IFSO CONSENSUS MODULE 2 – DIET, LIFESTYLE, AND EXERCISE

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CONFLICT OF INTEREST DISCLOSURE

I have no potential conflict of interest to report

Dr. Silvia Leite Faria

IFSO
NAPOLI
2023

INTRODUCTION

- **Patients submitted to MBS should adhere continually to a rigorous, integrated interdisciplinary, and patient-centered program to achieve success.**

- **HCP from different areas.**

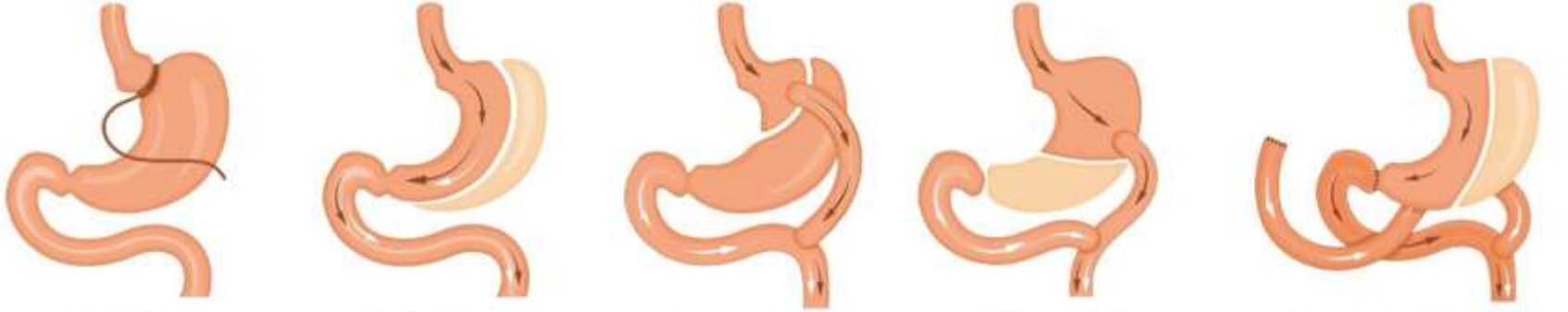
  - Nutrition
  - Psychology
  - Physical Activities
  - Lifestyle modifications

INTRODUCTION

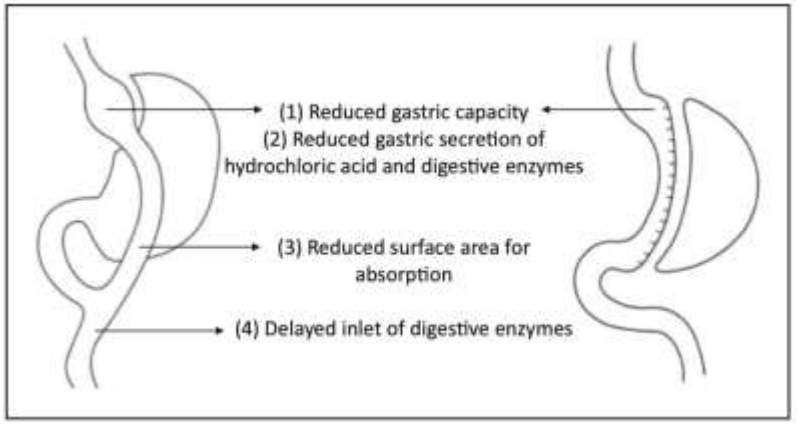
Prevent, identify and manage the risk of short-term and long-term complications of MBS

5 experts participated

NUTRITION



Macronutrients (protein)
Micronutrients (vitamins and minerals)



NUTRITION

Nutritional MVI supplementation is a cornerstone for a patient's quality of life

(1)MVI
- Prevent nutritional deficiencies

(2)Adequate protein consumption
Prevent
- Sarcopenia
- < muscle mass
- < BMR and weight recurrence

Hypoabsorptive component: greater demand of protein and liposoluble vitamins

(Moize, 2023)

LIFESTYLE MODIFICATIONS/PSYCHOLOGY

- Education to guide patients' dietary practices, physical activity and lifestyle behaviours should be provided both prior and after MBS.
- Patients must have access to specialist in MBS/complex obesity.
- Experts should transfer skills to the patients
- Studies support the use of acceptance-based behavioural treatment (ABT) as an aid for MBS patients
- Goal-directed guidance in line with patient values, telemedicine and apps are addition innovations currently being suggested

(Faria, Andersen & Sarwer)

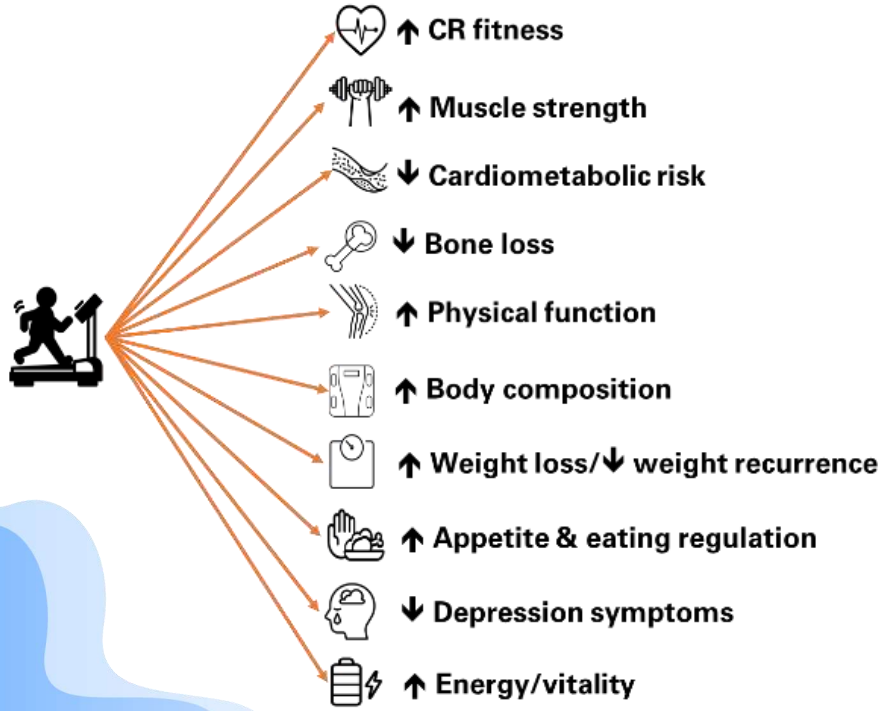
PHYSICAL ACTIVITY

- Should be stimulated starting from the preoperative stage
- Leads to mental health improvement
- And also favors lean body mass preservation during weight loss.

(Bond, 2023)

PHYSICAL ACTIVITY

Higher levels of PA can confer numerous health benefits in MBS patients



Type of Evidence	
Observational	Experimental
☑	☑
☑	☑
☑	☑
☑	☑
☑	☑
☑	☑
☑	☑
☑	
☑	☑
☑	☑

(Bond, 2023)

RESULTS

NUTRITION, LIFESTYLES, AND COUNSELLING	N	Rounds required	Most common selection	Percentage consensus
Due to the significant caloric restriction that individuals experience after MBS and to minimize any muscle loss associated with weight loss, a minimum of 60 grams of dietary protein is required daily after all MBS procedures.	40	1	Agree	92.5%
As hypo-absorptive MBS procedures result in greater protein loss, it is important to ensure a minimum of 80 to 100 grams of dietary protein per day.	40	1	Agree	92.5%
A rehabilitation program considering protein intake along with strength training should be prescribed individually both before and after MBS to avoid sarcopenia and related complications in individuals over 65.	40	1	Agree	85.0%
Studies to identify sarcopenia are advisable in at-risk individuals both before and after MBS.	40	1	Agree	80.0%

RESULTS

NUTRITION, LIFESTYLES, AND COUNSELLING	N	Rounds required	Most common selection	Percentage consensus
Increasing physical activity and exercise has no clinically-significant physical or psychological benefits in MBS patients.	40	1	Disagree	97.5%
Individuals need some form of behavioural intervention to modify physical activity and sedentary behaviours, both before and after MBS.	40	1	Agree	85.0%
Objectively, most individuals who engage in low levels of moderate-to-vigorous intensity physical activity and have high levels of sedentary time before surgery make only modest improvements in these during the initial year after MBS.	40	1	Agree	75.0%
All patients with a known or suspected mental health diagnosis should undergo an assessment with a mental health professional prior to MBS, even if it is currently being treated.	42	1	Agree	83.3%
All patients with a mental health diagnosis that is not currently being treated should undergo an assessment with a mental professional prior to MBS.	43	1	Agree	100.0%
Every patient should undergo an assessment with a mental health professional prior to MBS.	43	2	Agree	58,1%

Conclusion

- **HCP specialized in MBS are essential for the treatment of obesity**

- **Further studies that continually search for surgical and non-surgical solutions may contribute to successful lifelong outcomes for patients who have undergone MBS**

Thanks !

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