The Impact of Patient Reported Outcomes on Loss To Follow-up Care after Bariatric Surgery

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Introduction:

- Lifetime follow-up is recommended after bariatric surgery, yet high rates of follow-up attrition are still common
- There is little available work focusing on the etiology of such attrition.
- Patient reported outcomes (PRO's) are metrics of patients' perceptions of their own health and have been used for their predictive value in other specialties
- The relationship between PROs and loss to follow-up (LTFU) have not yet been explored

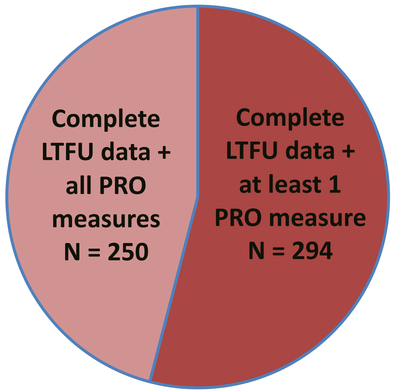
Objective:

- To identify the relationship between pre and postoperative bariatric PROs and weight loss outcomes in determining follow-up attrition at one-year post operatively

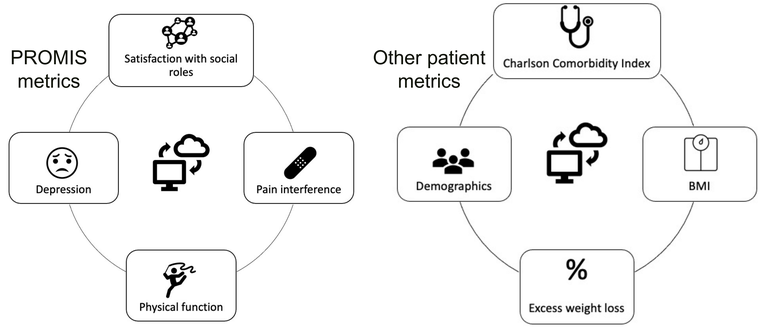
Methods: Population & Data Acquisition

Study Population: LTFU was extracted from our institution's Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) database and was defined as failure to present to clinic within 9-18 months after surgery based on the standard MBSAQIP definition of LTFU.

MBSAQIP + PROMIS Data set
N = 544



Methods: Patient Reported Outcomes Measurement Information System (PROMIS)



- PROMIS measures are routinely collected pre- and post-operatively using a series of validated computer adaptive tests. administered in the waiting area via iPad and/or pushed electronically prior to appointments via the MyChart patient health portal.
- Metrics other than PROs for all patients were extracted from an institutional redcap database.

Analysis:

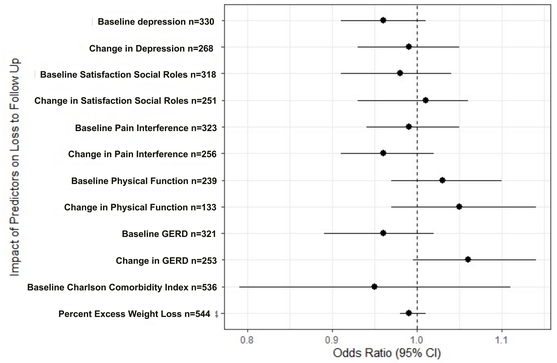
A series of univariate logistic regressions tested whether baseline PROs or change in PROs from baseline to six-months postoperatively predicted LTFU at one year.

Results: Patient Characteristics

Demographic Data of Cohort: Summary of Simple Logistic Regressions			
	Lost	Not Lost	P-Value
Female	64%	77.9%	.02
RYGB	61%	66.7%	.31
Race			.10*
White	86.4%	94.4%	NA
African American	1.7%	1.2%	NA
American Indian or Alaska Native	3.4%	.8%	NA
Asian	0%	.4%	NA
Native Hawaiian or Pacific Islander	1.7%	.4%	NA
Unknown/Not Reported	6.8%	2.8%	NA
Age			NA
Average	42.9	45.1	.16
Range	22-71	19-78	NA

Results:

Baseline PROs and change in PROs at the 6-month post-operative visit and their impact on loss to follow-up.



Results:

- Neither baseline PROs nor change in depression, satisfaction with social roles, pain interference, or physical function were significant predictors of loss to follow-up.
- Similarly, demographics, Charlson Comorbidity Index, BMI, and percent excess weight loss were not significant predictors of follow-up attrition.

Summary & Conclusions:

- The PROs in this study were not significant predictors of LTFU at one-year post operatively.
- Given the known potential impact of LTFU on adverse late post-surgical outcomes, more investigation is needed to identify patients and practices at risk for loss and pathways to facilitate long term post surgical follow up .