Quality of Life and Satisfaction after Sleeve Gastrectomy versus Gastric Bypass

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BACKGROUND

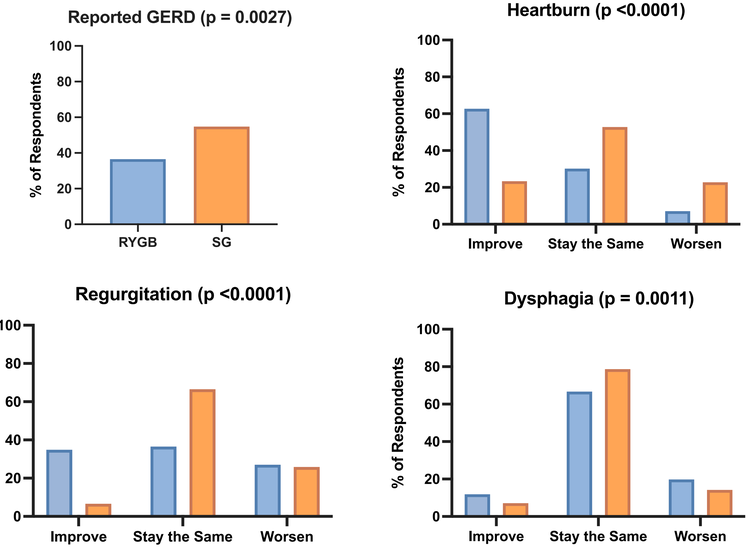
- Laparoscopic sleeve gastrectomy (SG) has become the most common primary bariatric procedure in the United States.
- Advantages of SG compared to Roux-en-Y gastric bypass (GB) include relative technical ease, decreased risk of micronutrient deficiencies, and decreased anatomic complications, with comparable weight loss.
- Of concern in SG patients is a worsening of preexisting GERD, or even the development of *de novo* GERD postoperatively.
- We hypothesized that SG patients would express less satisfaction with their outcomes compared to GB patients due to increased GERD symptoms and more modest weight loss.

METHODS

- Satisfaction and quality of life surveys were distributed to all patients who underwent primary bariatric surgery at our institution from 2000 to 2020 by a single surgeon (TF).
- Preoperative and postoperative symptoms such as heartburn and regurgitation were compared and recoded into improved, neutral and worsened categories.
- Patients reported prevalence of complications and dissatisfaction.
- Statistical analysis was conducted on 323 surveys received.
- To compare outcomes between SG and GB Welch's two-sample t-test was used for continuous responses such as weight loss, Cochran-Mantel-Haenszel test was used for ordinal responses, and chi-square test was used for categorical responses such as satisfaction.

RESULTS

- Among 323 respondents, 126 underwent GB and 197 underwent SG.
- Mean follow up time was 2.3 years for GB patients, and 3.4 years for SG.
- SG patients expressed significantly more dissatisfaction (26.4%) compared to GB (7.14%) ($p<0.0001$).
- GB patients reported less overall GERD (36.5%) compared to SG (53%) ($p = .003$).
- GB patient reported greater improvement in individual GERD symptoms of heartburn, regurgitation, and dysphagia (*Figure 1*).
- Patients who underwent GB had a larger reduction in BMI compared to SG (-17.1 GB, -14.7 SG; $p = 0.023$).



CONCLUSIONS

- In a survey of bariatric patients over 20 years from a single surgeon, SG patients expressed significantly more dissatisfaction than GB patients with their postoperative outcome, despite adequate weight loss.
- Consistent with published data, there are significant differences with respect to postoperative GERD symptoms, with improved outcomes in GB patients.
- Given increasing incidence of SG revision for GERD, we suspect GERD is a significant factor in patient dissatisfaction after SG.
- Patients should be educated preoperatively regarding the potential for worsening, or *de novo* GERD symptoms after SG.

LIMITATIONS

- Limitations of our analysis include a low voluntary survey response rate.
- GERD is patient reported, and potentially not congruent with endoscopic or pH monitoring data.
- Mean follow up time was significantly longer in the SG group, with unclear duration of worsening symptoms compared to GB group.

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