



Clinical and behavioral predictors of short-term weight recidivism following bariatric surgery at a military treatment facility

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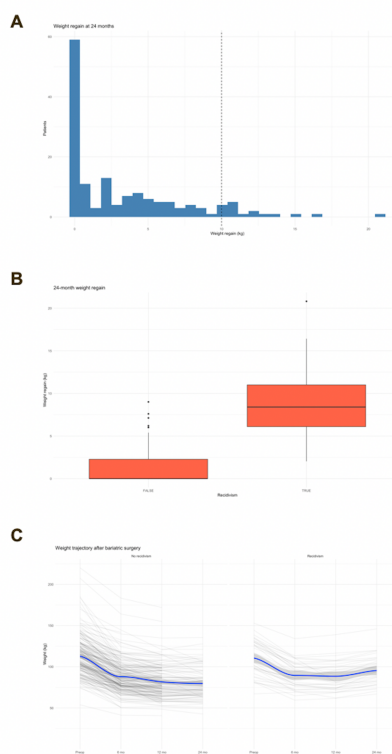
Introduction

- **Background:** Weight recidivism after bariatric surgery remains a recognized challenge that may undermine long-term benefits.
- **Knowledge gap:** The clinical and behavioral predictors of early weight recidivism after bariatric surgery at a military treatment facility.
- **Rationale:** Identifying modifiable predictors of weight regain may allow surgeons and teams to target high-risk patients.
- **Aims:** Evaluate incidence and predictors of short-term weight recidivism following bariatric surgery at a military treatment facility.

Methods

- **Study design:** Retrospective single-center cohort at a military treatment facility (01/2022–12/2024)
- **Population:** Consecutive adults undergoing primary or conversion/revisional minimally invasive SG or RYGB
- **Exclusions:** Incomplete weight data
- **Outcomes:** Weight recidivism; defined as ≥ 10 kg weight regain from postoperative nadir, or regaining 20% EWL
- **Statistical analysis:**
 - Firth penalized logistic regression was used to identify predictors of weight recidivism.
 - Descriptive statistics and comparative analyses were performed between recidivism and non-recidivism groups

Figures



Disclosures: The authors declare no relevant financial relationships or conflicts of interest. The views expressed herein are those of the authors and do not necessarily reflect the official policy or position of the Defense Health Agency, Brooke Army Medical Center, the Department of Defense, or any agency of the United States Government.

Results

Cohort: n=281 patients overall

- Recidivism occurred in 39 (13.9%) at 24 months

Patients with recidivism:

- Younger on average (43.3 vs 47.9 years; $p=0.08$)
- Less likely married (69.6% vs 90.4%; $p=0.038$)
- Preoperative BMI, comorbidities, procedure type did not differ between groups
- Lower mean reduction in LDL cholesterol (9.8% vs 22.5%; $p=0.026$)

Predictors of recidivism

- Younger age (OR 0.958; 0.90-1.01)
- Married (OR 0.272; 0.07-1.03)
- Adherence to exercise (OR 5.52; 1.7-20.4; $p=0.002$)
- Adequate protein (OR 5.35; 1.68-18.8; $p=0.001$)

Conclusions

- Short-term weight recidivism after bariatric surgery in the military health system is predicted by younger age, marital status, and poor adherence to behavioral recommendations at 12 months
- Social support and lifestyle adherence may have the strongest influence on weight recidivism, suggesting that patients with low exercise or protein intake should be targeted for closer follow-up than standard annual visits.