Impact of Sleeve Gastrectomy on Postoperative Constipation: A Self Reported Questionnaire-Based Study from a Bariatric Center of Excellence

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Introduction

- Bariatric surgery has a significant impact on dietary intake, metabolism and bowel function, little research exists regarding incidence and treatment of postoperative constipation in bariatric surgery patients
- Constipation, especially in the immediate postoperative period can affect postoperative healing, comfort, respiratory and circulatory function, and quality of life
- Factors associated with postoperative constipation in bariatric patients are dehydration, low fiber intake, decreased activity, and postoperative use of narcotic pain medications
- Patients often complain of constipation during their early and immediate postoperative visits

Methods

- Retrospective review of prospectively collected self-reported survey questionnaire filled out by patients undergoing sleeve gastrectomy at our institution between May 2022 and March 2023 at 4-time intervals viz. pre-op, 1 week postop, 1 month postop and 3-month postop visits
- The data was analyzed to understand the incidence of postoperative constipation at various time intervals and the postop visit at which the number of bowel movements postop matched that of pre-op
- No change in our current bowel regimen instructions was given during the time the survey was undertaken
- The survey administered was modeled based of Rome criteria for functional constipation

Results

A total of 232 patients undergoing sleeve gastrectomy were administered the survey. Analysis of the responses were as follows:

Table 1 Incidence of constipation by Rome criteria at various time points

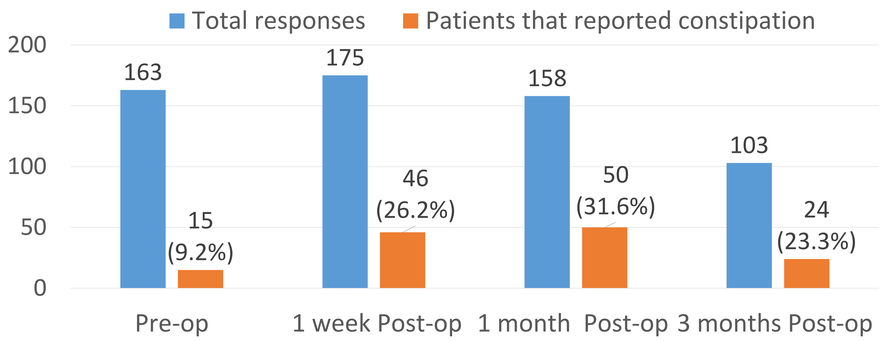


Table 2 Odds of developing post-op constipation

	1 Week post-op	1 month Post-op	3 months Post-op
Entire study population	6.43	8.96	3.86
Patients with baseline constipation	4.6	3.44	6.76

Discussion/Conclusions

- The incidence of postoperative constipation following sleeve gastrectomy remains elevated at almost one in every 4 at 3 months postoperatively thus identifying the burden of this problem in this patient population
- We see that patients who are constipated at baseline do seem to be more at risk for constipation at later time points. Our findings are robust to this as we adjusted to control patients level effects in our modelling
- We have expanded to analyze the risk of constipation with other types of Bariatric surgery preliminarily showing similar correlation
- Following this we have initiated protocols for prevention and treatment for constipation in our practice and will be reporting results of the intervention subsequently

References

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