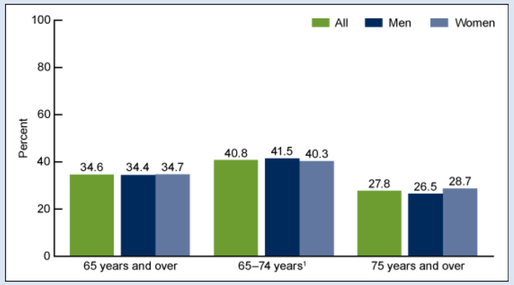
Analysis of Bariatric Surgery Outcomes in the Geriatric Population

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Background

- Obesity rates in the United States continue to rise, affecting more than 1/3 of adults, including the elderly. Older adults (ages >60) experience obesity at a higher rate than the younger population (41.0% vs. 39.3%).
- Obesity plagues the elderly population, leading to an increased prevalence of diabetes, hypertension, hyperlipidemia, and osteoarthritis.
- Additionally, due to age, the elderly population faces impaired metabolic capacity and a greater presence of sarcopenia compared to younger patients; therefore, possible bariatric surgery needs to be carefully investigated.
- Bariatric surgery has been proven to be the most effective way to combat the obesity epidemic; however, controversy exists regarding the efficacy of bariatric surgery in the elderly population.
- There is no cut off age for surgery in the geriatric population; and, therefore, we plan to investigate this efficacy of bariatric surgery on said population.
- With proper screening of patients in this population, we hypothesize bariatric surgery can be safe and effective.



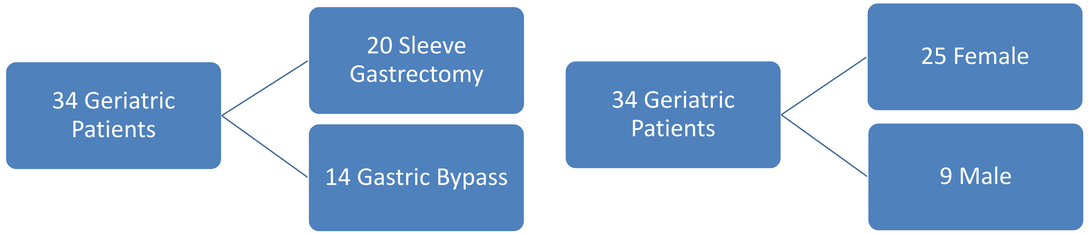
Objective

- The primary objective of this study was to evaluate bariatric surgery outcomes in the geriatric population.
- This study allowed us to evaluate the safety of bariatric surgery in this patient population.
- Further, we aimed to analyze resolutions of comorbid conditions in the elderly population after bariatric surgery

Study Design

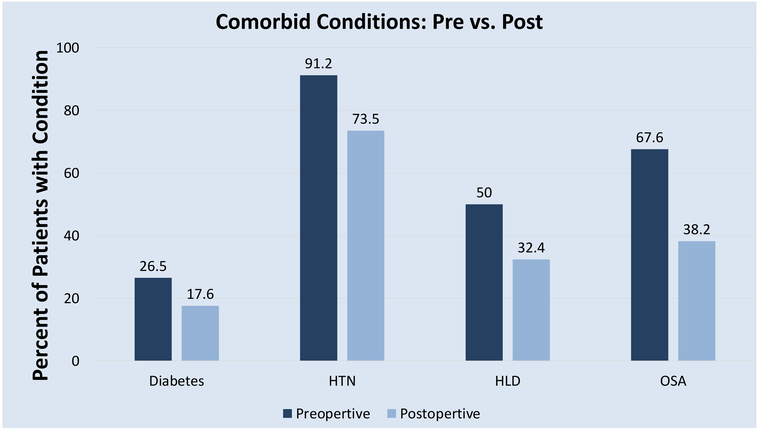
- This study was a retrospective chart review of 34 patients over the age of 65 who underwent bariatric surgery.
- The MSAQIP was accessed to evaluate the weight loss and a medical record review was implemented from 2016 through 2020 for patients who presented for bariatric surgery at Carilion Clinic.
- Data collected included patient demographics (i.e., age, gender, height, weight, race), body mass index, ASA score, and comorbid conditions.
- The complication rate, readmission rate, and mortality rate was also assessed.
- Outcomes were analyzed at 6 months and 1 year.

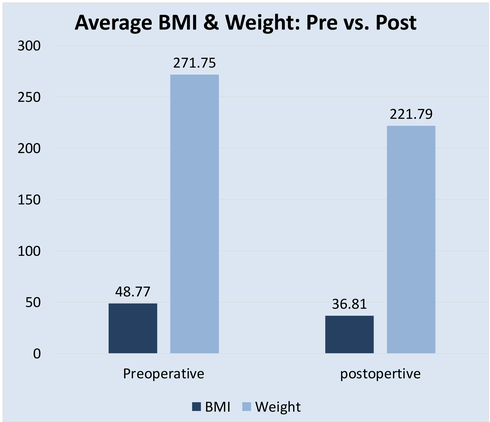
Study Population



Results

- The study population comprised 25 female patients and 9 male patients, of which 58% (20 patients) underwent laparoscopic sleeve gastrectomy, and 42% (14 patients) underwent laparoscopic gastric bypass. The average age of the cohort was 67.8. The average height was 65.27 inches. The average preoperative BMI was 48.77. The average preoperative weight was 271.75 lbs.
- Preoperative average BMI was 48.3 and postoperative average BMI was 36.9 (1 year follow-up). Diabetes was present in 26.5% of patients preoperative and 17.6% of patients postoperative (1 year follow-up). Obstructive Sleep apnea was present in 63.8% of patients preoperative and 38.2% postoperative (1 year follow-up). Hypertension was present in 91.4% of patients preoperative and 73.5% postoperative (1 year follow-up). Hyperlipidemia was present in 50% of patients preoperative and 32.4 % postoperative (1 year follow-up). The complication rate for all was 4% and the average total length of stay was 2.5 days.





Conclusions

- Bariatric surgery appears to be safe in the geriatric population.
- Bariatric surgery can achieve substantial weight loss in the geriatric population and help with the resolution of comorbidities.
- A strict age cut off should not serve as a barrier to recommending bariatric surgery in the geriatric population.

Future Directions

- Compare the resolution of comorbid conditions between the elderly population and the general population.
- Work collaboratively with bariatric medicine to develop a screening protocol for choosing geriatric patients who would serve as suitable candidates for bariatric surgery
- Continue to track outcomes in this population to further delineate improvement in comorbidities at the 3 and 5 year follow up.

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