social functioning**, with additional benefits in weight outcomes.
- These effects likely reflect **removal of excess skin, improved mobility, and enhanced self-perception.**
- BCS should be viewed as a **functional component of post-bariatric care**, supported by PROMs such as BODY-Q.
- Limitations include **observational data and heterogeneity**, highlighting the need for **prospective studies and standardized outcome reporting.**

Abbreviations: BS – Bariatric Surgery; BCS – Body Contouring Surgery; QoL – Quality of Life; PROMs – Patient-Reported Outcome Measures; MD – Mean Difference; SMD – Standardized Mean Difference; ROBINS-I – Risk Of Bias In Non-randomized Studies – of Interventions; BODY-Q – Patient-reported outcome instrument for weight loss and body contouring.

References:

1. Steffen KJ, Sarwer DB, Thompson JK, Mueller A, Baker AW, Mitchell JE. Predictors of satisfaction with excess skin and desire for body contouring after bariatric surgery. Surg Obes Relat Dis. 2012;8(1):92-97. doi:10.1016/j.soard.2011.06.022
2. Dijkhorst PJ, Debi RA, de Vries CEE, et al. Decreased Quality of Life in Patients Who Desire Body Contouring Surgery after Bariatric Metabolic Surgery: A Multicenter Longitudinal Analysis. Obes Facts. 2025;18(3):287-295. doi:10.1159/000543632