



# Study Shows Gastric Bypass Surgery Effective for Long-Term Weight Loss and Prevention of Diabetes and Hypertension

*Twelve year study shows effectiveness of gastric bypass surgery*

SALT LAKE CITY, UTAH, USA, September 21, 2017 /EINPresswire.com/ -- The findings from a 12-year study following individuals who received gastric bypass surgery were [published recently in the New England Journal of Medicine](#), which demonstrated the long-term durability of weight loss following gastric bypass surgery. The percentage of weight loss/gain among the gastric bypass group changed very little from six to 12 years. The results also showed gastric bypass surgery effective in the long-term remission of diabetes and in preventing the occurrence of diabetes, as well as hypertension and dyslipidemia.

Funded by the National Institute of Diabetes and Digestive Kidney Diseases at the National Institute of Health (NIDDK/NIH), the study was a joint effort by Intermountain Healthcare, University of Utah School of Medicine, St. Mark's Hospital, and Rocky Mountain Associated Physicians in Salt Lake City.

In total, 1,156 subjects consisting of patients who initially had gastric bypass surgery and two, severely obese non-surgical comparison groups, participated in the study. Clinical examinations occurred at baseline, two, six and 12 years. While body weight had very little change over 12 years in the non-surgery comparison groups, the gastric bypass group lost 35 percent of their initial weight at two years, 28 percent at six years and 27 percent at 12 years. For gastric bypass patients who had diabetes prior to their weight loss surgery, 75 percent of these patients had a remission of their diabetes at two years follow-up, and at 12 years, 51% of these patients were still in remission. The risk of becoming diabetic was 92% less among the participants who had had gastric bypass surgery when compared to the non-surgery participants. Similar favorable findings were found in the gastric bypass surgery group compared to the non-surgery participants with regards to high blood pressure and high cholesterol.

"The results of this study demonstrated the long-term durability of weight loss following gastric bypass surgery," said Ted Adams, PhD, study lead and Intermountain Healthcare researcher. "The percentage of weight loss among the gastric bypass groups changed very little from six to 12 years. The results also show gastric bypass surgery is effective in the long-term remission of diabetes and is very effective in preventing the occurrence of diabetes."

"Based upon the findings of this study, gastric bypass appears to be effective for significant, long-term weight loss and for the treatment and prevention of diabetes. The decision to have gastric bypass surgery should include individual assessment of risks and benefits of the surgery and consultation with one's healthcare provider," said Adams.

"One of the biggest benefits of gastric bypass surgery, beyond long-term weight loss, was the impact on diabetes," said Paul Hopkins, MD, professor of Internal Medicine at the University of Utah Health. "If a patient received the surgery early in the course of diabetes, either before they were taking medication or before they began treating the disease with insulin injections, we found that 73 percent

of patients remained in remission from diabetes.”

“This prospective study is remarkable because of its exceptional degree of follow-up and comprehensive evaluation of the long-term effects of gastric bypass surgery on both weight and metabolism,” said Rod McKinlay, MD, St. Mark’s Hospital. “ In addition to showing durable weight loss and significant improvement in type 2 diabetes, high blood pressure, and cholesterol levels, the study also demonstrated long-term improvements in physical functioning and quality of life for gastric bypass patients.”

Steven Simper, MD, St. Mark’s Hospital, added “This study strongly reinforces the recent position statements from the International Diabetes Federation and American Diabetes Association recommending bariatric surgery for patients with obesity and type 2 diabetes. We encourage patients to thoughtfully consider surgery earlier rather than later as part of a comprehensive treatment approach for type 2 diabetes.”

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