# Exploring Barriers to Care and Patient Perspectives in Metabolic and Bariatric Surgery

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## Background

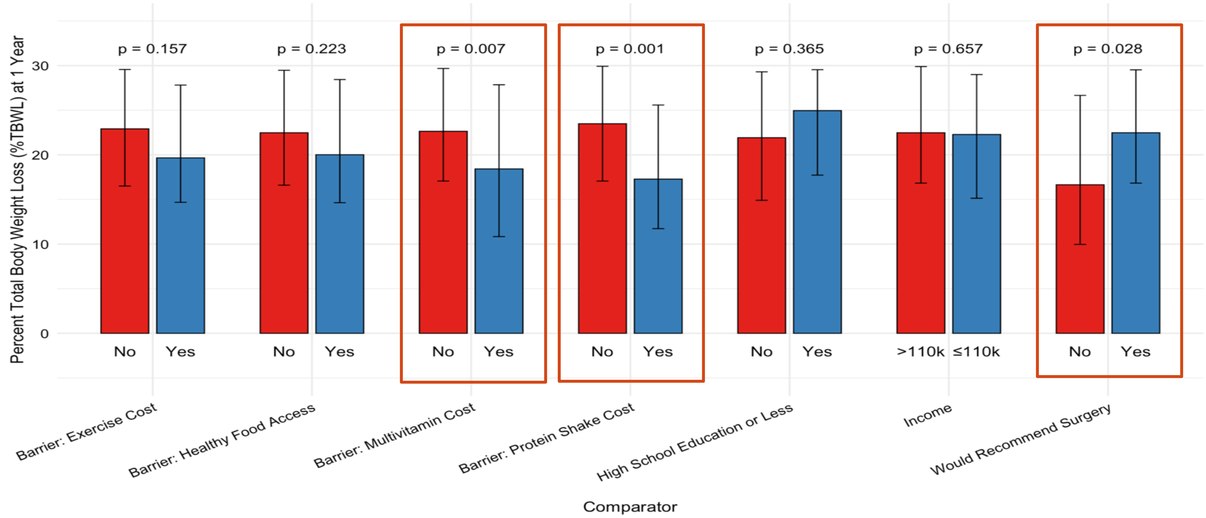
- Metabolic and Bariatric Surgery (MBS) requires extensive patient education and lifelong engagement.
- Although many patients achieve durable weight loss, some experience weight recurrence or adverse effects.
- This retrospective cohort study aimed to evaluate how patient experience and social determinants influence MBS outcomes.

## Methods

- An anonymous electronic or phone survey was distributed to patients in English and Spanish who underwent Sleeve Gastrectomy or Roux-en-Y Gastric Bypass at a single academic institution between 2018–2024.
- Survey domains included preoperative access to care, inpatient experience, and postoperative recovery. Survey responses were linked to patient demographics, comorbidities, procedure type, percent total body weight loss (%TBWL), and 30-day complications. were available.

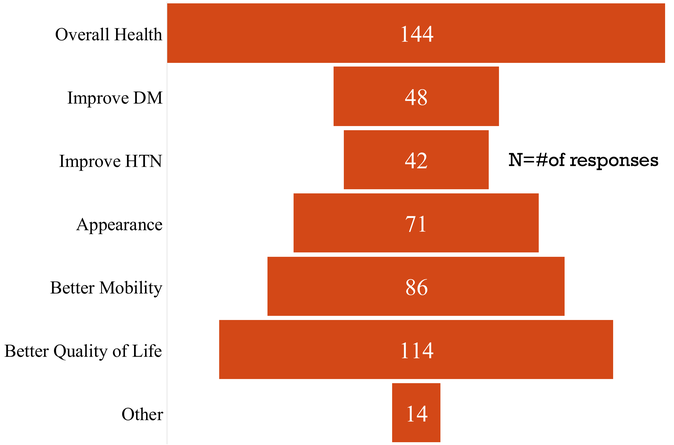
## Results

- A total of 246 responses were analyzed. Respondents were predominantly women (84.1%), English-speaking (94.7%), White (40.7%), non-Hispanic or Latino (52.4%), and low-income for the region (58.8%).
- Common barriers included access to *healthy food* (22%), *multivitamins* (24.8%), *protein shakes* (21.7%), and *gym or exercise equipment* (22%).
- **Patients with low-income were more likely to feel unprepared for discharge** (26.1% vs 6.5%, p=0.001), report **greater-than-expected pain** (30% vs 15%, p=0.016), **lack post-discharge support** (74% vs 87%, p=0.017), and **experience readmission** (4.6% vs 0%, p=0.043).
- Overall, 89% of patients would recommend surgery to their loved ones, 4% were neutral, and 6% would not recommend. Patients who would recommend surgery had higher %TBWL (22.5% vs 16.6%, p=0.014).




## Conclusions

- Patients with lower income levels were twice as likely to report greater-than-expected postoperative pain and exhibited a readmission rate of 4.6%, in contrast to 0% among higher-income patients.
- Patients citing economic barriers to essential postoperative resources, such as protein shakes and multivitamins, experienced significantly less weight loss.
- Conversely, patients who reported having access to gym facilities or exercise equipment experienced a 21% shorter postoperative length of stay.
- These results underscore the critical need to assess and address social determinants of health within the context of MBS.




**Other:** Aging and living longer, being able to play with children, and treatment of health conditions: orthopedic issues, kidney transplant, sleep apnea, GERD, pre-diabetes, pregnancy, NASH.

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