The use of sleeve gastrectomy for elderly obese patients is safe, and it resolves their comorbidities in most cases

Eliahu Y. Bekhor 1, Noam Peleg 2,nayyera tibi 2, Hila Shmilovich 3, Boris Kirstein 1, Alex Tatarov 1, Issa Nidal 1

Introduction:

- In 2000, 600 million persons were aged 60 years or older
- Obese population is expanding, and so is the utilization of

Aim of the study:

- To compare the short and long-term postoperative outcomes between elderly and younger population

Materials and Methods:

- Prospectively maintained database, under IRB approval
- Laparoscopic Sleeve Gastrectomy at Rabin Medical Center in 2009 and 2022
- Total patients 895
- 85 patients over 60 years old (Elderly Group), and a control group of 810 patients between 18 and 59 years old

Result:

- The elderly group had a higher frailty index according to the Memorial Sloan Kettering Frailty Index (mean, 1.68 vs 0.77)
- Mean age was 64 vs 39 years.
- Co-morbidities rates were significantly higher for the elderly group: Diabetes mellitus (49% vs 24%), Hypertension (73% vs 25%), Obstructive sleep apnea (21% vs 10%), Dyslipidemia (66% vs 33%).
- Perioperative course was similar for both groups in terms of 30-day and long term complication rates
- Co-morbidities improved or resolved in the vast majority of patients; DM (100% vs 97%), OSA (100% vs 100%), HTN (93% vs 91%) Dyslipidemia (89% vs 93%).
- Excess Weight Loss were less favorable for the elderly group; 1 year (74% vs 82%), 2 years (72% vs 81%), 3 years (64% vs 76%) and 5 years (53% vs 70%).

Conclusion:

The Use of Sleeve gastrectomy for older patients is safe. Its positive impact on their comorbidities is notable and significant, although sustainable weight loss is not as high as in the younger group

1Division of Surgery, Rabin Medical Center, Campus Hasharon
2Department of Gastroenterology, Rabin Medical Center
3Division of Surgery, Rabin Medical Center, Campus Beilinson

RABIN MEDICAL CENTER
BEILINSON • HASHARON