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Background

- In United Arab Emirates (UAE), obesity levels are as high as 37% of the population.
- Access to care and compositions of programs vary widely in terms of structure.
- **Multi-disciplinary approaches** to treat morbid obesity often resulting in improved peri-procedural and long-term outcomes.
- The aim of this study was to compare the safety and peri-operative outcomes between the first and last 100 primary bariatric cases performed at **Cleveland Clinic Abu Dhabi**.

Methods

- All bariatric procedures performed from September 2015 to July 2019 were retrospectively reviewed for analysis.
- The **First-Cohort (FC)** included the initial 100 patients and **Second-Cohort (SC)** included the 100 most recent patients.
- Intraoperative and perioperative outcomes were analyzed.

Results

- Two-hundred patients were included.
- The FC was 33% male and 67% female, and the SC was 40% male with 60% female.
- There were no significant differences in comorbidities.
- Mean weight loss before surgery was 1.3 kg for FC and 0.3 kg for SC, ***p*=.002**.

Table 1: Demographics		
	FC	SC
Age (mean, years)	38.9	33.5
BMI (mean, kg/m ²)	45.5 ± 8.2	43.1 ± 5.7
ASA score (mean)	2.4	2.8
SG	45 (45%)	54 (54%)
RYGB	55 (55%)	46 (46%)

Abbreviations: **BMI:** Body mass index, **ASA:** American Society of Anesthesiologists, **SG:** Sleeve Gastrectomy, **RYGB:** Roux-en-Y Gastric Bypass.

Results

Table 2: Perioperative Details			
	FC	SC	<i>P</i>
Length of stay (median, days)	3.3	2.5	=.05
Early complications (%)	15	8	=.13
Emergency visits (%)	36	15	<.001
Re-admissions (%)	10	5	=.18
Re-operations (%)	8	3	=.18
Late complications (%)	12	4	<0.3

- At a median follow-up of 24.9 and 2.2 months respectively, there were no deaths in both groups.

Conclusions

- The results suggest that ED-utilization and late postoperative complications may be higher in the initial cohort of patients.
- Forming a new bariatric program is a complex and multifaceted endeavor.
- Specific attention needs to be placed on quality and patient safety, and during the early period of program development.

Disclosures

- Matthew Kroh has no conflicts of interest relevant to this publication and is a consultant for Levita Magnetics and has received research funding from Ethicon and Medtronic. The remaining authors have no conflicts of interest relevant to this publication and have nothing to disclose.