

Who benefits from bariatric surgery from a quality-of-life perspective: one-year findings from the REBORN study

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Background and Objectives: The discussion of who might benefit from bariatric surgery (BS) and optimising the decision on who should undergo BS led us to study changes in quality of life (QoL), a component of the core outcome set for BS, during the first postoperative year among different BS eligibility groups.

Methods: We categorised patients into three groups based on obesity class and NIH eligibility criteria for BS: ineligible (BMI<35 without comorbidities, n=28), eligible with obesity class II (n=36), and eligible with obesity class III (n=460). In addition to anthropometrics QoL [Short-Form QoL questionnaire (SF-12)] was measured at 6 months before, and 6 and 12 months after surgery.

Results: A repeated measures mixed model found significant interactions between time and group for weight, BMI and %EWL across all groups (all p s<0.001). There were no interactions between time and group for the QoL physical (PCS) and mental (MCS) component sub-scales (p =0.27 and 0.63, respectively). However, there were main effects of time for PCS (p <0.001) and MCS (p <0.001), independent of eligibility groups, indicating that PCS increased consistently across time and MCS increased from pre- to 6 months post-operative but decreased by 12 months.

Conclusion: The results of this study indicate that all groups had similar patterns of changes in QoL, in spite of different weight trajectories. This provides a starting point to explore the importance of not excluding patients from surgery due to their weight status and setting

comprehensive eligibility criteria encompassing all patients who might benefit from BS, beyond weight loss.

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