Analysis of Bariatric Surgery for Weight Loss Management and on Type 2 Diabetes Mellitus Management: A Systematic Review

INTRODUCTION

Obesity is becoming a growing concern worldwide and is now considered to be an epidemic. Health care providers recommend lifestyle modifications and medical interventions as the first-line treatments for obesity. Obesity is defined as having a body mass index (BMI) of 30 kg/m² or greater. Bariatric surgery has been a viable treatment for obesity for many years, however, the long-term effects on weight loss and diabetes are still under investigation. Bariatric surgery is a form of weight loss surgery performed to treat severe obesity. Obesity surgery is becoming increasingly popular due to the rising prevalence of obesity (Wu, Y., Ding, Y., Tanaka, Y., & Zhang, 2016).

METHODS

In the study directly Courcoulas et al., 61 randomized obese participants with Type 2 Diabetes Mellitus were in the intensive lifestyle weight loss intervention for one-year, lower reduced from the average HbA1c levels pre-surgery of 8.62%. The average of the non-surgical group post-implementing the changes in their lives was 7.60%, down from the 8.62% level. A trend that was apparent in the studies was that irrespective of the treatment choice for weight loss, when a patient lost any weight the HbA1c levels also decreased. The main

RESULTS

The studies included in this review, performed follow-up at 1 year, 3 years, and 5 years after surgical procedures. A pooled analysis indicates that the weight loss is maintained in the long-term. After 5 years, a 26% decrease in the risk of mortality due to diabetes and a 26% decrease in the risk of mortality due to any cause occurred. The studies included in this review, performed follow-up at 1 year, 3 years, and 5 years after surgical procedures. A pooled analysis indicates that the weight loss is maintained in the long-term. After 5 years, a 26% decrease in the risk of mortality due to diabetes and a 26% decrease in the risk of mortality due to any cause occurred. Patients with diabetes who undergo bariatric surgery, especially Roux-en-Y gastric bypass, have a lower risk of mortality compared to those who do not undergo surgery. A meta-analysis by Courcoulas et al. (2015) showed that patients who underwent bariatric surgery had a lower risk of mortality compared to those who did not undergo surgery. A meta-analysis by Courcoulas et al. (2015) showed that patients who underwent bariatric surgery had a lower risk of mortality compared to those who did not undergo surgery.

CONCLUSION

In the study directly Courcoulas et al., 61 randomized obese participants with Type 2 Diabetes Mellitus were in the intensive lifestyle weight loss intervention for one-year, lower reduced from the average HbA1c levels pre-surgery of 8.62%. The average of the non-surgical group post-implementing the changes in their lives was 7.60%, down from the 8.62% level. A trend that was apparent in the studies was that irrespective of the treatment choice for weight loss, when a patient lost any weight the HbA1c levels also decreased. The main...