

## **Selected Readings in Bariatric Surgery**

**Randomized Controlled Trial** by Ikramuddin S, Korner J, Lee W-J, et al. Roux-en-Y Gastric Bypass vs Intensive MedicalManagement for theControl of Type 2Diabetes,Hypertension, and Hyperlipidemia The Diabetes Surgery Study Randomized Clinical Trial. JAMA 2013;309: 2240-2249.

**Summary:** The authors randomized 120 moderately obese diabetic patients (BMI 30-40) to intensive life style medical management or RYGBP. After 12 months, statistically more patients in the RYGBP group achieved the composite goal (HBA1c less than 7.0%, LDL Cholesterol less than 100 mg/dL, and systolic BP less than 130 mm Hg) than the patients treated medically.

**Randomized Controlled Trial** by Mingrone/Rubino et al published in the .Lancet. 2015 Sep 5;386(9997):964-73. Bariatric-metabolic surgery versus conventional medical treatment in obese patients with type 2 diabetes: 5 year follow-up of an open-label, single-centre, randomised controlled trial.vMingrone G1, Panunzi S2, De Gaetano A2, Guidone C3, Iaconelli A3, Nanni G4, Castagneto M4, Bornstein S5, Rubino F6. **Summary:** The authors randomized 60 patients in 2009, to either medical treatment (n=20) or Roux en Y gastric bypass (RYGB) (n=20) or biliopancreatic diversion (BPD) (n=20); 88% patients completed 5 years' follow-up.

- **1. Regarding DM remission at 5 years:** achieved by 0% of the medical group achieved remission, 37% of RYGB and 63% of the BPD (p=0.0007).
- **2. Regarding relapse of DM after achieving remission in 2 years:** 53% of the RYGB and 37% of the BPD and 100% of the medical group.
- **3. Regarding complications:** Medical patients had more DM related complications than the RYGB and BPD, nutritional deficiencies happened only in the BPD group.