Obesity Surgery In England Increases 10-Fold Since 2000

The use of bariatric or weight loss surgery has increased ten-fold in NHS hospitals in England since 2000, finds a study. One reason for this rapid rise is increased demand from obese patients as they become more aware of surgery as a viable treatment option, suggest the researchers.

Bariatric surgery is performed on people who are dangerously obese, for the purpose of losing weight. This is usually achieved by reducing the size of the stomach with a surgical band, by re-routing the small intestines to a small stomach pouch, or by removing a portion of the stomach. Bariatric surgery has been shown to reduce the risk of death, hospital admission, and long-term cost to the health service. It is recommended by the National Institute for Health and Clinical Excellence for people with a body mass index of at least 40 or 35 if accompanied by coexisting disease that could be improved by weight loss. But little is known about who is actually having bariatric surgery in England.

Using the Hospital Episode Statistics database, they identified all adult patients who had a first elective bariatric procedure between April 2000 and March 2008. Mortality rates 30 days and one year after surgery were recorded, as well as duration of hospital stay and unplanned readmission rates. A total of 6,953 bariatric procedures were carried out during the study period. The number of procedures rose more than ten-fold from 238 in 2000 to 2,543 in 2007.

Patients selected for gastric banding had lower post-surgery mortality and readmission rates and a shorter length of stay than those selected for gastric bypass. Patients with co-morbidities showed poorer post-surgery outcomes than did other patients. The percentage of laparoscopic procedures also increased during this time, from 28 percent in 2000 to 75 percent in 2007. However, no significant increase in mortality or unplanned re-admission was seen over the study period, suggesting that laparoscopy has been introduced in a safe manner into the NHS, say the authors.

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