Factors Predicting Variability in Total Small Bowel Length

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• I have no potential conflict of interest to report

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- The small bowel plays a crucial role in the regulation of energy balance and metabolism via nutrient absorption, hormonal regulation, gut microbiota and bile acid metabolism, which together influence obesity.
- Understanding the interplay between the small bowel and mechanisms associated with obesity, coupled with pre-existing comorbid conditions helps tailor surgical approaches to individual patient needs and optimize weight loss and metabolic outcomes.
- It is thus, crucial to know the TSBL of all patients undergoing proximal bypass procedures.
- There is considerable variability in the TSBL reported in literature, and no easy non-invasive method exists to measure TSBL pre-operatively and intraoperative measures are difficult to perform and may lead to bowel injury.



• The present study aims to find the average TSBL in patients undergoing bariatric surgery and correlate it with other select demographic, anthropometric and metabolic parameters.

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#### Methodology



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Results: Demographic and Anthropometric Profile of Study Participants

Factors	Frequency (Percentage)		
Sex			
Female	103 (59.88%)		
Male	69 (40.12%)		
Age (years) <sup>1</sup>	42.60 ± 12.08		
Height (cm) <sup>1</sup>	163.56 ± 10.30		
Weight (Kg) <sup>1</sup>	124.22 ± 24.99		
BMI (Kg/m²) <sup>1</sup>	46.41 ± 7.85		
Obesity class			
Class 1	12 (6.98 %)		
Class 2	20 (11.63 %)		
Class 3	140 (81.40 %)		
Note 1: Mean and standard deviation			

The table shows the demographic and anthropometric profile of the study participants

- Of 172 participants, 103 (59.9%) were females, and 69 (40.1%) were males
- The **mean age** of the study participants was **42.6 years**
- The mean height was 163.6 cm
- The mean weight was 124.2 kg
- The **mean BMI** was **46.41 kg/m<sup>2</sup>**.
- More than **80%** of the study participants had a **BMI over 40**

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Results: Average TSBL Based on Gender and Comorbidities

Covariates	Frequency	Mean	SD	P-value
Sex				0.004
Female	103	772.91	117.37	
Male	69	823.55	102.17	
Hypertension				0.557
No	98	788.78	112.95	
Yes	74	799.12	115.79	
Diabetes				0.005
No	114	775.83	112.37	
Yes	58	827.41	110.15	
Dyslipidemia				0.057
No	119	782.18	110.97	
Yes	53	818.02	117.72	
Overall	172	793.23	113.96	

(A multivariate analysis in the form of linear regression was done to predict the variability of TSBL based on selected covariates.)

- Overall, the **mean bowel length** in the study participants was **793.2 cm**
- There was a significant difference in the **mean TSBL of females and males**
- The mean TSBL for females was 772.9 cm, while for males it was 823.6 cm
- There was **no significant difference in the TSBL** based on comorbidities like **hypertension** and **dyslipidemia**
- The mean TSBL was significantly longer in patients with T2DM than for non-diabetic individuals

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#### **Results: Correlation between Demographic Factors and TSBL**

Covariates	Correlation	P-value	
Age	-0.191	0.012	
Height	0.372	0.000	
Weight	0.131	0.086	
вмі	-0.114	0.137	

- The table shows the **correlation** between **demographic factors and TSBL**
- Age was seen to be negatively correlated with TSBL (r= -0.19)
- Height was seen to be positively correlated with TSBL (r= 0.37)

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## Melbourne 2024



Scatterplot of TSBL with Age, Height, Weight, and BMI

Total Bowel Length	Unadjusted Coefficient	Adjusted Coefficient		
Age	<b>-1.79 *</b> (-3.20, -0.40)	<b>-1.66</b> * (-3.04, -0.28)		
Sex	<b>50.64</b> * (16.39, 84.89)	-38.48 (-87.34, 10.38)		
Height	<b>4.11 *</b> (2.56, 5.67)	<b>4.88</b> * (2.50, 7.25)		
Weight	0.60 (-0.08, 1.28)	NA		
BMI	-1.65 (-3.84, 0.53)	NA		
Diabetes	<b>51.58 *</b> (16.04, 87.12)	<b>62.22</b> * (27.87, 96.57)		
Hypertension	10.35 (-24.37, 45.06)	NA		
Dyslipidemia	35.83 (-1.03, 72.70)	NA		
Constant	NA	60.54		
Note: *: p-value<0.05				

- The table shows the unadjusted and adjusted variation in TSBL based on selected demographic factors, anthropometric factors and comorbidities
- Unadjusted linear regression established that age, sex, height, and diabetes could statistically significantly predict TSBL (pvalue < 0.05)</li>
- However, after adjusting for other significant factors, sex was not seen to be able to statistically significantly predict TSBL (p-value > 0.05)
- These factors accounted for approximately 20% of the explained variability in TSBL



Study population

Average TSBL (cm)

Author/ Study



#### M

elbour	ne	2024
		2027

Weight

			Age	Sex	Height	weight			
Lakdawala (2024) / Present Study	Both	793.2 cm	Yes	Yes		No			
	Male	823.6 cm			Yes				
	Female	772.9 cm	Negative Correlation	-	Positive correlation	No			
Treves (1885)	Male	832.5		-	No	No			
	Female	790.9	No						
	Female	711							
	Both	582	-		-	-			
Dreike (1894)	Male	637		-					
	Female	527							
	Both	625	Yes						
<u>Bryant (1924)</u>	Male	663				_			
	Female	587	Negative Correlation						
	Both	718							
Backman (1974)	Male	761	-	-		-			
	Female	675							
	Both	525.5							
Guzman (1977)	Male	546	-	-	-	-			
	Female	505							
	Both	615			Yes	_			
Underhill (1995)	Male	638	No						
Undernin (1995)	Female	592	110		Positive correlation				
	Both	564	No		Yes	Yes			
Nordgren (1997)	Male	591		No	No	_	100	100	
	Female	534				Positive correlation	Positive correlation		
	Both	634.9	Yes			Yes			
	Male	670.7	Negative						
Hounnou (2002)				-	No	Positive			
	Female	599.2							
			Correlation			correlation			
Valera-Mora (2005)	Both	671	-	-	-	-			
	Both	459.6			No	No			
Hosseinpour (2008)	Male	452.2	No	No -					
	Female	468.2							
Hernández-Martínez (2011)	Both	600	-		-	-			
Nergaard (2014)	Both	620	-	-	-	-			
	Both	506							
	Men	533	Yes	¥~~			- indicates not studied		
Teitelbaum (2013)			*Negative in Female	Yes	Yes	No	- maicales not studied		
<u>Terteibaum (2015)</u>	Female	482	Negative in Female	Positive in Male	ies	NO			
	Terriale	402	Positive in Male	Positive in Male	Positive in Male			* Teitelbaum reported a	
			FOSILIVE III IVIDIE				correlation between age and		
	Both	630			Yes	Yes			
Bekheit (2019)	Male	661.5	No	_	res	162	TSBL [Male (r = 0.17; P = 0.08),		
beknett (2013)	Female	612	NO		Weak Positive correlation	Weak Positive correlation	Female (r = -0.18; P = 0.04)]		

#### Comparison with other studies

Sex

Age

orrelation with

Height

#### Conclusion

- A lot of variability in the total length of the small bowel can be seen in existing literature
- The present study concludes that **age**, **height**, and **diabetes** were the factors that were found to **significantly**

#### predict TSBL in Indian people with obesity

- With increasing age, TSBL was seen to become shorter
- On the other hand, tall individuals were seen to have longer TSBL
- Those **patients with T2DM** also had a **longer average TSBL**

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The results suggest that while deciding the BP limb length in proximal bypass surgeries it is crucial to remember to keep –

✓ the BP limb length shorter in the case of older and shorter individuals to prevent protein-energy malnutrition, steatorrhea, etc.

✓ the BPL length should be appropriately increased in the case of younger, taller, and diabetic patients

to achieve significant, sustained weight loss, and remission of metabolic syndrome

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