

Bariatrik Cerrahi Sonrası Metabolik Durum

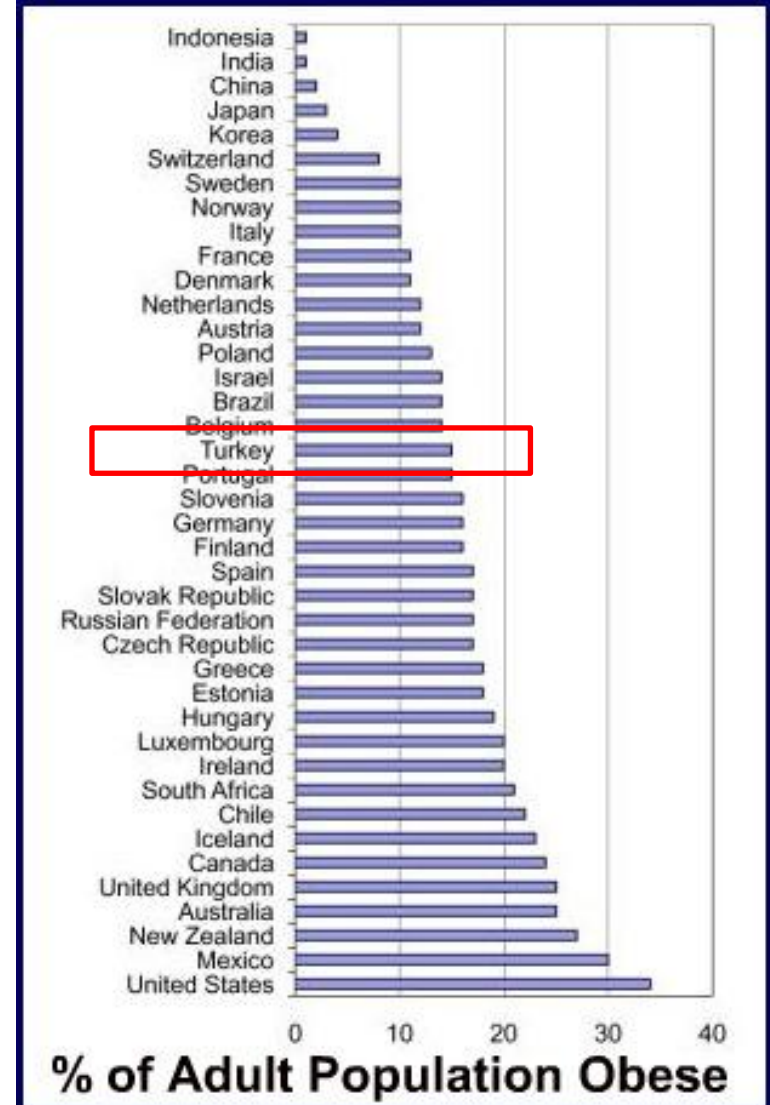
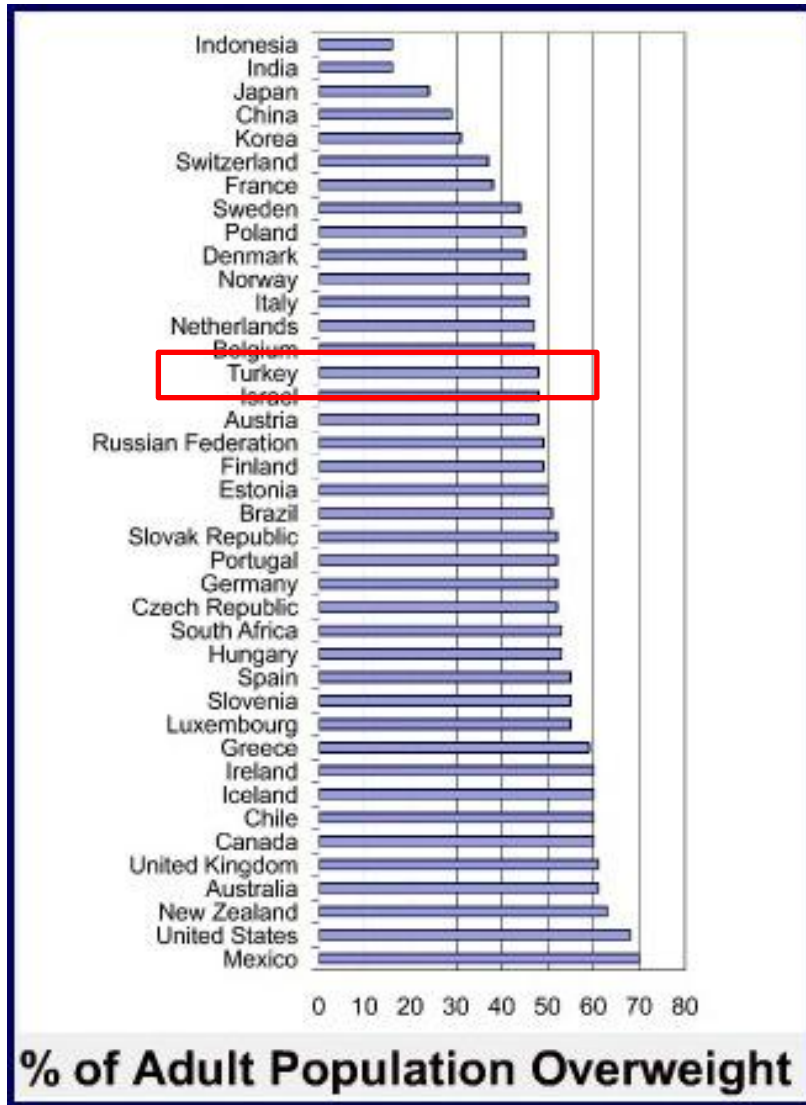
Prof. Dr. Erdiñç Ertürk

Uludağ Üniversitesi Tıp Fakóltesi

Endokrinoloji ve Metabolizma Hastalıkları Bilim Dalı

Metabolik Sendrom Sempozyumu 9 Mart 2013 ANKARA

Obezite epidemisi



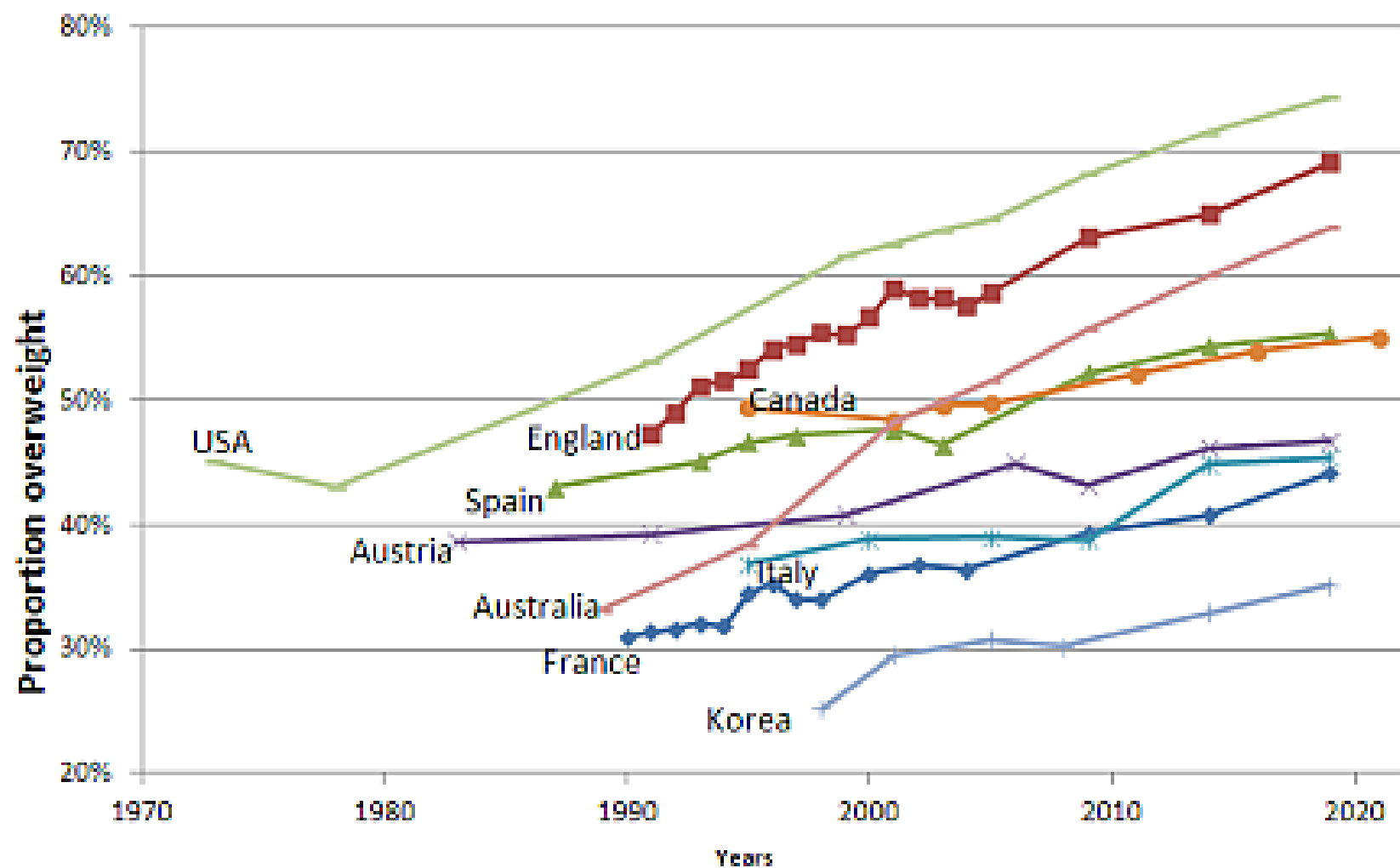
Kilolu sayısı ≈ 1,5 milyar
Obez sayısı ≈ 600 bin

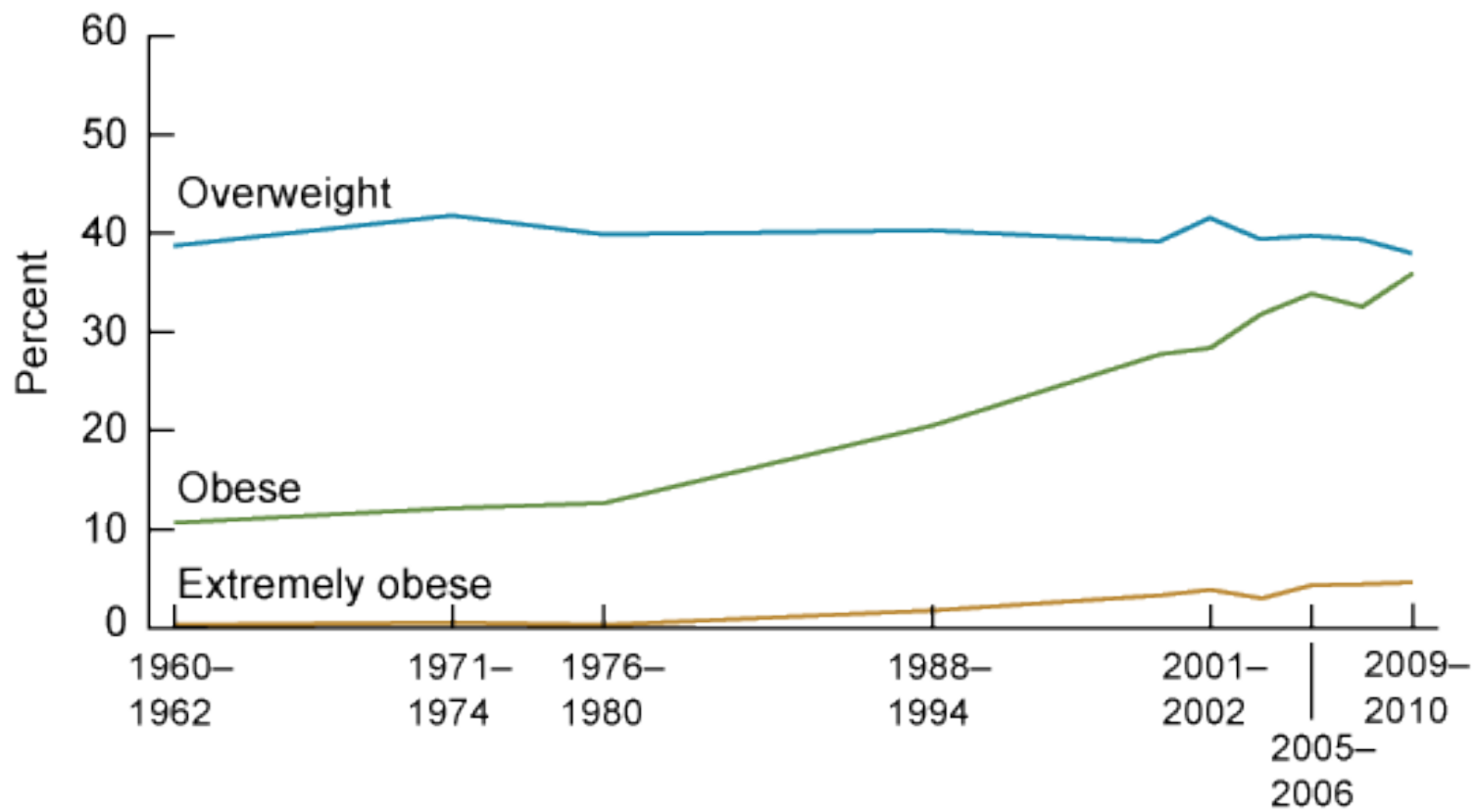
2015

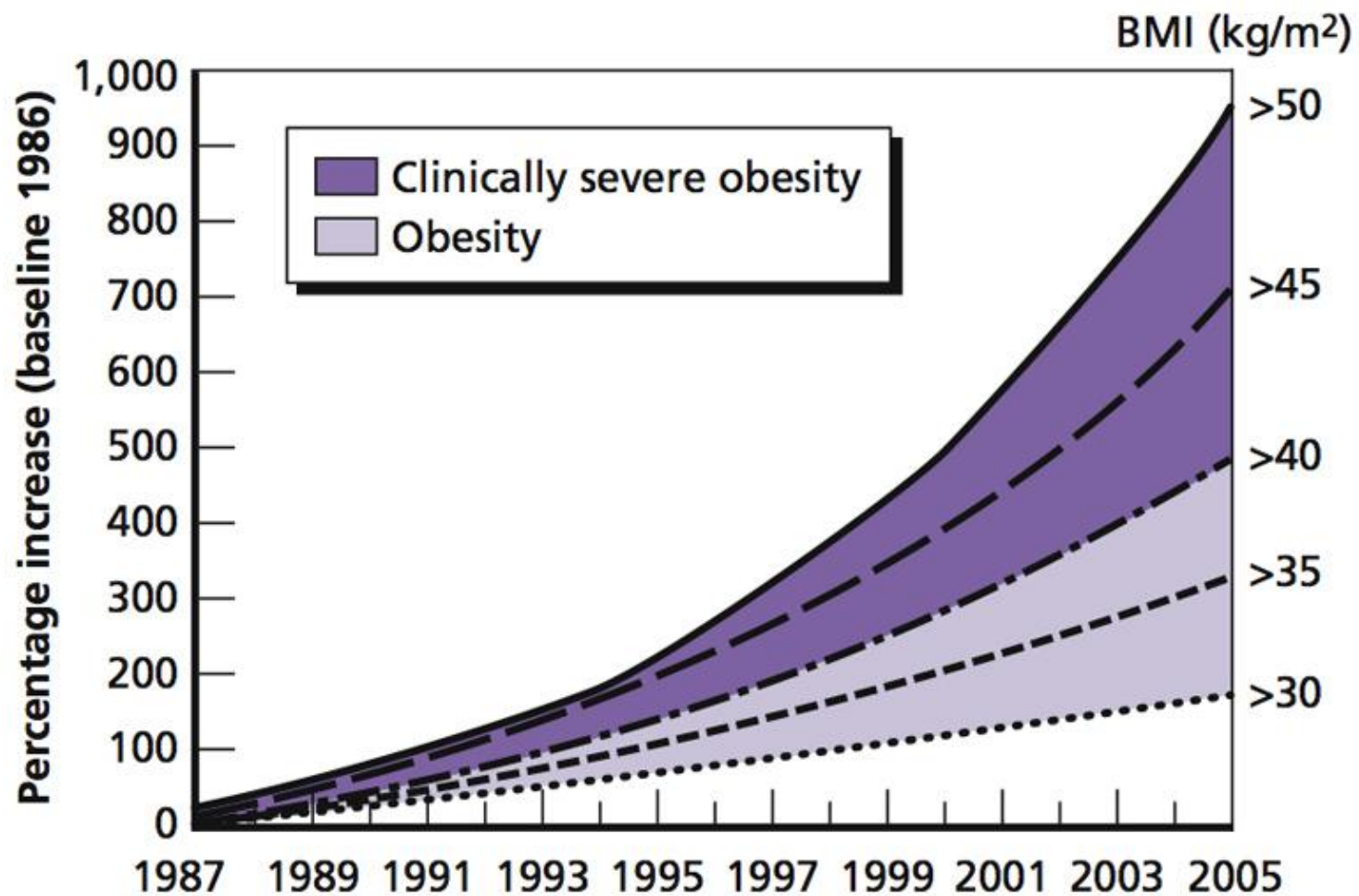
Kilolu sayısı ≈ 2,3 milyar
Obez sayısı ≈ 700 bin

WHO

Past and projected future overweight rates in selected OECD countries







The Greenville Gastric Bypass

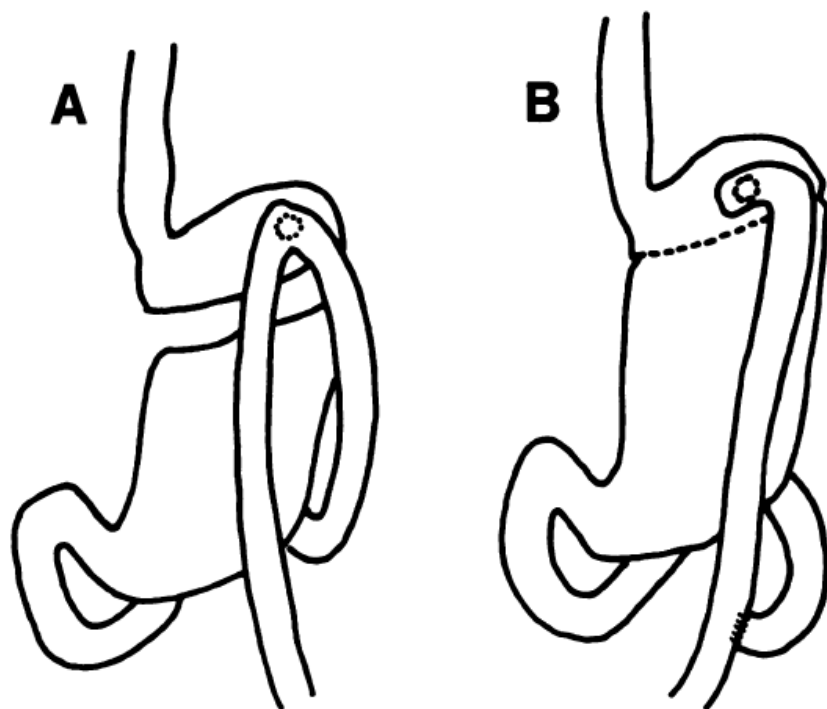
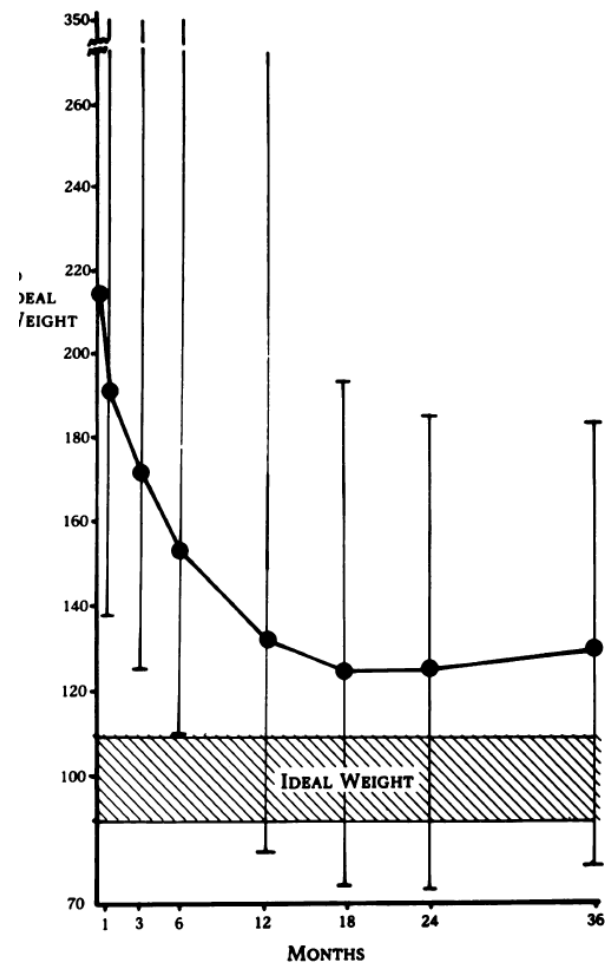
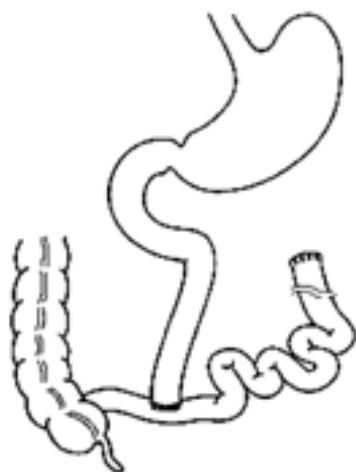


FIG. 1A. Mason and Ito's original gastric bypass. B. The Greenville modification of the gastric bypass.

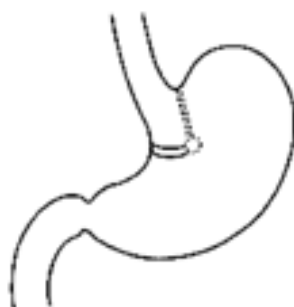


a



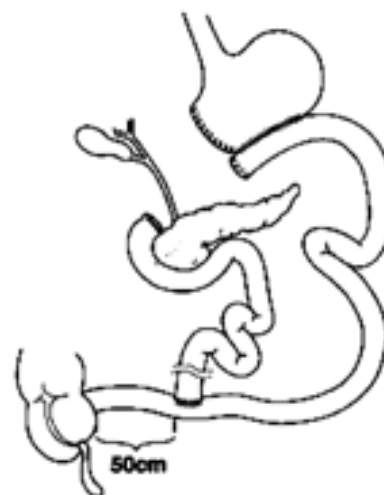
JI Bypass

b



**Vertical Banded
Gastropasty**

c



**Biliopancreatic
Diversion**

d



Duodenal Switch

e

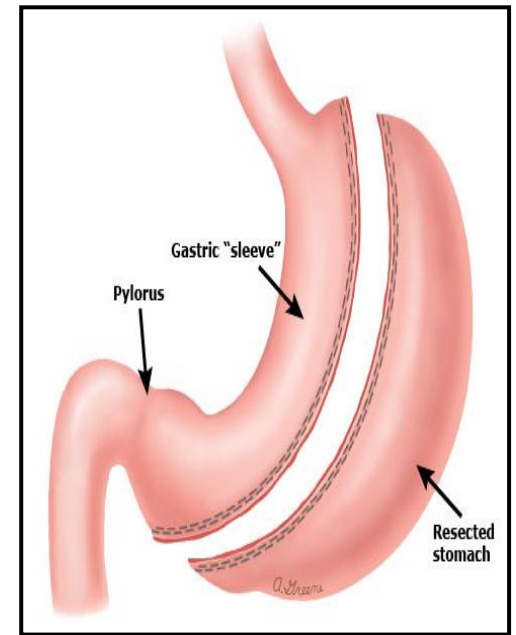
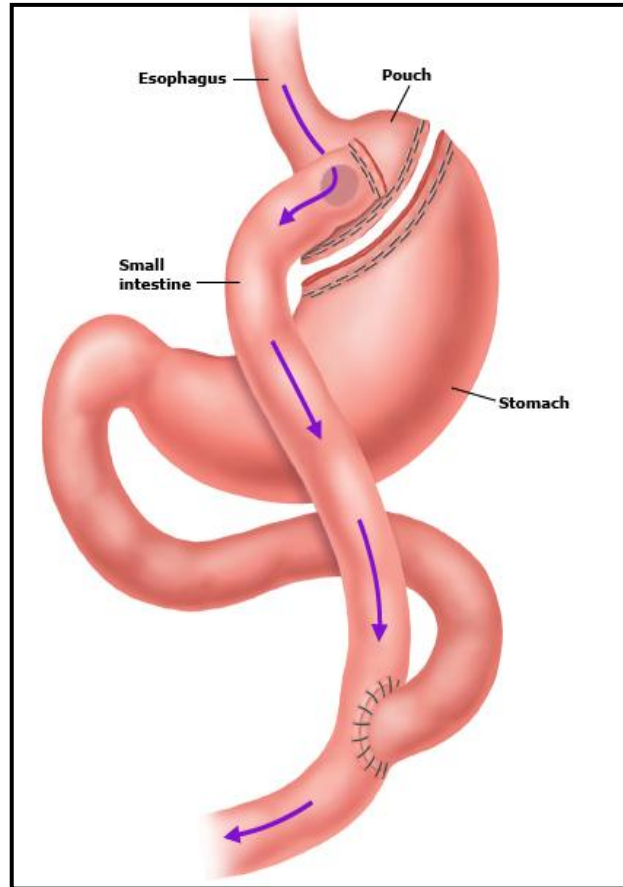
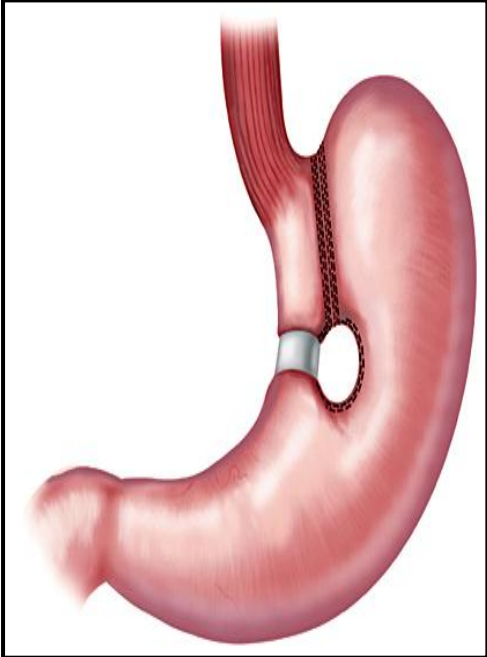
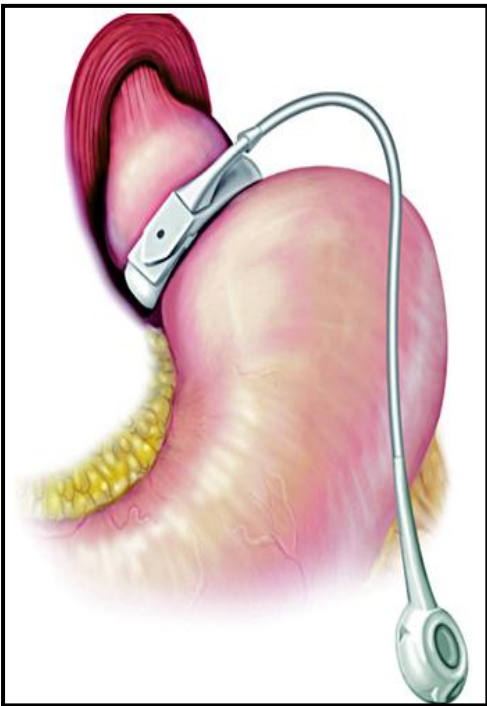


**Roux-en-Y
Gastric Bypass**

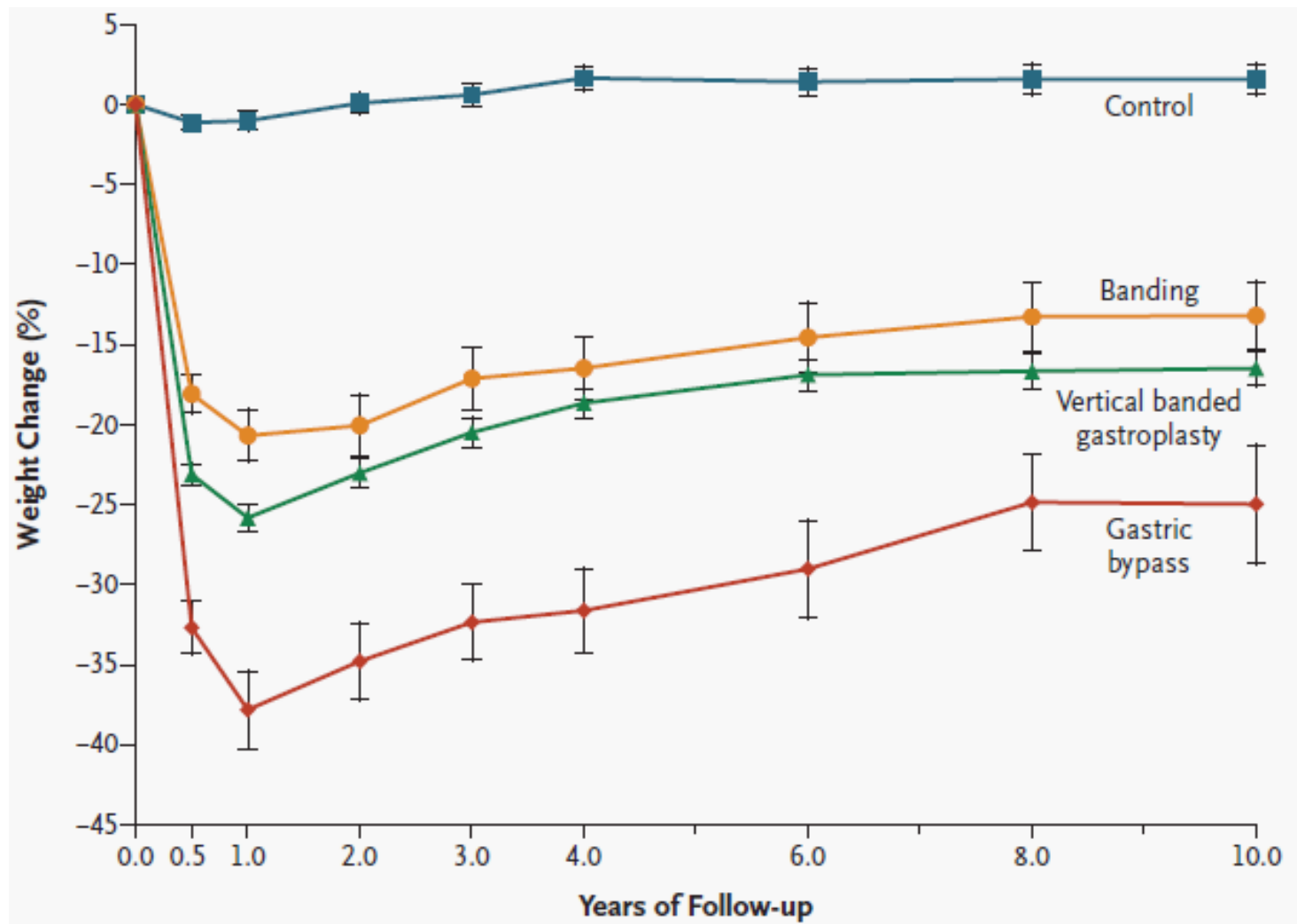
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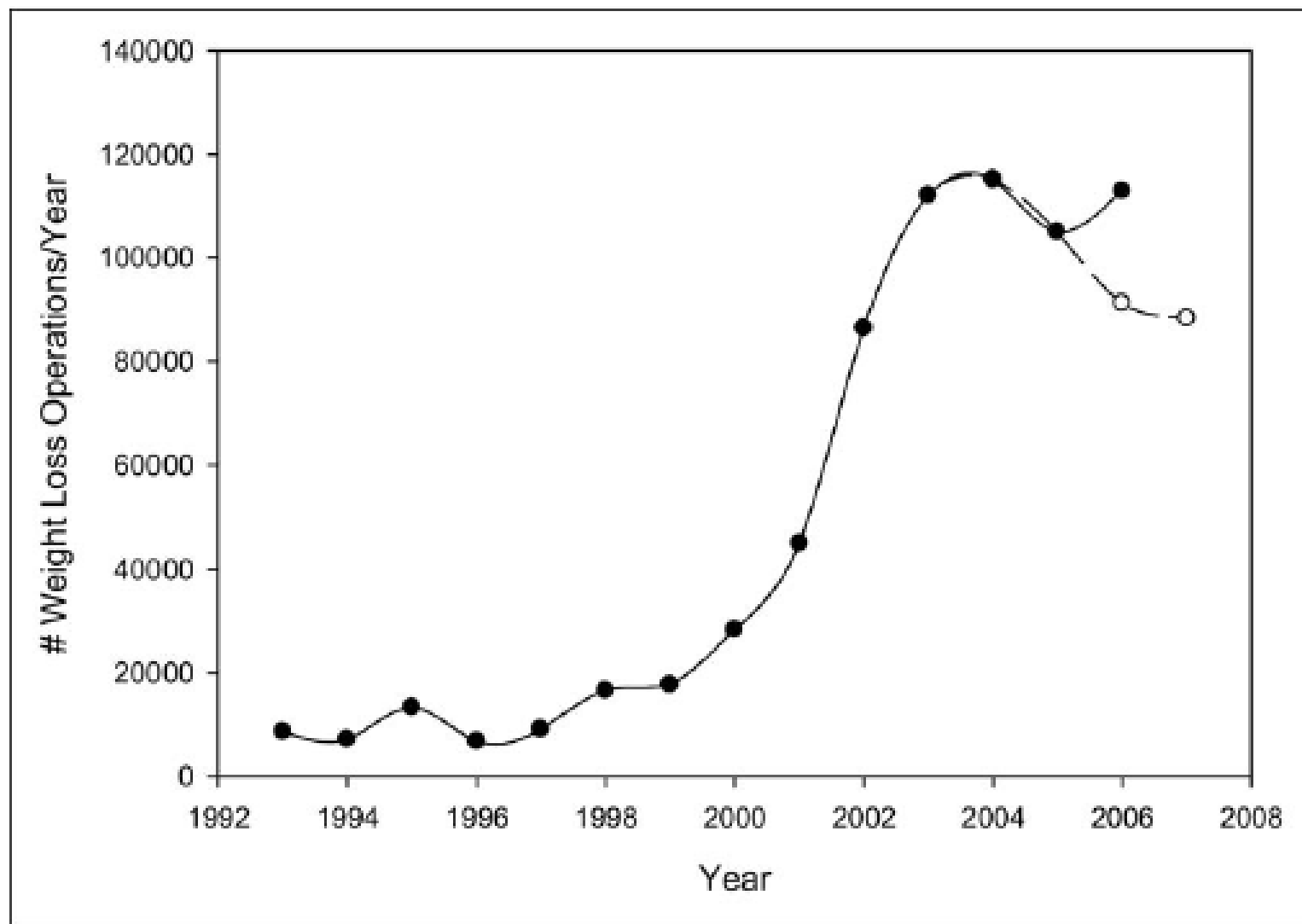
**Adjustable
Gastric Band**



Lifestyle, Diabetes, and Cardiovascular Risk Factors 10 Years after Bariatric Surgery

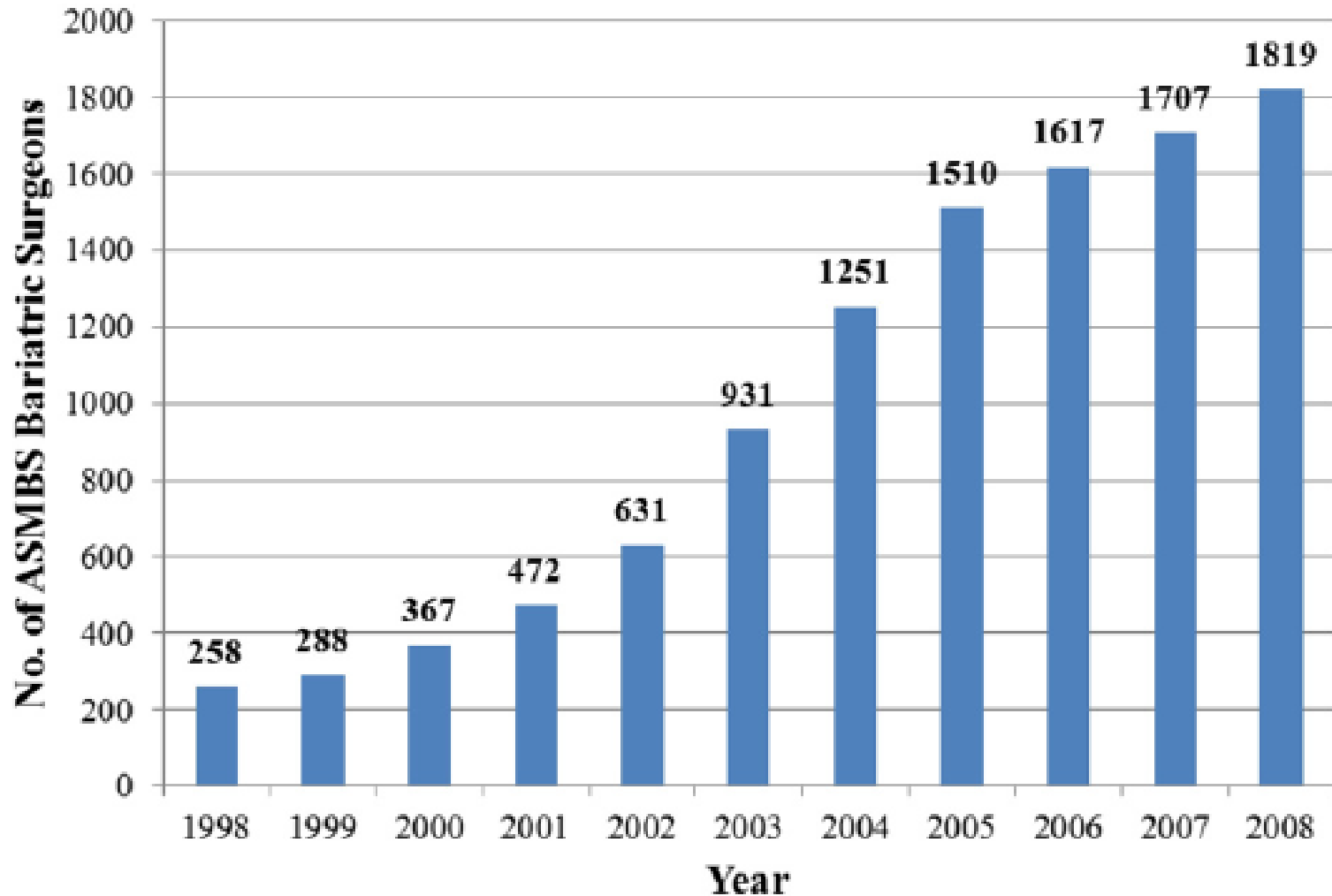


The incidence of bariatric surgery has plateaued in the U.S.



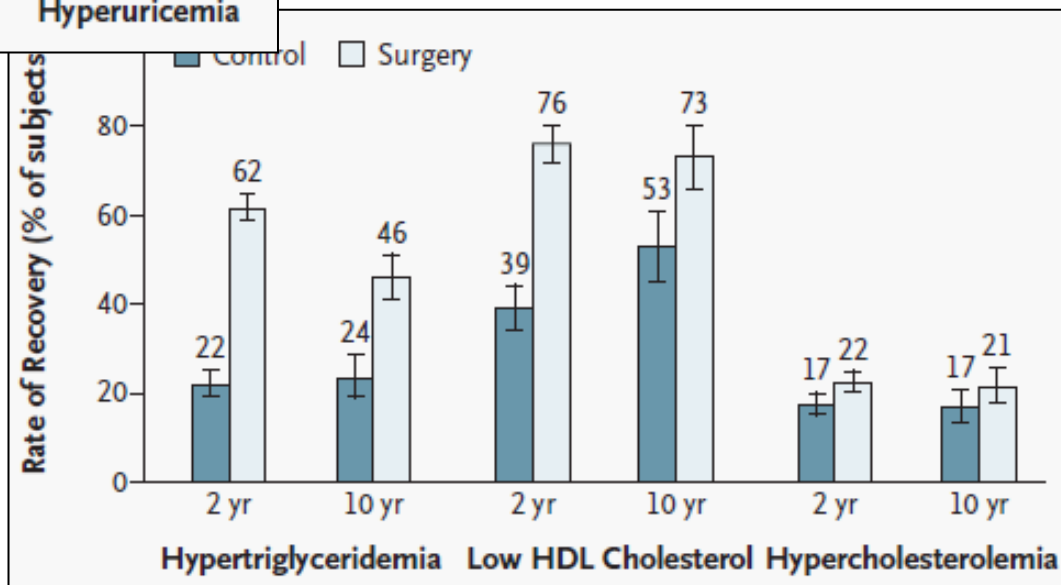
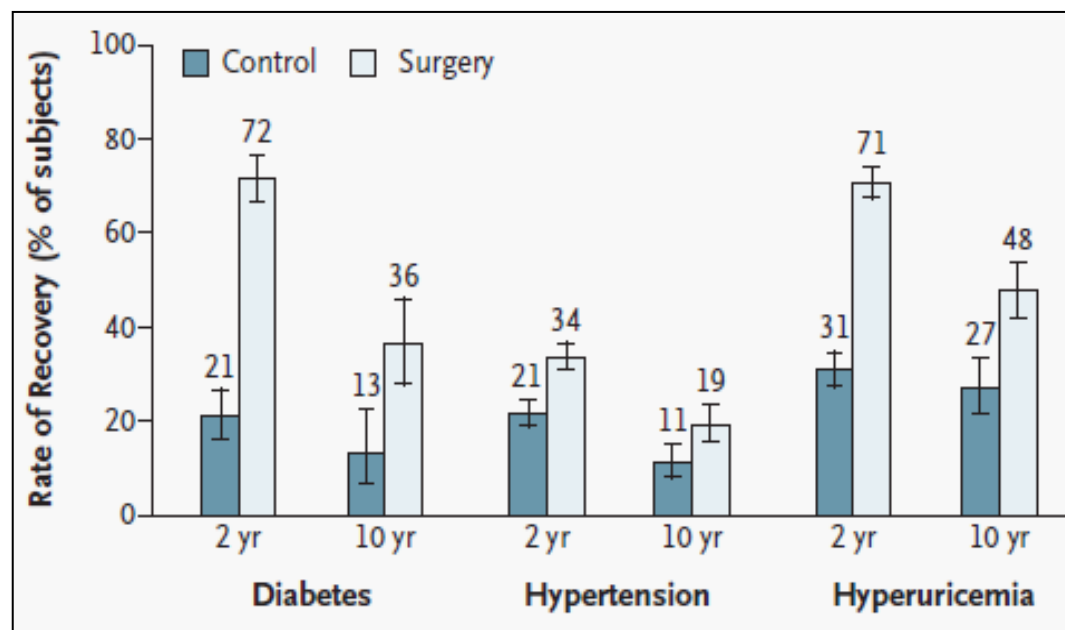
Liningsone EH. Am J Surg. 2010

Number of bariatric surgeons with membership in the American Society for Metabolic and Bariatric Surgery (ASMBS)



Nguyen NT, J Am Coll Surg 2011;213:261–266

Lifestyle, Diabetes, and Cardiovascular Risk Factors 10 Years after Bariatric Surgery

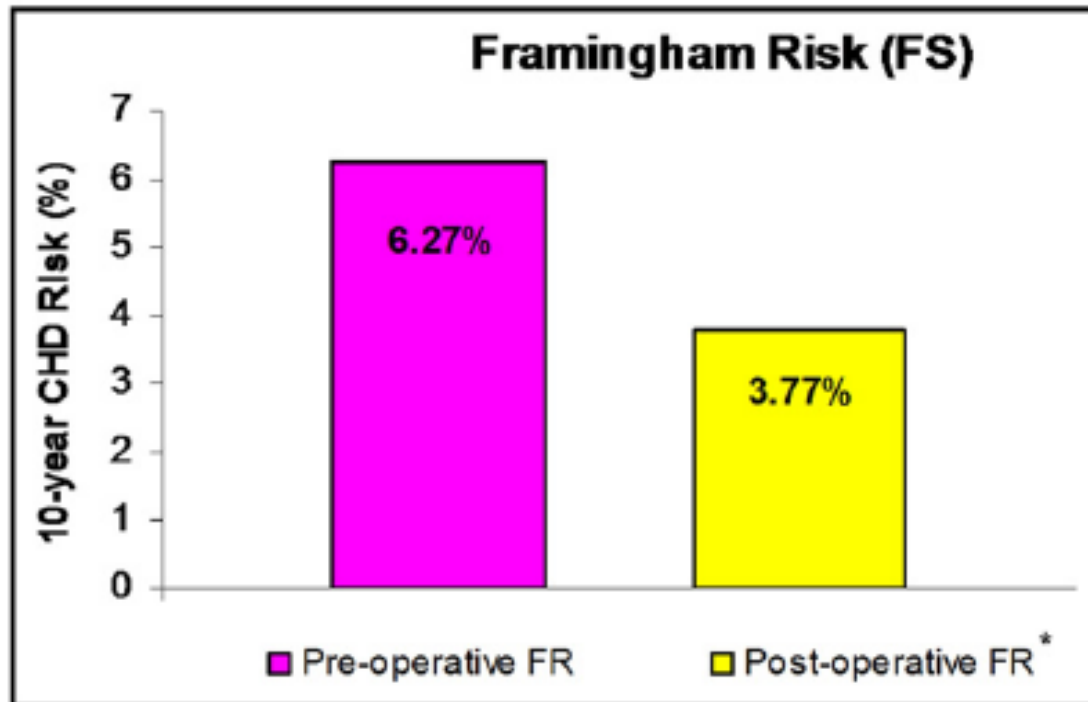


Effect of Bariatric Surgery on Cardiovascular Risk Profile

Table 1
Summary of studies included in review

First Author	Year	Country	n	Follow-Up (Months)	Mean Age (Years)	Women	Baseline BMI (kg/m ²)	Study Procedures
Traditional CV risk factor studies								
Adami ⁸	2005	Italy	461	36	41.5	59%	49	BPD
Ahmed ¹⁰	2009	United States	100	12	42	89%	49	RYGB
Ahroni ¹¹	2005	United States	195	12	43.8	83%	49	LGB
Alexandrides ⁹	2007	Greece	137	26	41.4	77%	46	RYGB and BPD
Anderson ¹²	2007	United States	50	12	43	74%	56	RYGB
Bacci ¹³	2002	Italy	50	12	42	94%	55	LGB
Batsis ¹⁴	2007	United States	197	40	44	8%	51	RYGB
Bowne ¹⁵	2006	United States	106	40	42	80%	44	LGB and RYGB
Brancatisano ¹⁶	2008	Australia	838	36	44	8%	50	LGB
Cottam ¹⁷	2006	United States	362	36	43	85%	56	LGB and RYGB
Cowan ¹⁸	1998	United States	82	12	38	74%	44	RYGB
Fernstrom ¹⁹	2006	United States	347	18	40	77%	42	RYGB and VBG
Frigg ²⁰	2004	Switzerland	295	48	41	79%	47	LGB
Goergen ²¹	2007	Luxemburg	110	24	41	76%	47	RYGB and VBG
Khalaileh ²²	2008	Israel	50	12	37	66%	54	RYGB
Larrad-Jimenez ²³	2007	Spain	343	120	41	80%	45	BPD
Lee ²⁴	2004	Taiwan	645	12	30	6%	45	RYGB and VBG
Maher ²⁵	2008	United States	450	12	42	80%	47	RYGB
Mattar ²⁶	2005	United States	70	15	47	69%	56	RYGB, LGB, and SG
Muller ²⁷	2008	Switzerland	50	48	38	80%	42	RYGB
Lihi	2007	Taiwan	89	0	34	11%	32	VBG
Serra ⁵⁵	2006	Spain	70	12	42	59%	46	RYGB
Torquati ⁵⁶	2007	United States	500	12	45	81%	48	RYGB
Total			16,867	34	42	78%	48	

Effect of Bariatric Surgery on Cardiovascular Risk Profile



Who Would Have Thought It?

An Operation Proves to Be the Most Effective Therapy for Adult-Onset Diabetes Mellitus

- Kilo kaybından çok önce birkaç gün içerisinde diyabette iyileşme görülmektedir
- Hastaların çoğu obez kalmalarına rağmen diyabet iyileşmektedir
- Uzun süreli izlemde hastalar büyük oranda diyabetten korunmaktadır

Weight and Type 2 Diabetes after Bariatric Surgery: Systematic Review and Meta-analysis

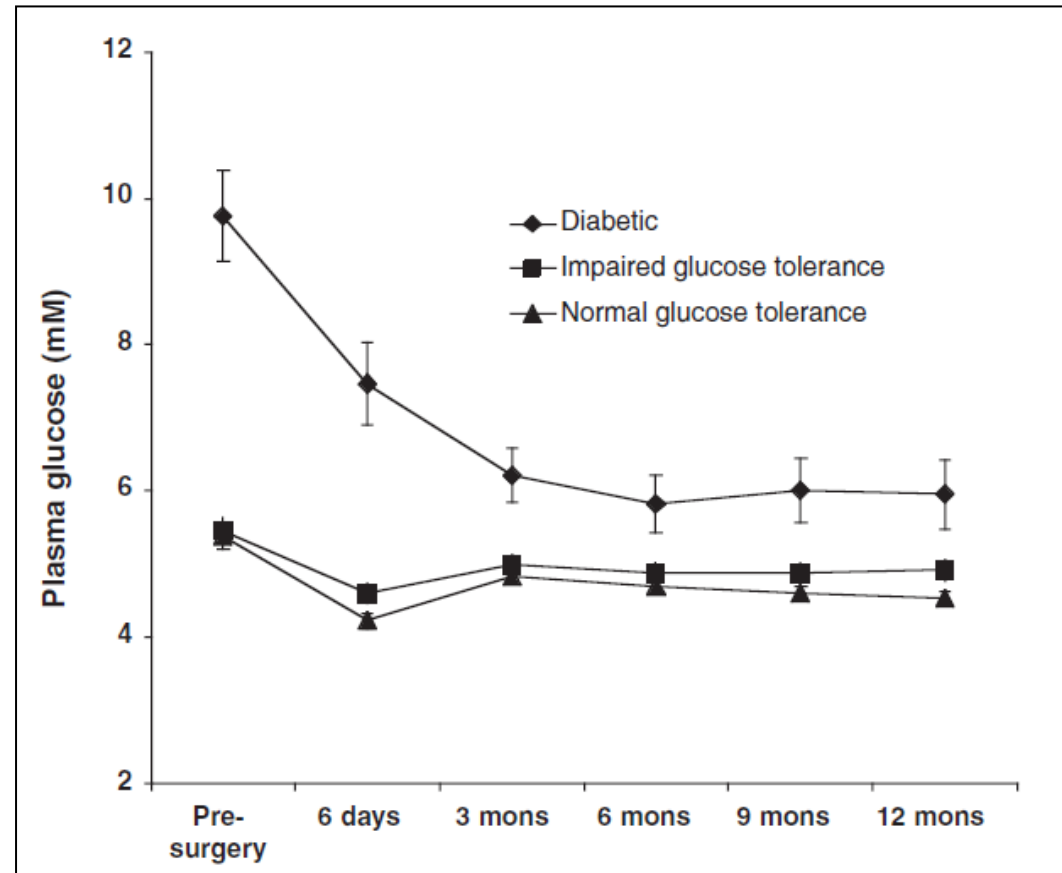
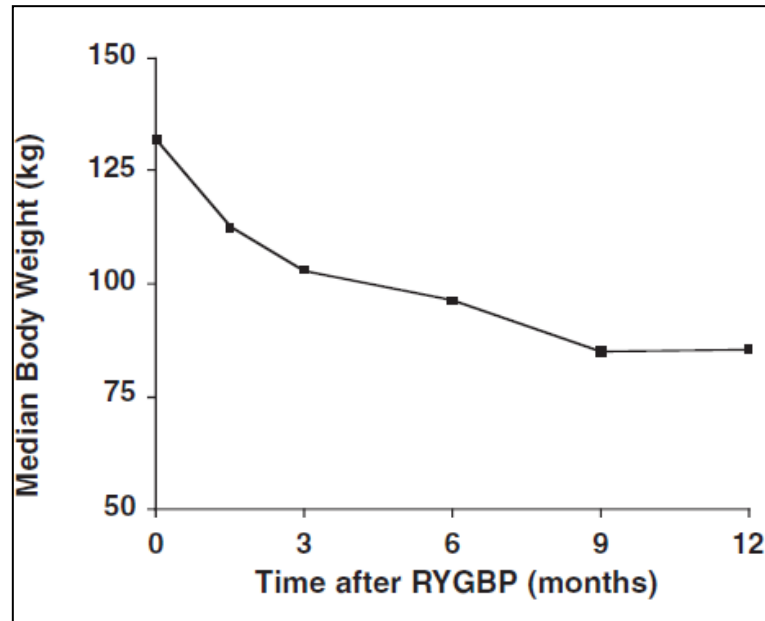
	Total ^a
Europe	45,749
North America	77,167
South America	2701
Australia/New Zealand	3838
Asia	1029
Middle East	4762
	135,246

Buchwald H. AJM, 2009

CLINICAL SIGNIFICANCE

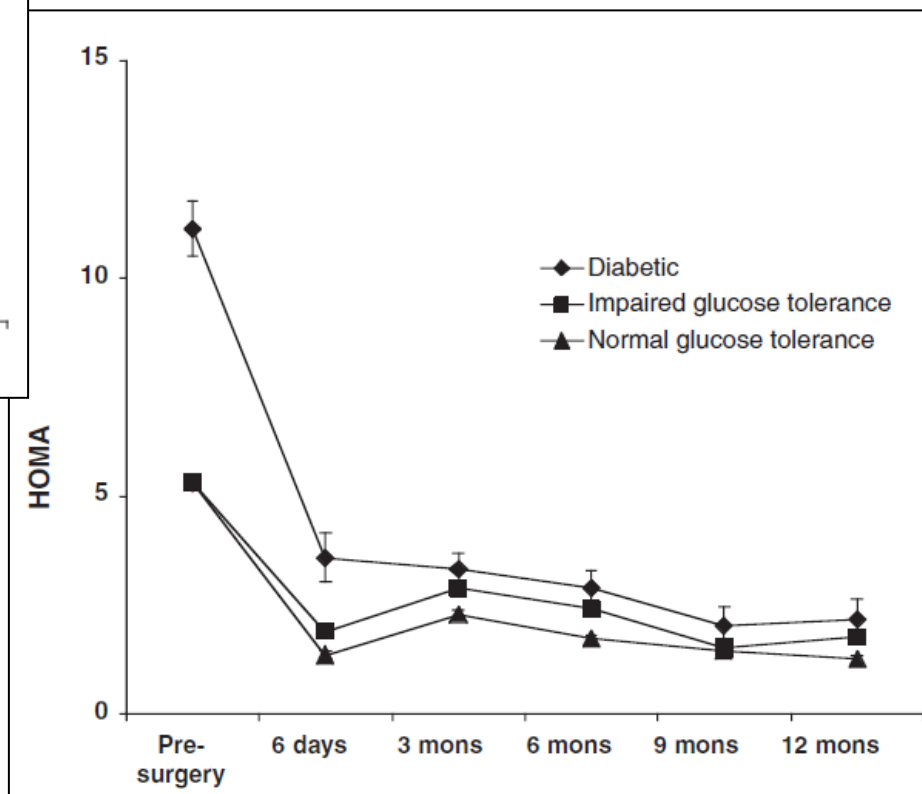
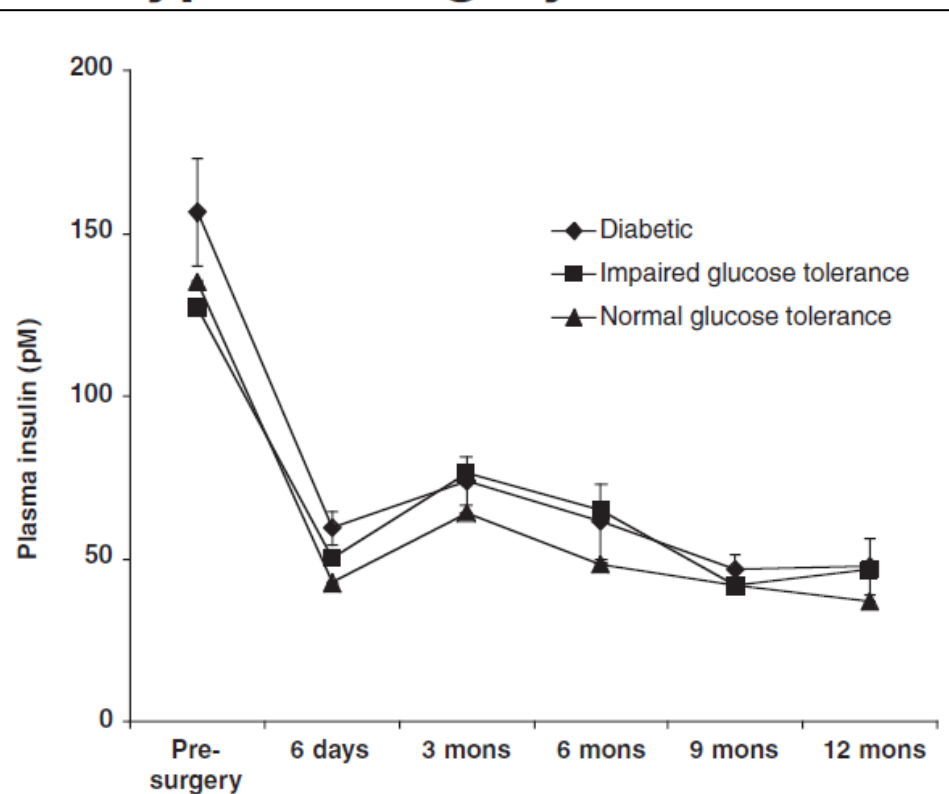
- Type 2 diabetes was resolved in 78% and resolved or improved in 87% of patients undergoing bariatric surgery.
- There was a progressive relationship of diabetes resolution and weight loss achieved as a function of the operation performed: laparoscopic adjustable gastric banding, gastroplasty, gastric bypass, and biliopancreatic diversion/duodenal switch.
- Clinical findings were substantiated by the laboratory parameters of serum insulin, HbA1c, and glucose.
- These findings were maintained for 2 years or more.

Loss of Insulin Resistance after Roux-en-Y Gastric Bypass Surgery: a Time Course Study



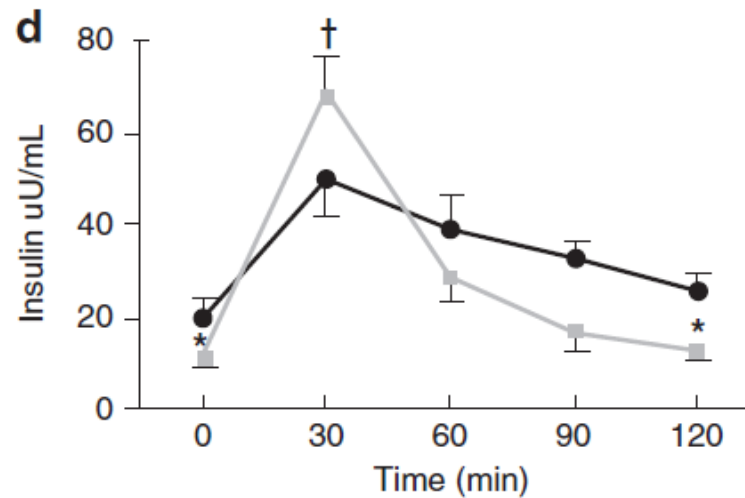
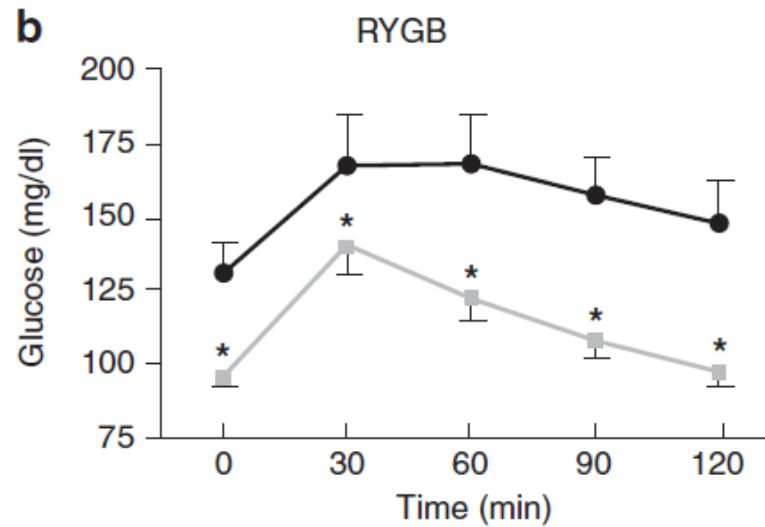
Wickremesekera K. Obes Surg. 2005

Loss of Insulin Resistance after Roux-en-Y Gastric Bypass Surgery: a Time Course Study



Wickremesekera K. Obes Surg. 2005

Glucose insulin responses during the mixed meal tolerance test (MMTT) carried out before surgery and 4 weeks after surgery.



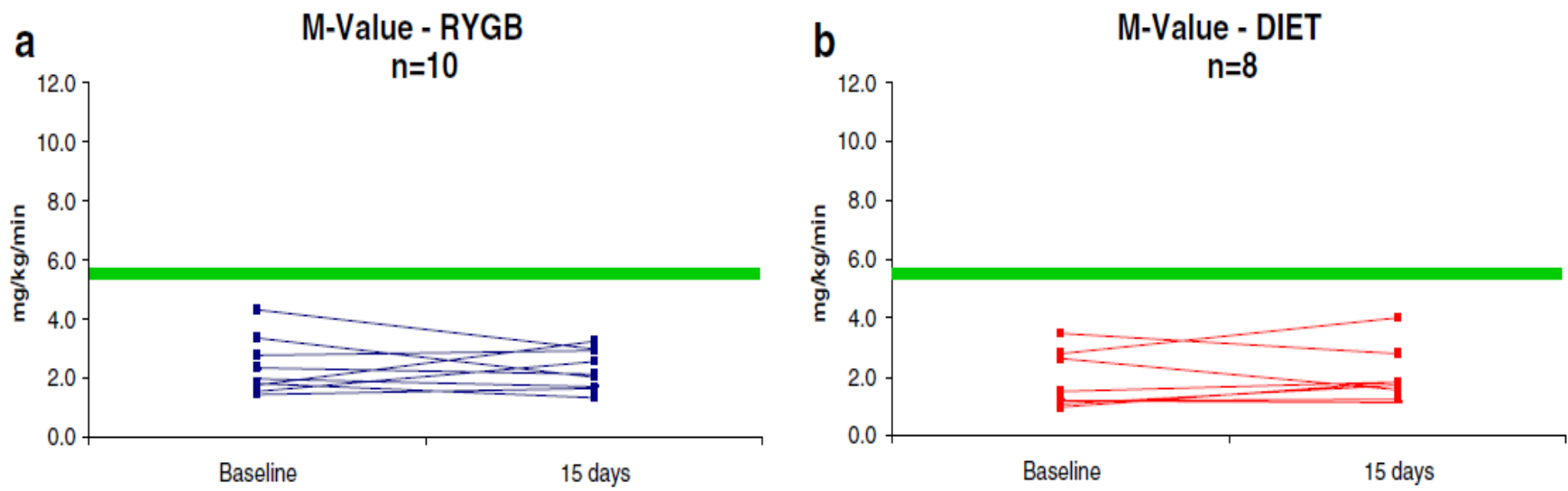
Changes in Body Composition and at Baseline and 14 days

14 Gün

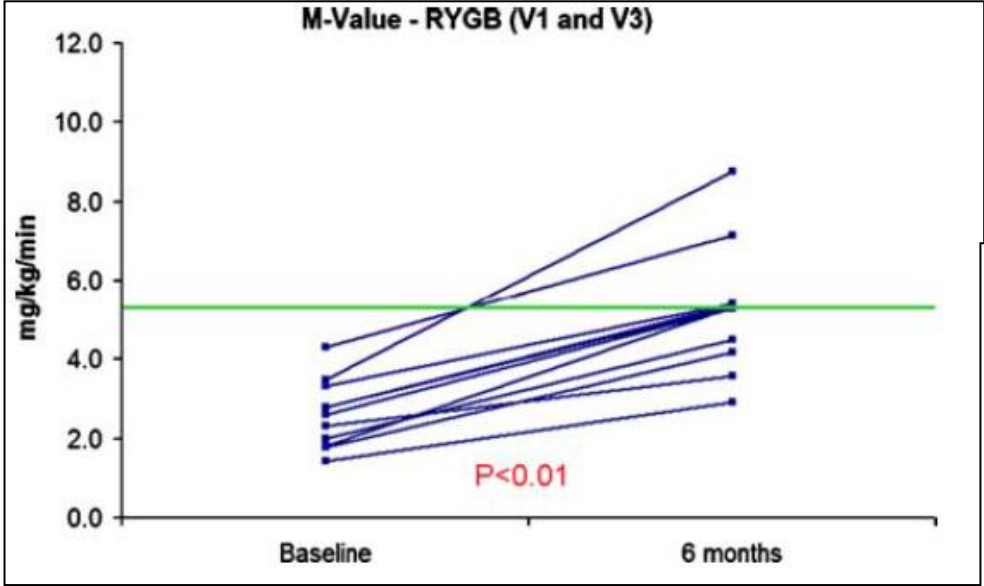
	<i>R</i> YGB (<i>N</i> =12)	Diet only (<i>N</i> =10)	<i>p</i> value
Weight loss (kg)	9.9±2.4	8.2±2.3	0.11
% Excess weight loss	12.7±2.4	10.9±2.8	0.12
% of weight lost as fat	40.4±16.2	29.9±16.8	0.22

Peripheral glucose uptake (M value) by euglycemic–hyperinsulinemic clamp before (baseline) and 14 days after RYGB (a) or caloric restriction

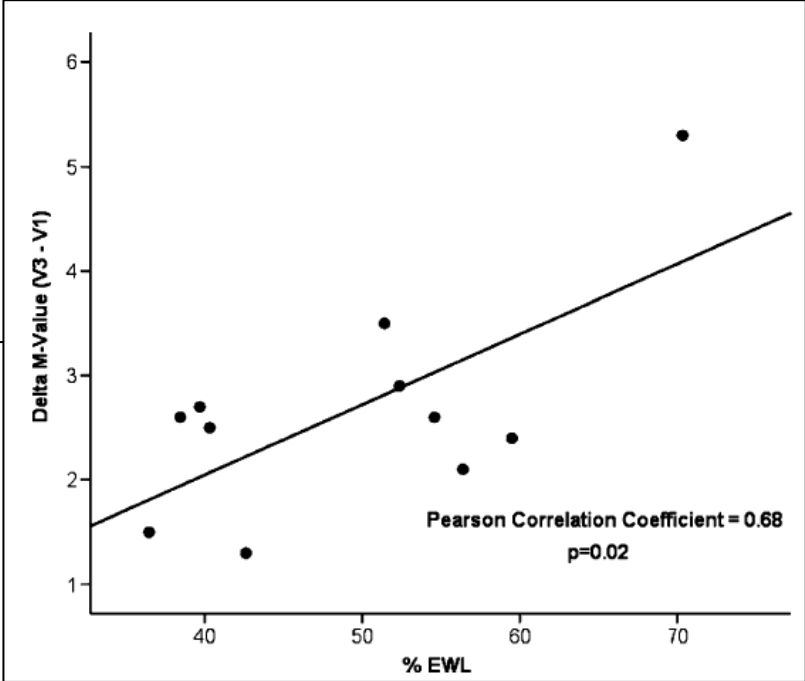
14 Gün



Peripheral glucose uptake (M value) by euglycemic– hyperinsulinemic clamp before and 6 months after RYGB

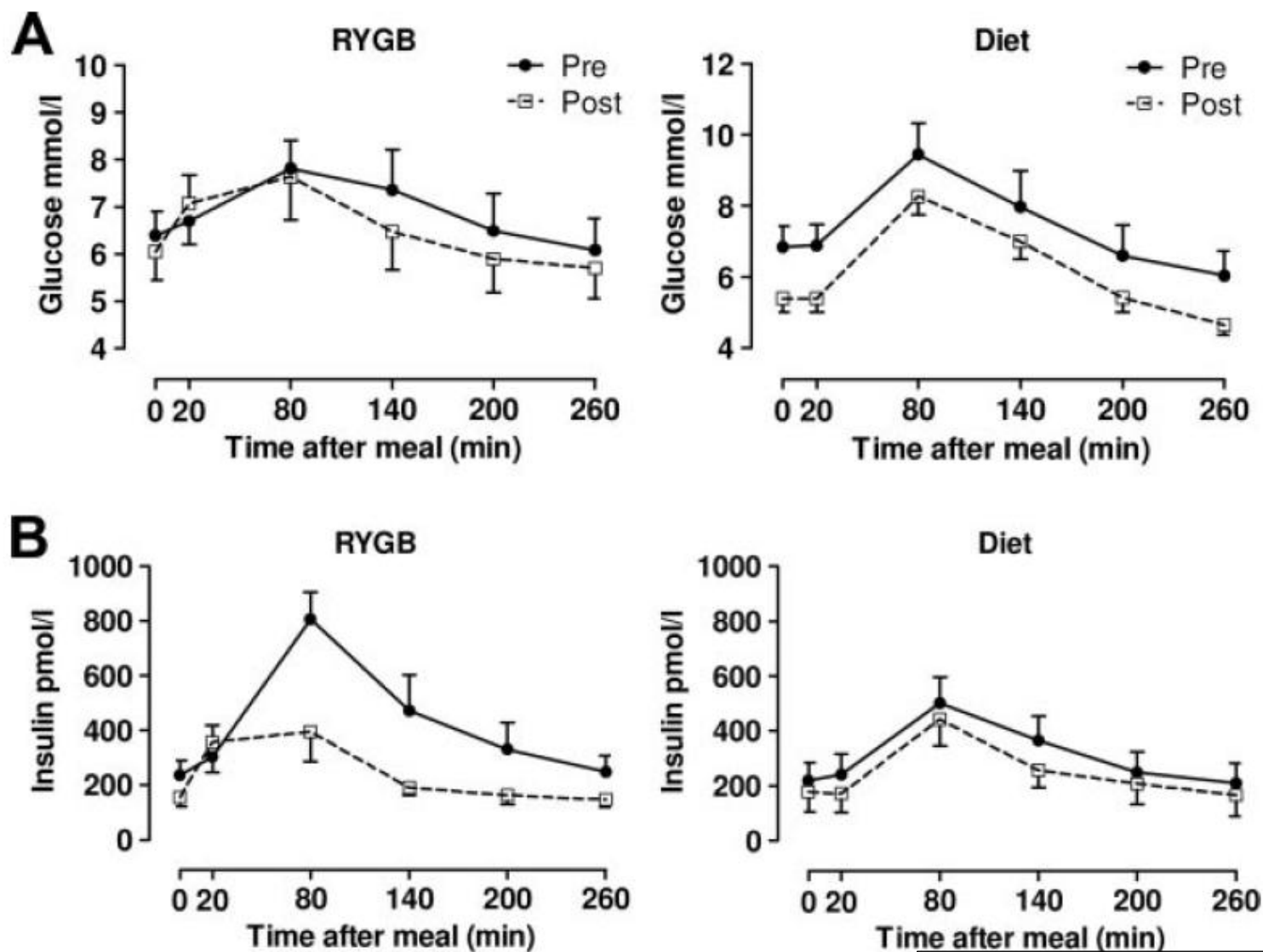


6 Ay

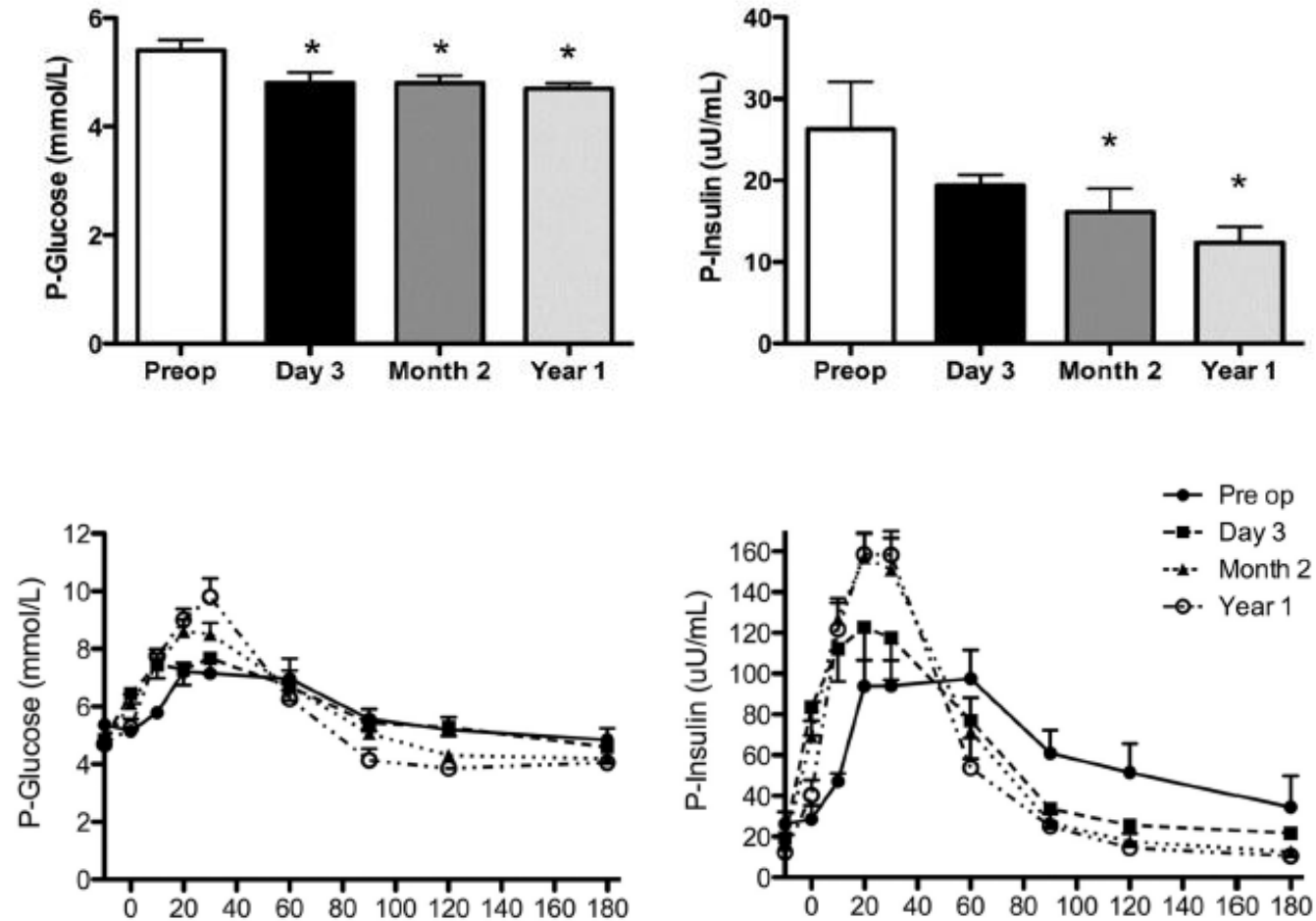


Campos GM. J Gastrointest Surg. 2010

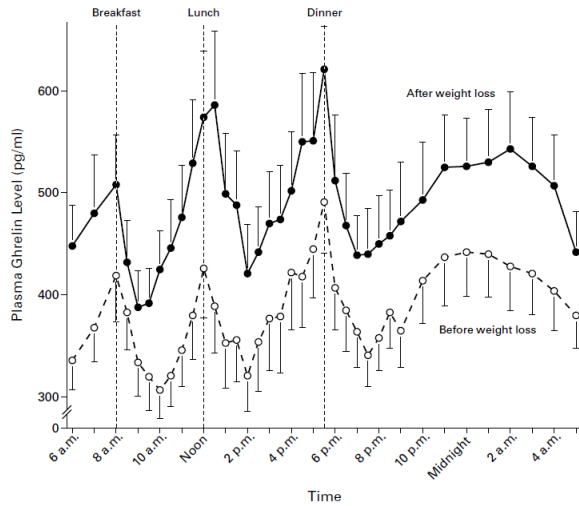
Metabolic responses during a mixed-meal before and after RYGB and diet.
4 days after RYGB or 3 days after a post- bariatric surgery diet



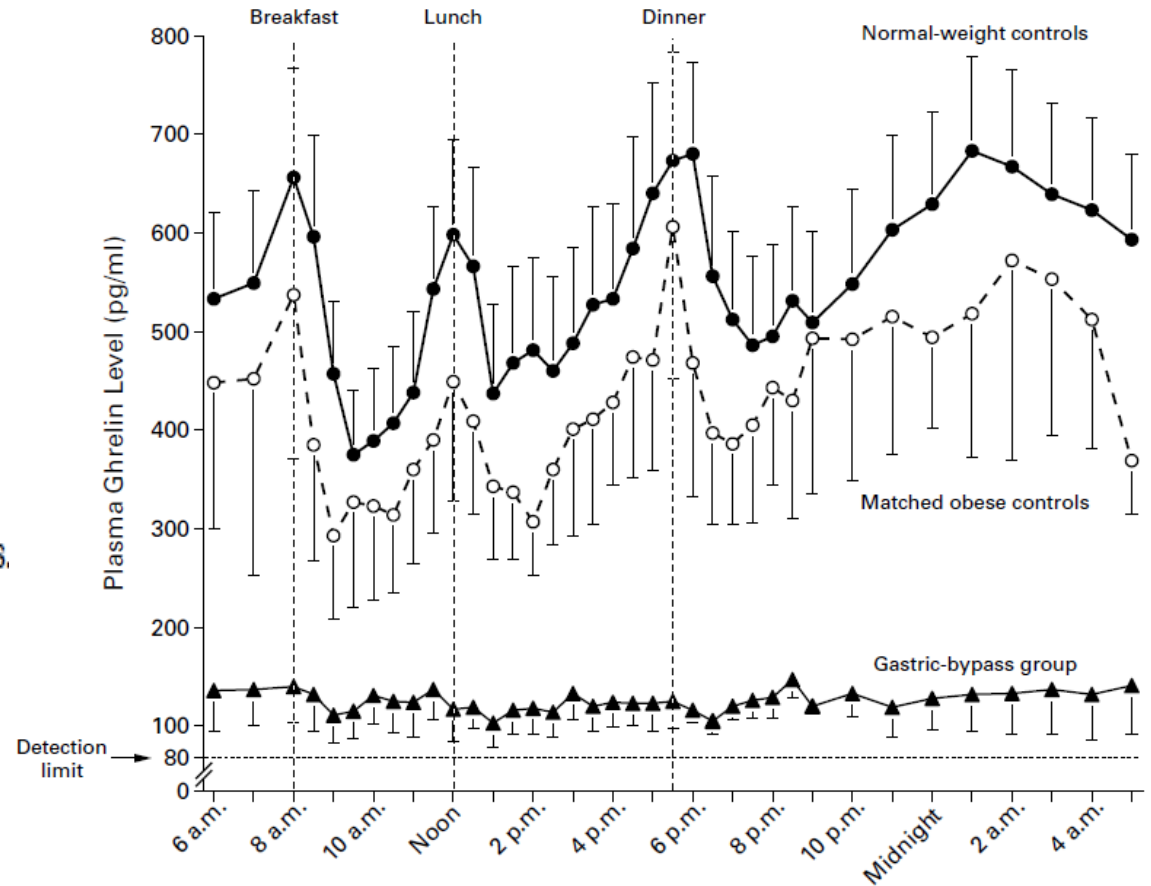
Changes in Glucose Homeostasis after Roux-en-Y Gastric Bypass Surgery for Obesity at Day Three, Two Months, and One Year after Surgery



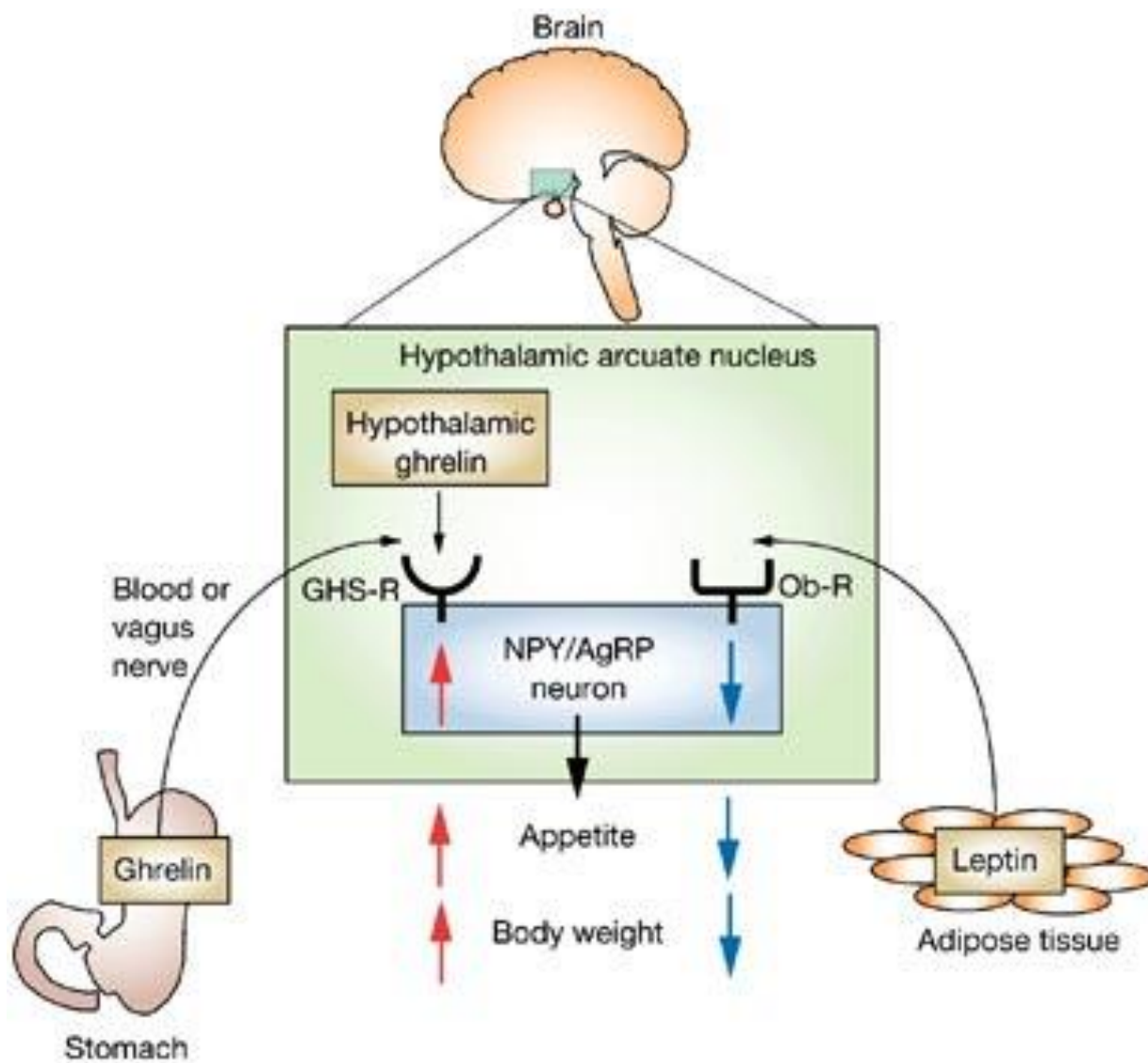
PLASMA GHRELIN LEVELS AFTER DIET-INDUCED WEIGHT LOSS OR GASTRIC BYPASS SURGERY



Subjects before and after Diet-Induced Weight Loss.



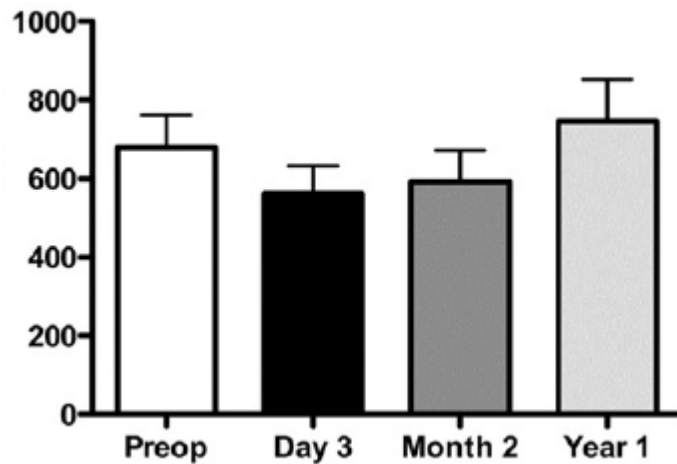
Cummings DE. N Engl J Med 2002



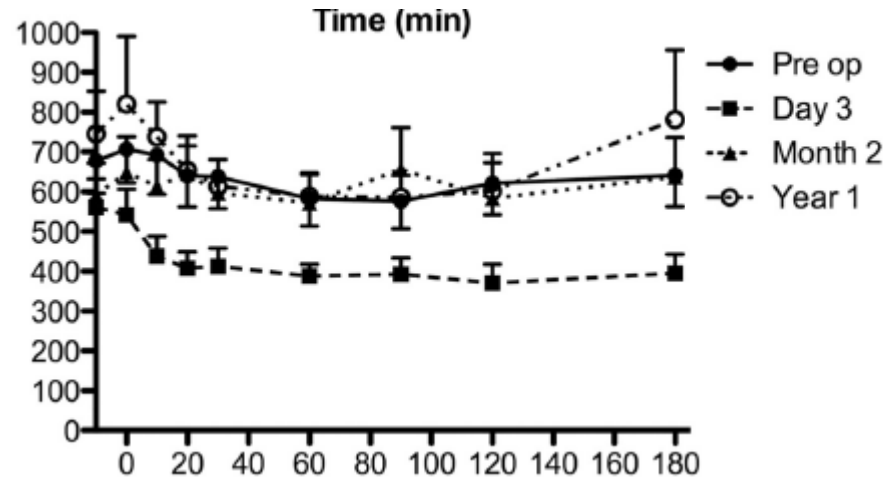
Ghrelin

Before (preop) and 3 d, 2 months and 1 yr after gastric bypass surgery for obesity.

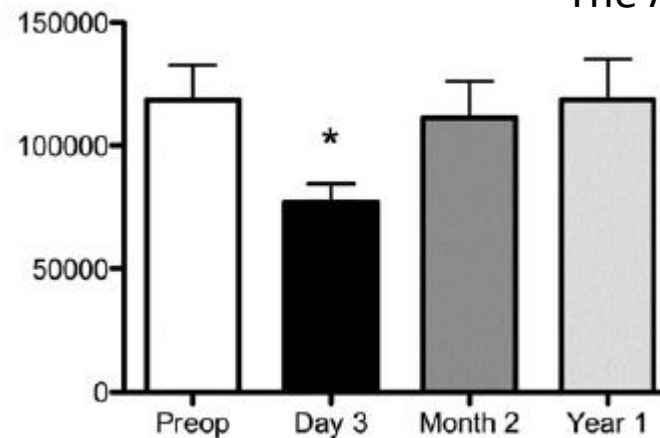
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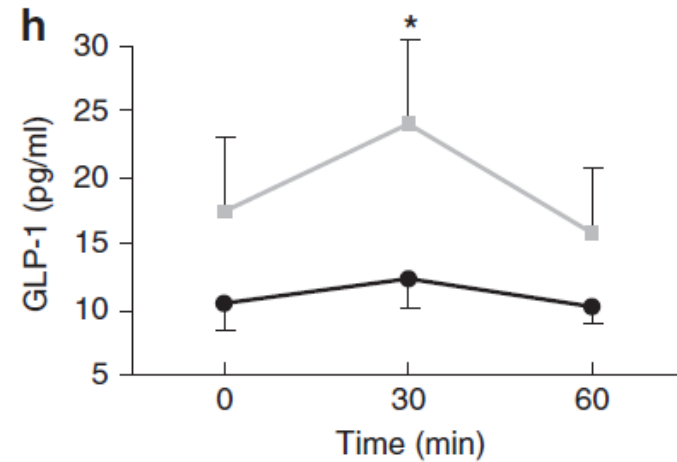
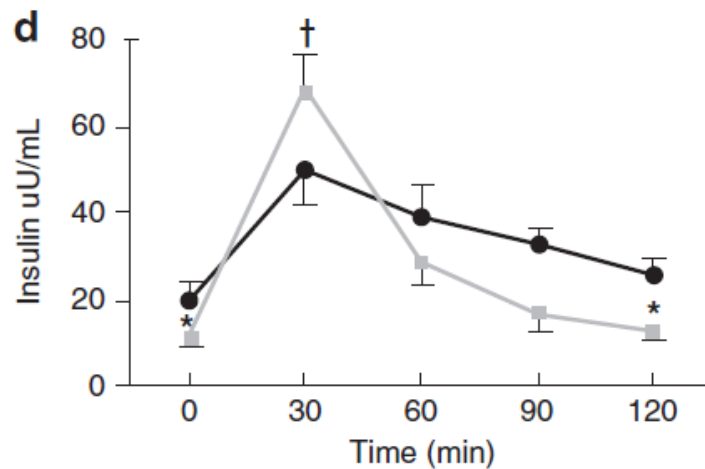
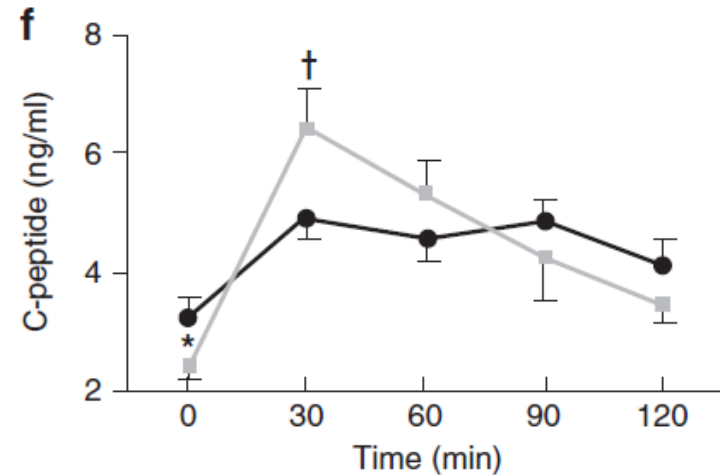
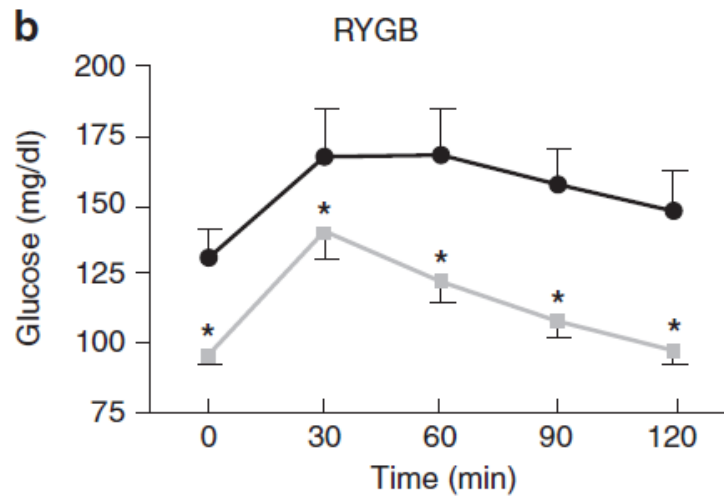
Plasma concentrations after food intake

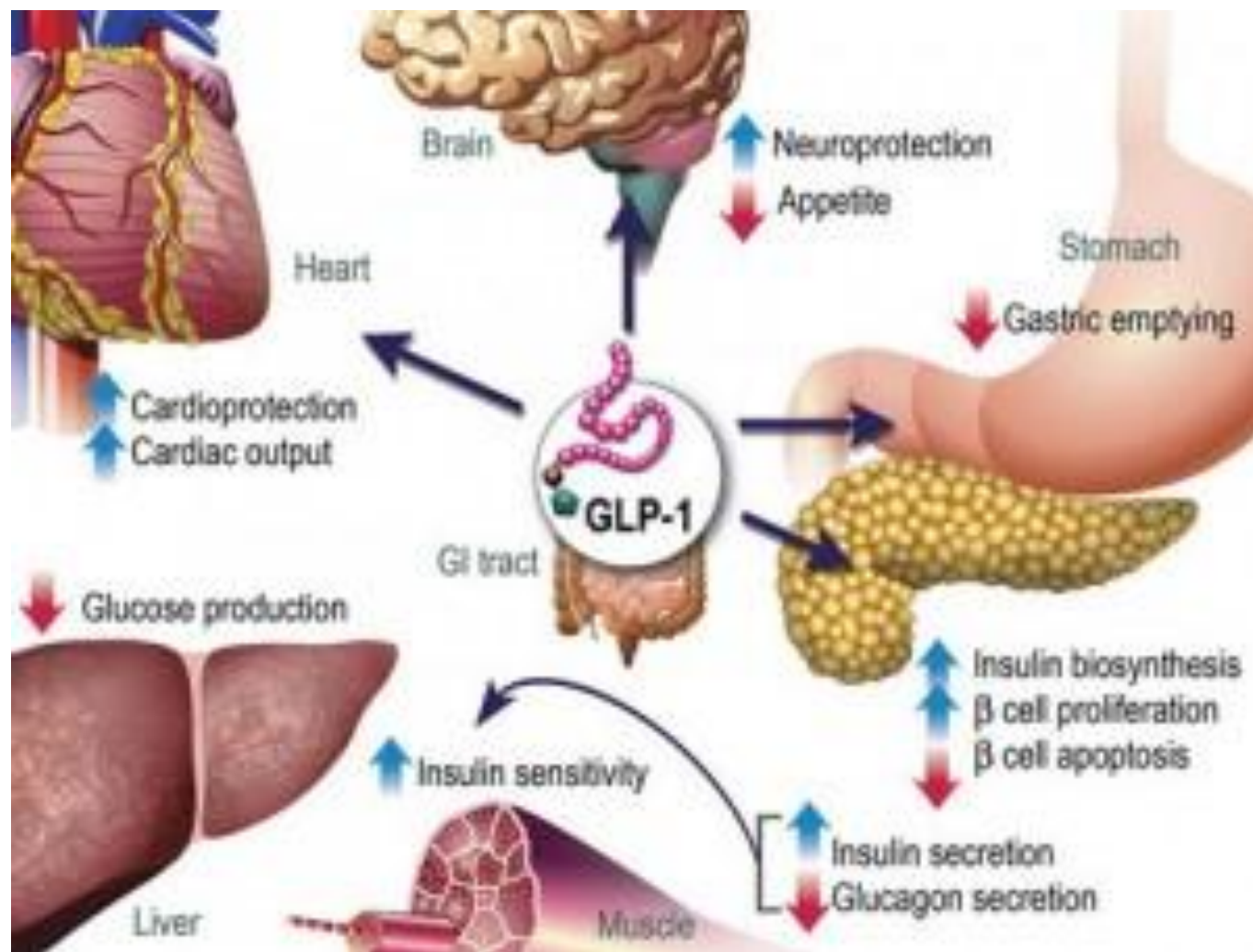


The AUC 0–180 min

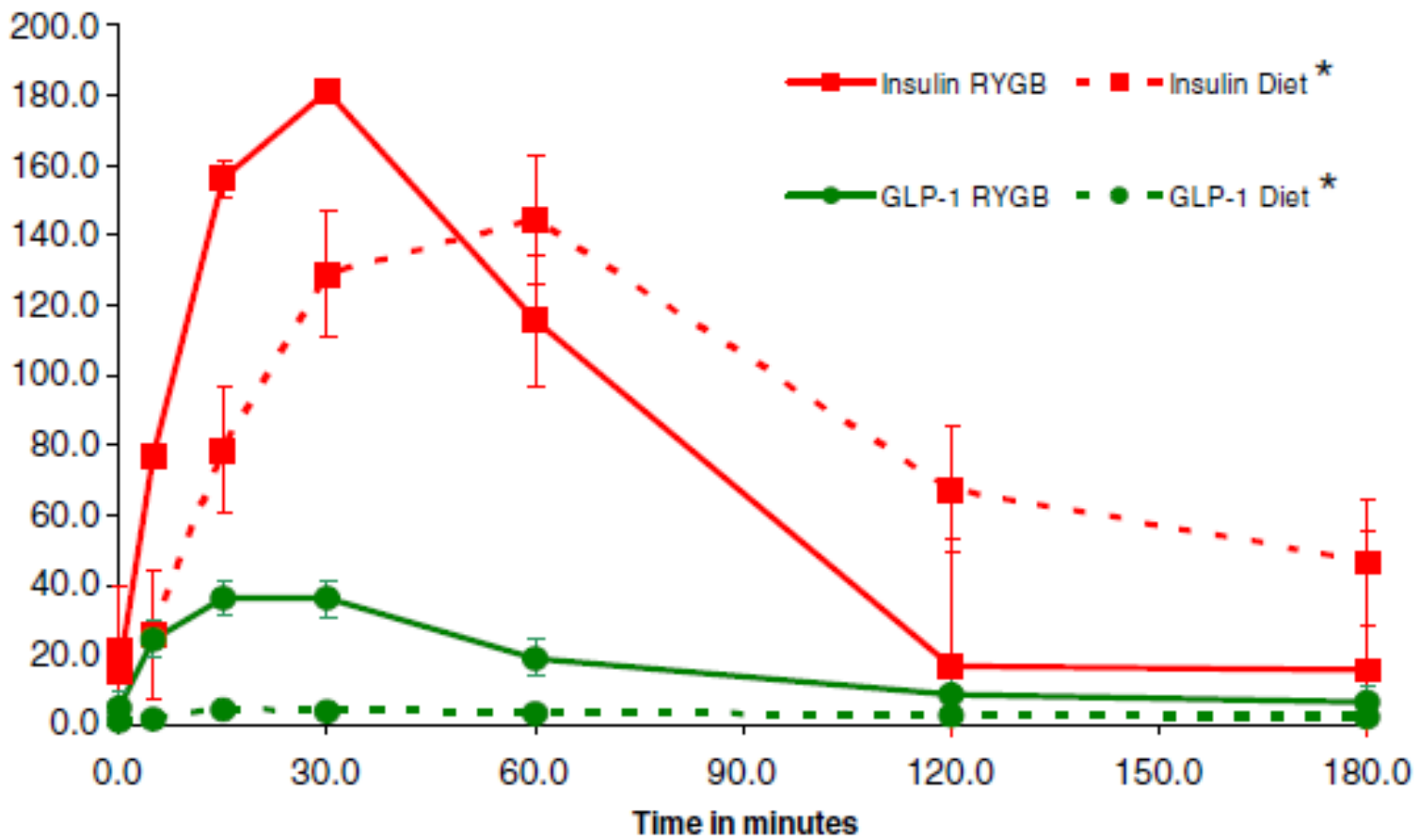


Acute effects of gastric bypass versus gastric restrictive surgery on b-cell function and insulinotropic hormones in severely obese patients with type 2 diabetes





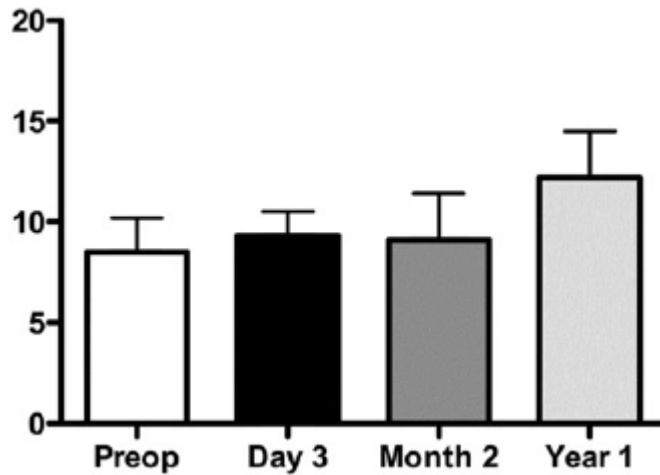
Insulin and GLP-1 secretion after a meal, 14 days after RYGB and calorie restriction or diet alone



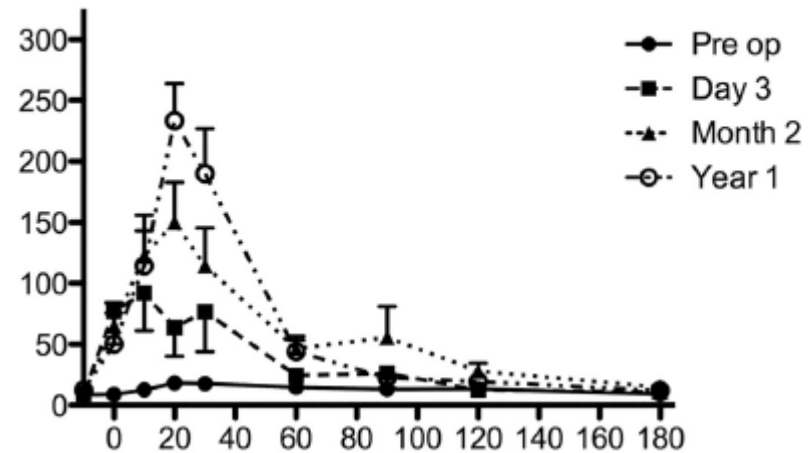
GLP-1

Before (preop) and 3 d, 2 months and 1 yr after gastric bypass surgery for obesity.

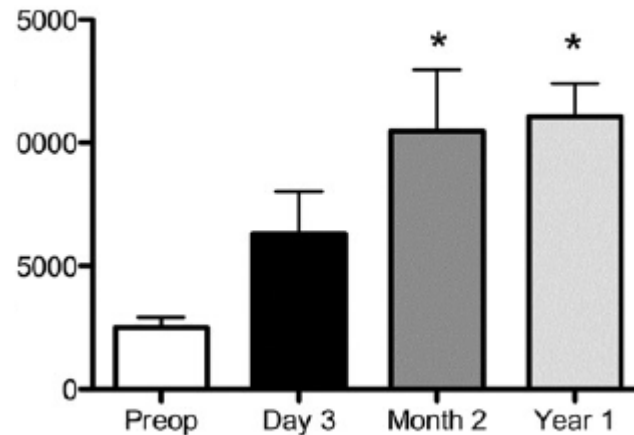
Fasting values

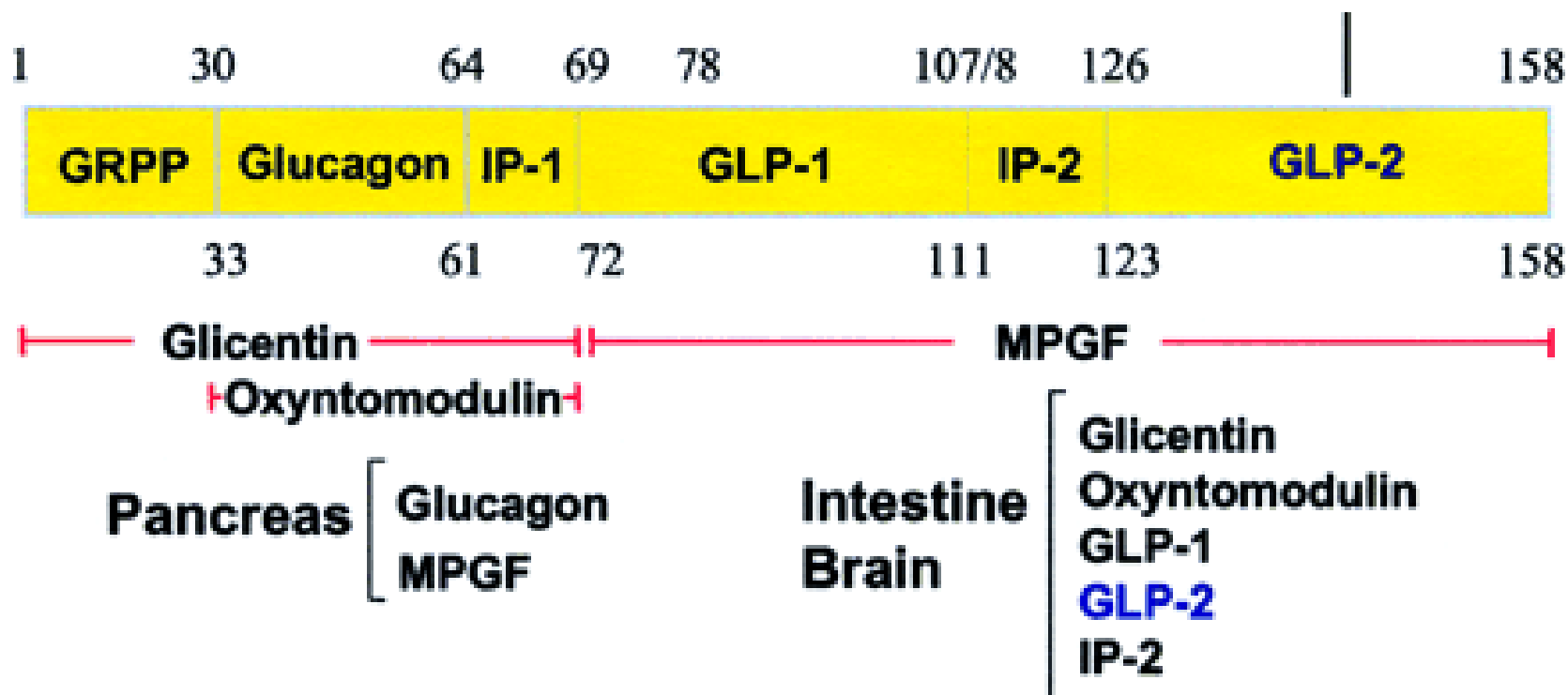


Plasma concentrations after food intake



The AUC 0–180 min

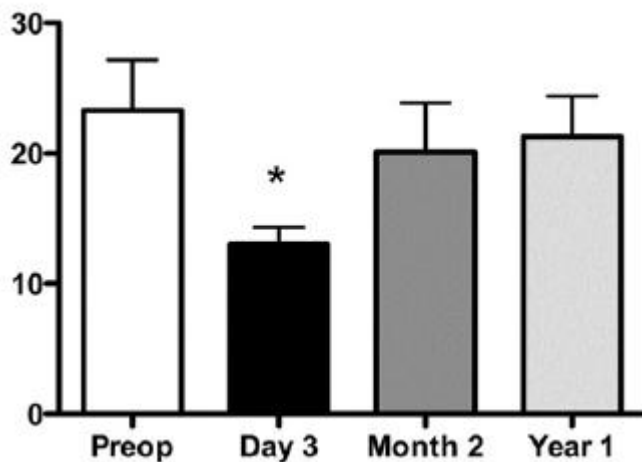




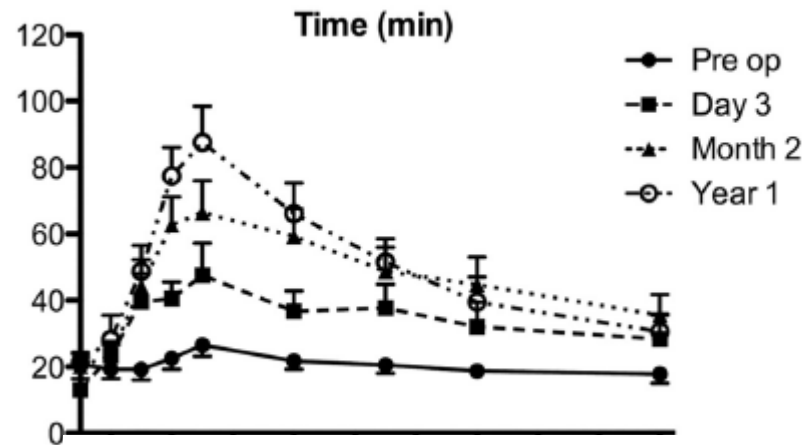
Enteroglukagon

Before (preop) and 3 d, 2 months and 1 yr after gastric bypass surgery for obesity.

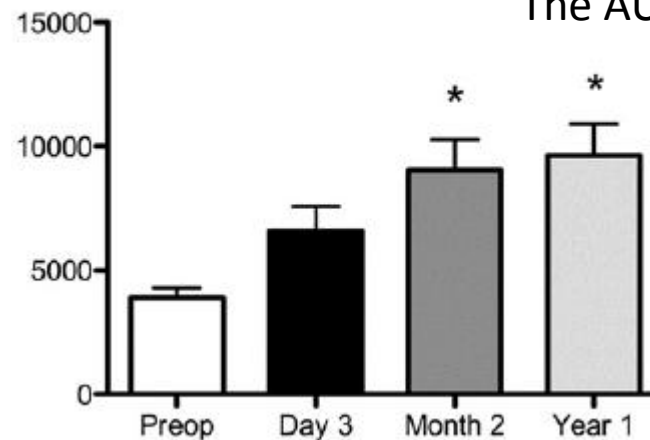
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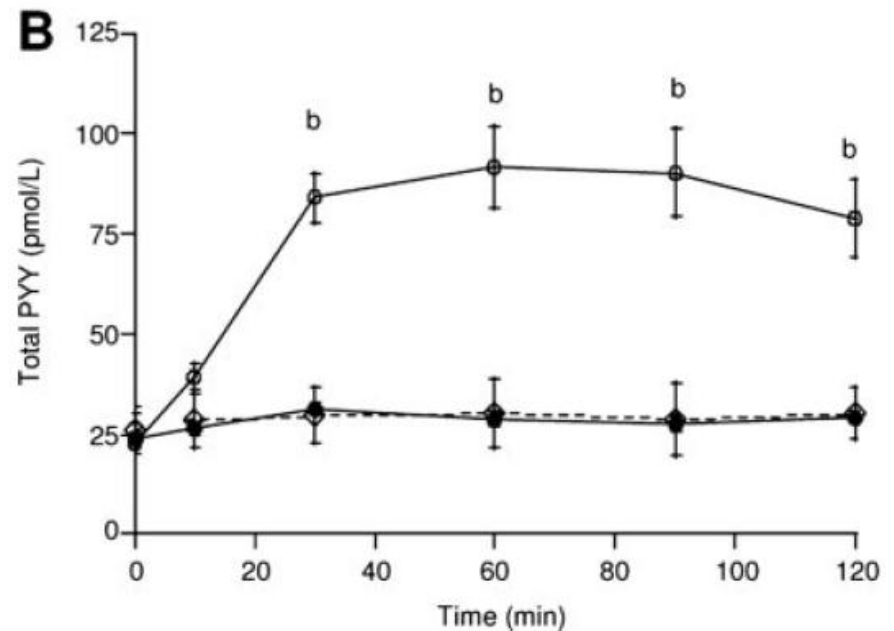
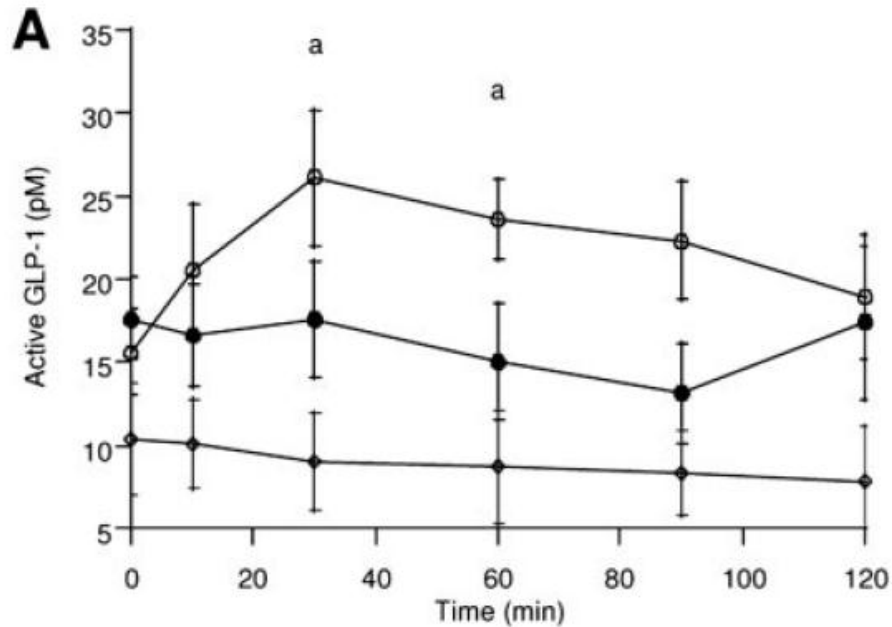
Plasma concentrations after food intake



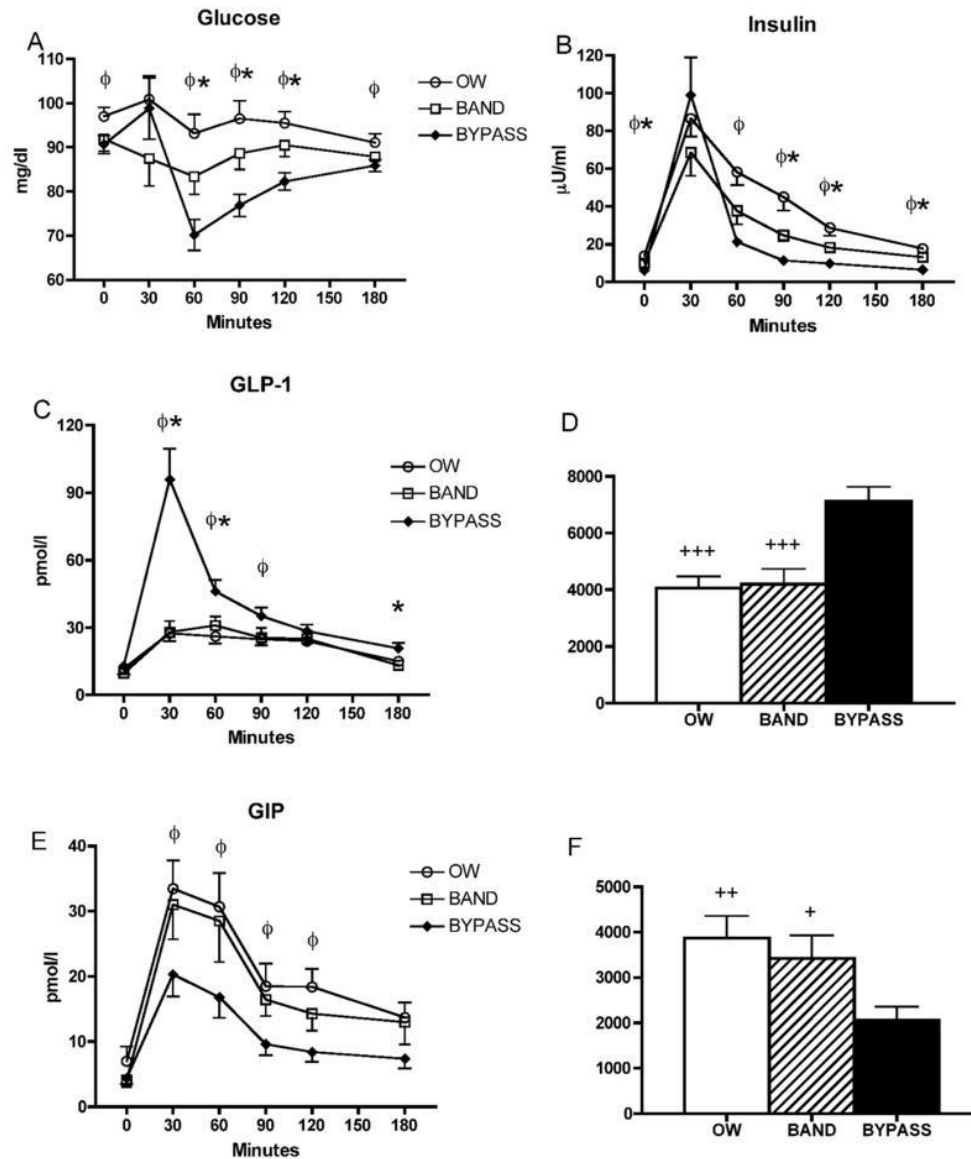
The AUC 0–180 min



Glucagon-Like Peptide-1, Peptide YY, after Gastric Bypass Surgery in Morbidly Obese Subjects



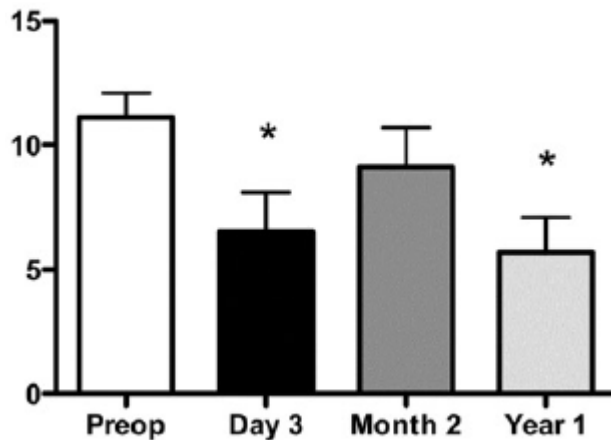
Exaggerated glucagon-like peptide-1 and blunted glucose-dependent insulinotropic peptide secretion are associated with Roux-en-Y gastric bypass but not adjustable gastric banding.



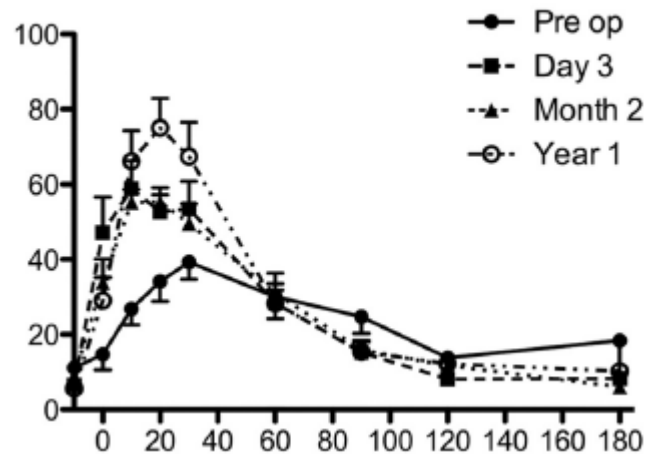
GIP

Before (preop) and 3 d, 2 months and 1 yr after gastric bypass surgery for obesity.

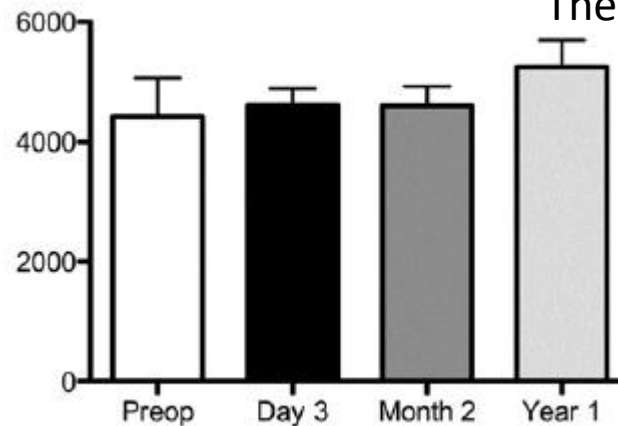
Fasting values



Plasma concentrations after food intake



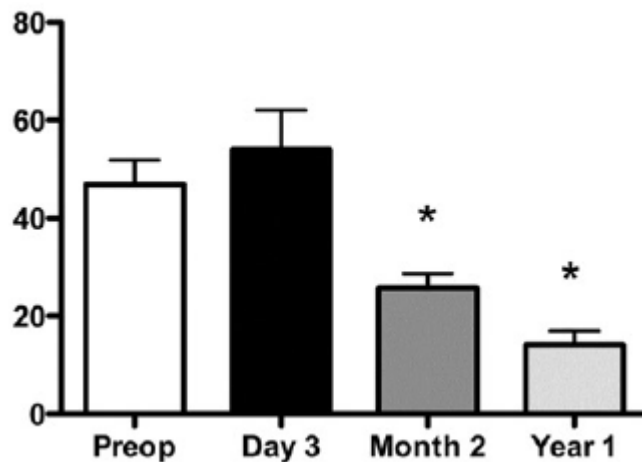
The AUC 0–180 min



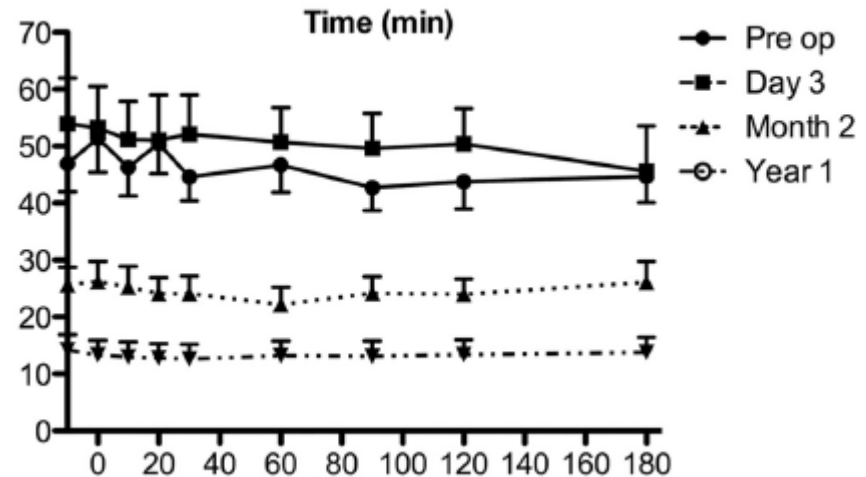
Leptin

Before (preop) and 3 d, 2 months and 1 yr after gastric bypass surgery for obesity.

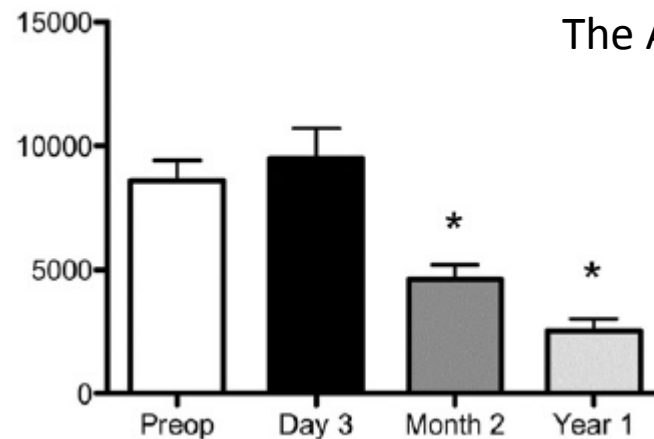
Fasting values



Plasma concentrations after food intake

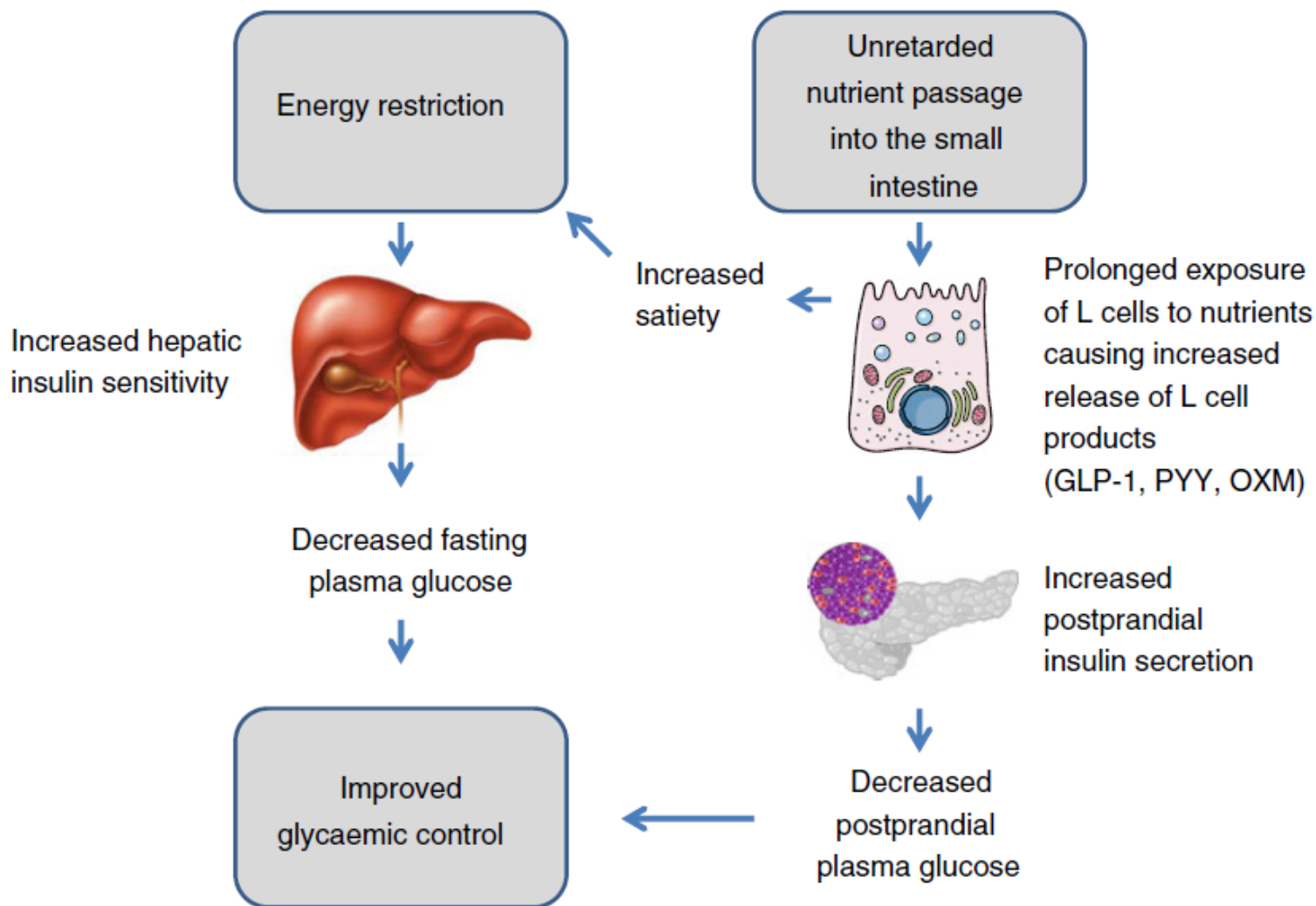


The AUC 0–180 min



a

Acute effects (days to weeks)



b

Long-term effects (months to years)

