

Lessons learned from AMOS

(Adolescent Metabolic-Obesity Surgery)

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Disclosures

Johnson & Johnson *Advisory board and Educational activities*

NovoNordisk *Advisory board and Educational activities*

Vivus *Advisory board*

Sandoz *Educational activities*

Reimbursement to my institution



MBS is a recommended treatment in adolescents

Society/agency	Criteria	Additional information
IFSO/ASMBS , 2022	<ul style="list-style-type: none">• No lower age limit.• BMI >35 + major comorbidity or BMI>40.	Autism, developmental delay, trauma, syndromic obesity NOT contraindications.
American Academy of Pediatrics (AAP) 2023, USA	<ul style="list-style-type: none">• ≥13years• As IFSO/ASMBS	<13 years on a case-by-case basis only
National Institute for Health and Care Excellence (NICE) 2023, UK	<ul style="list-style-type: none">• Achieved (or nearly) physiological maturity• As IFSO/ASMBS	Only in exceptional circumstances.
National Board of Health and Welfare 2023, Sweden	<ul style="list-style-type: none">• ≥15 years• BMI ≥35 kg/m²	Roux-en-Y gastric bypass given higher priority

IFSO=International Federation for the Surgery of Obesity and Metabolic Disorders

ASMBS= American Society of Metabolic and Bariatric Surgery

Evidence behind adolescent MBS

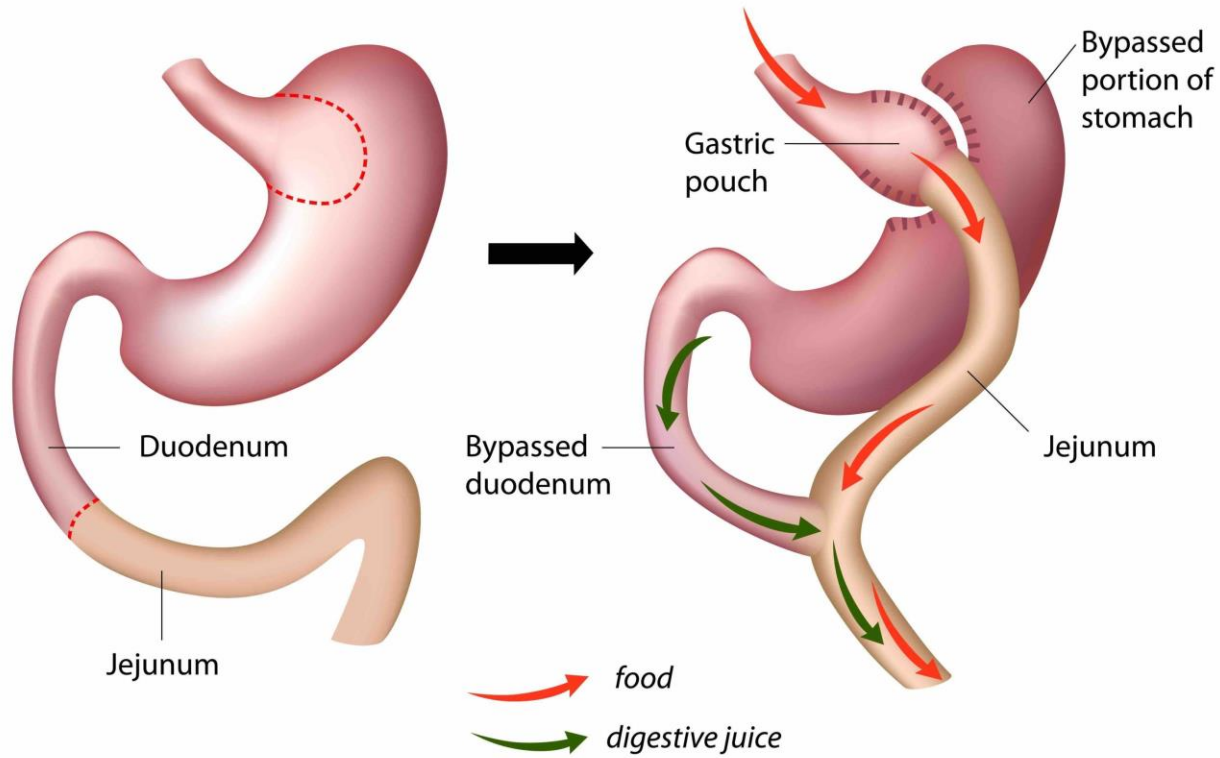
- **Randomized Controlled Trials**
 - Australia (2005-2008); LAGB; 2-year outcome data
 - The Netherlands (2011-?); LAGB; 1-year outcome data
 - Sweden (2014-2016); RYGB/SG; 2-year outcome data **AMOS2**
- **Several prospective controlled studies and case-series:**
 - USA ≥ 10 years+
 - Sweden 10 years+ **AMOS**
 - Saudi Arabia 10 years

Considerations for surgery in adolescents

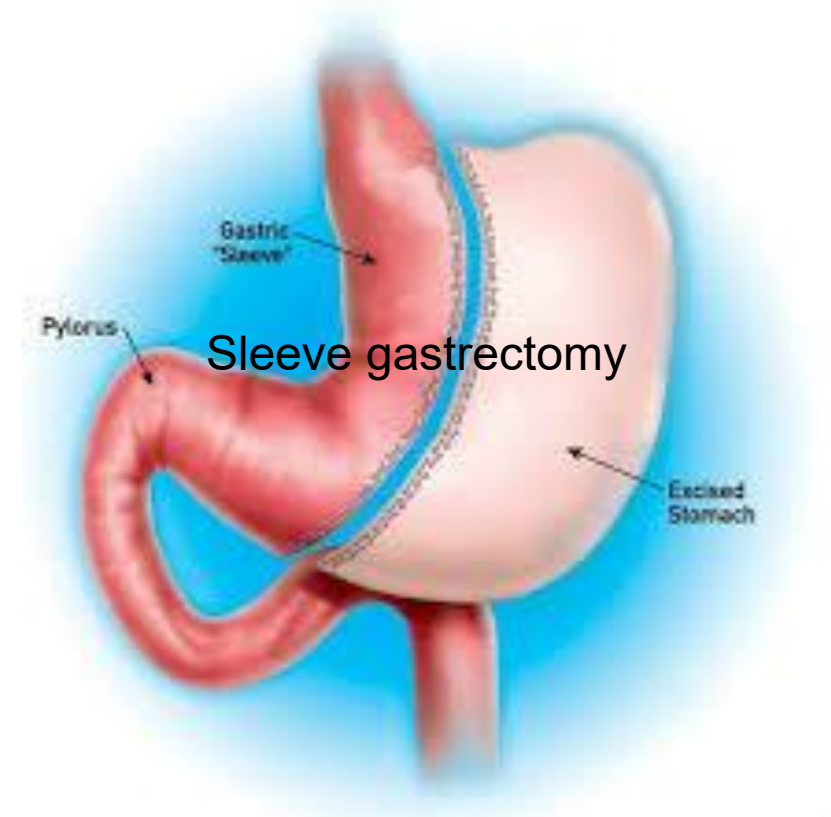
- A sound balance between efficacy and risk
- Awareness of the mechanisms of action
- Have the procedure stood the “test of time”?

Adolescents have a 70-80 years remaining life expectancy..

Roux-en-Y Gastric Bypass (RYGB)



or



AMOS

- Prospective controlled study
- 2006-2009.
- N=81
- Age <18 years.
- BMI ≥ 40 , or ≥ 35 kg/m² with comorbidity
- Pubertal stage Tanner >3
- Only gastric bypass
- 5-year data



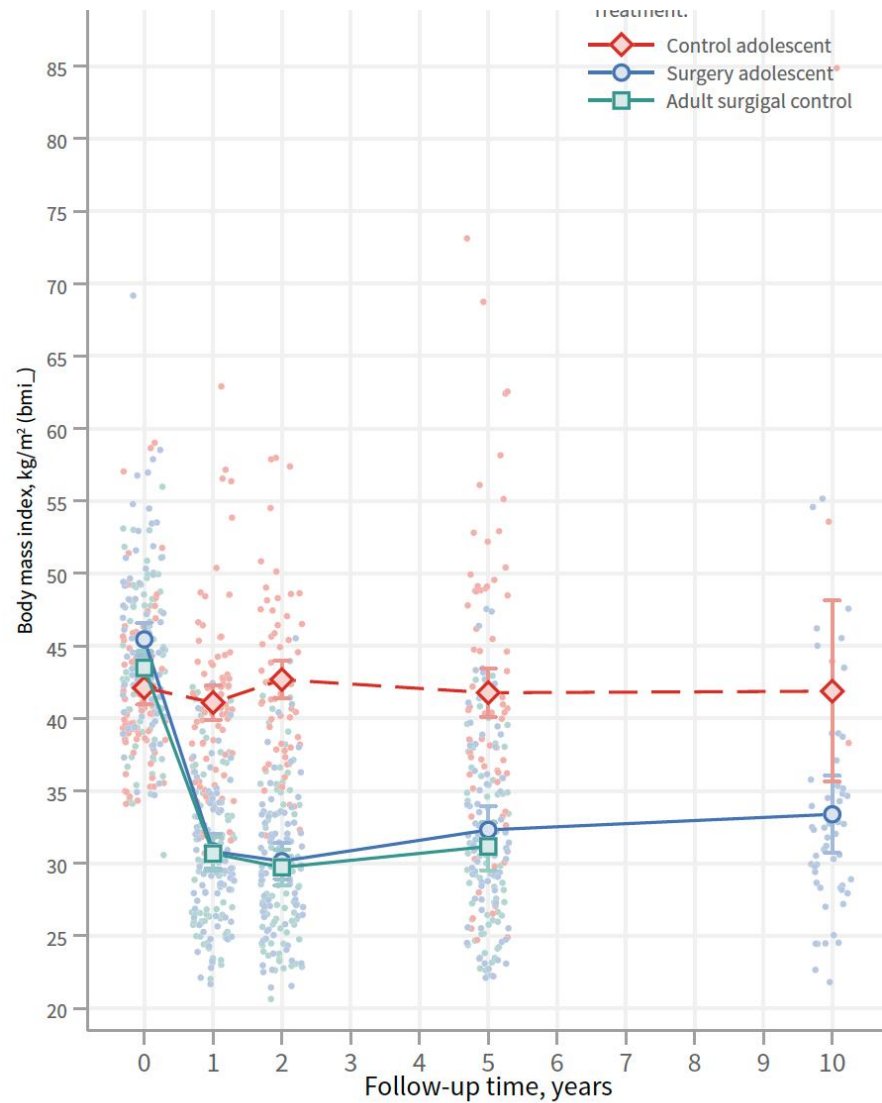
AMOS2

- RCT
- 2014-2017
- N=50
- Age 13-16 years
- BMI >35 kg/m²
- Pubertal stage Tanner ≥ 3
- 23 Gastric bypass, 2 Gastric sleeve
- 2-year data

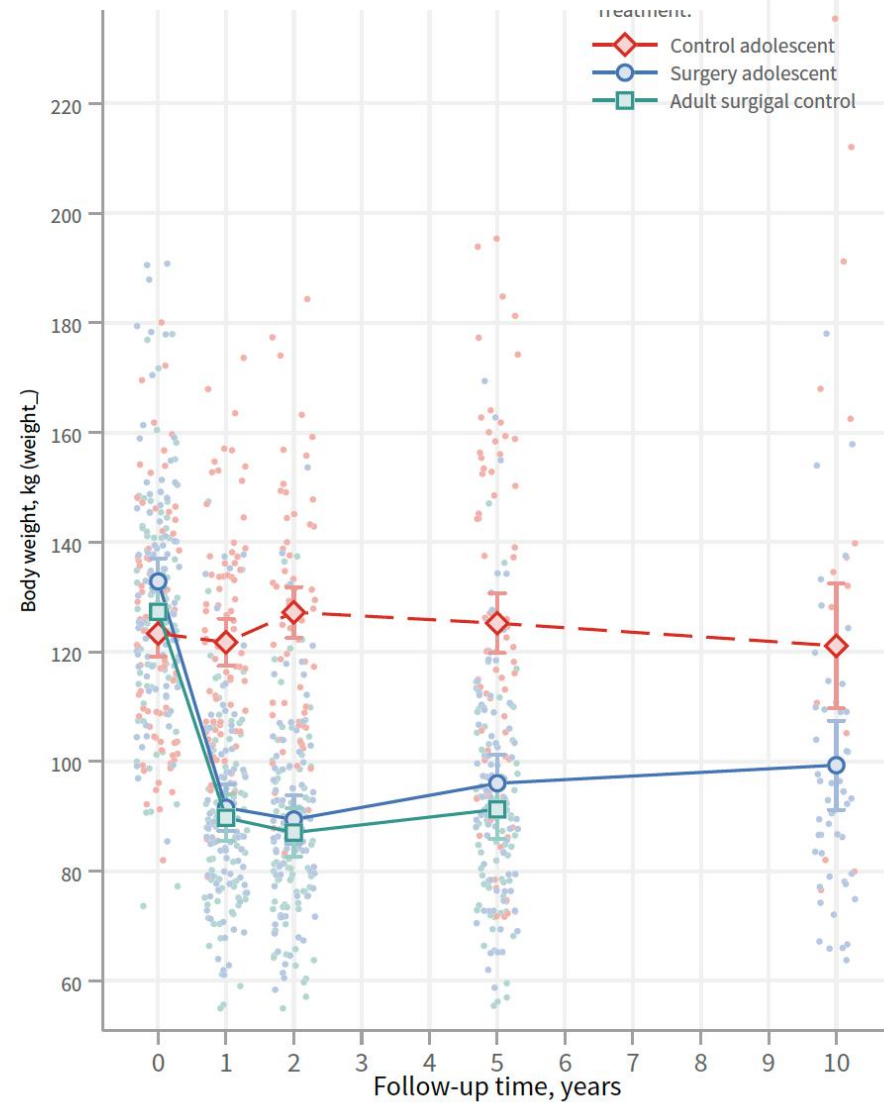
Primary outcome

AMOS- 10 y

Body Mass Index

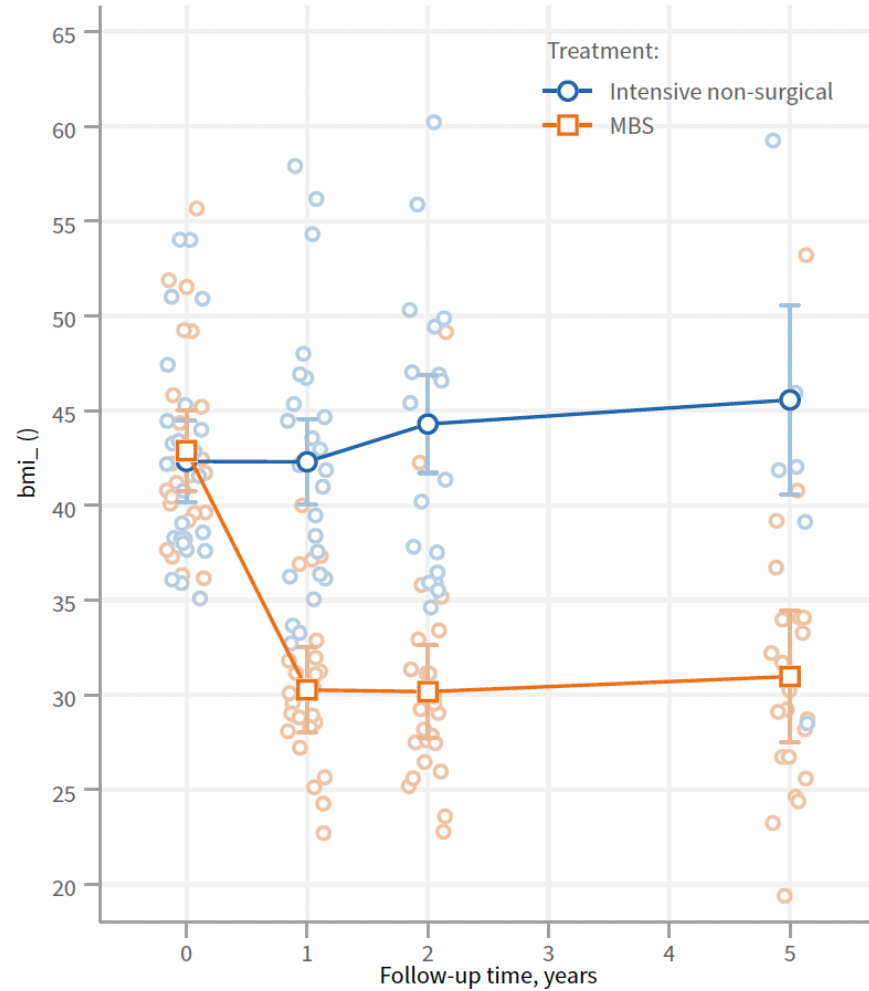


Body weight (kg)



AMOS2- 5y Per protocol

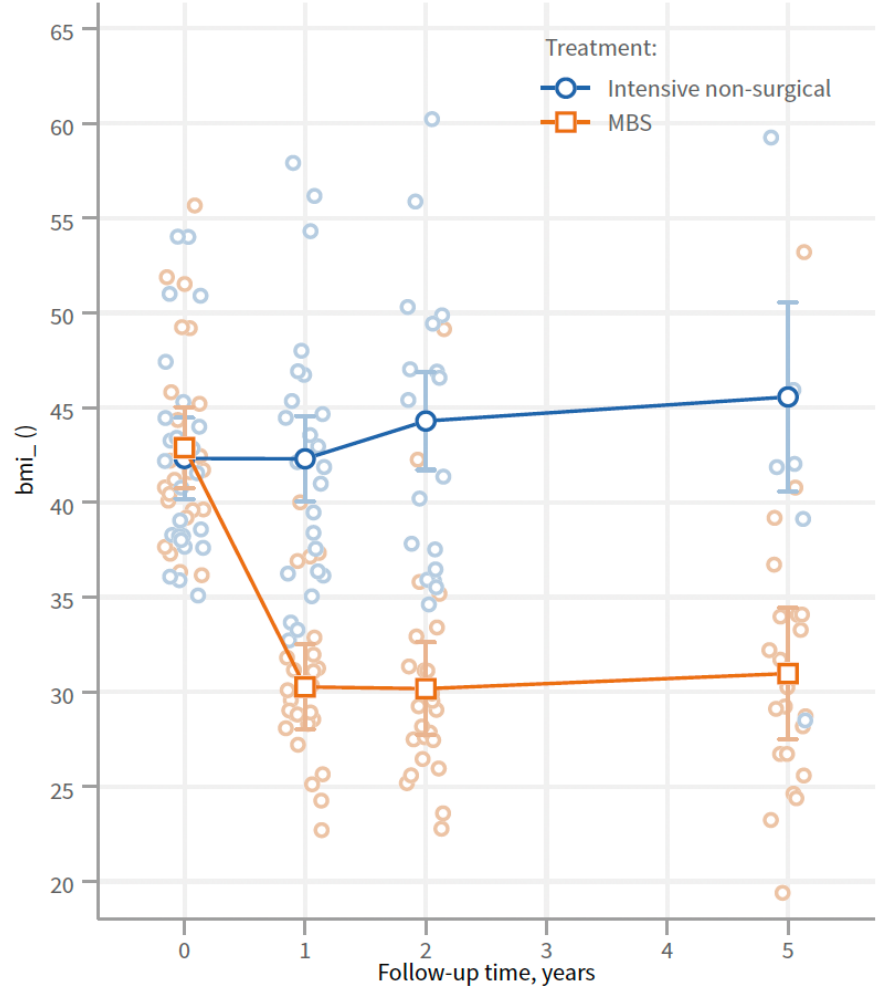
Body mass index (per-protocol)



Unpublished

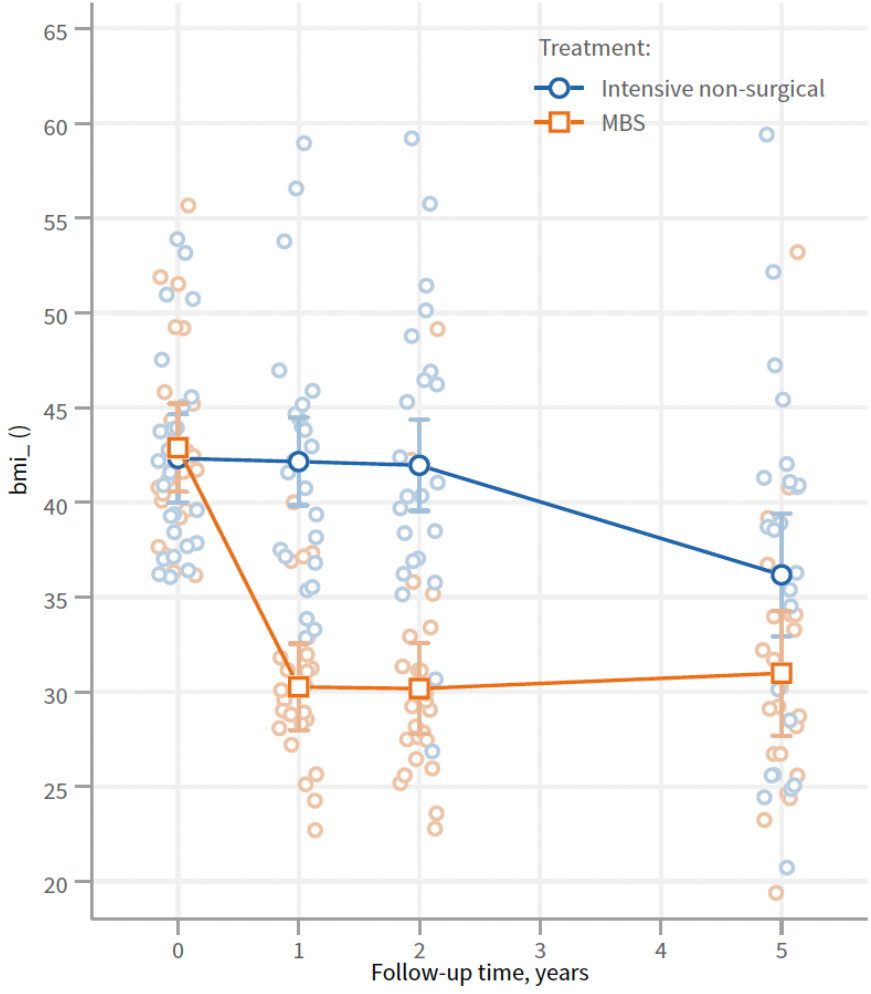
Per protocol

Body mass index (per-protocol)



Intention To Treat

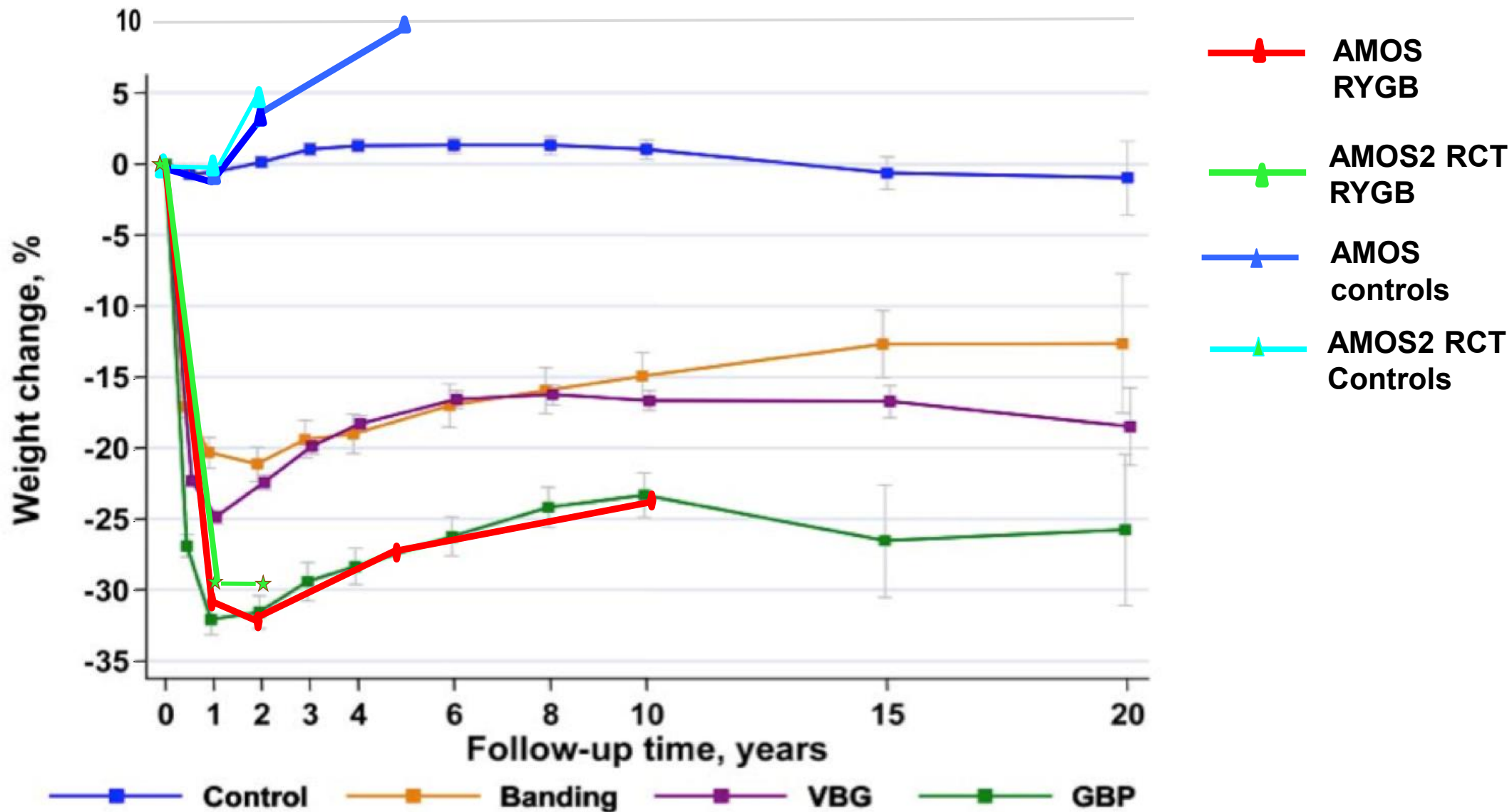
Body mass index (ITT)



Unpublished

18 out of 25 (72%) of the controls in AMOS2
chose surgery (crossed over) up to 5 years

Weight loss AMOS och AMOS2 vs. SOS (adults)



Conclusions- *Body Weight & BMI*

- Similar weight outcomes in adolescents as in adults
- Somewhat greater variability.

- Behavioral factors do not predict weight outcomes
- More weight loss associated with better quality of life.

Olbers et al. *Lancet Diab End* 2017

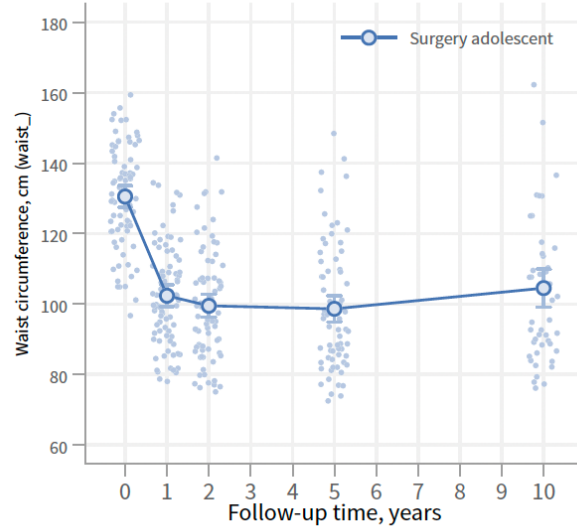
Inge et al, *NEJM* 2019

Ryder et al. *Int J Obes (Lond)* 2018

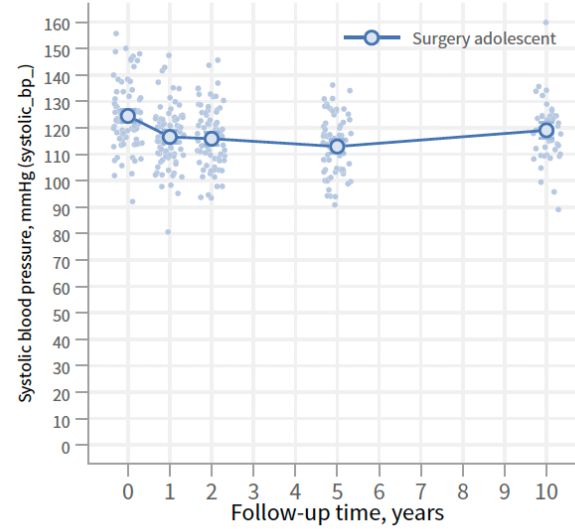
Secondary efficacy outcomes

Cardiovascular risk factors (AMOS, 10y)

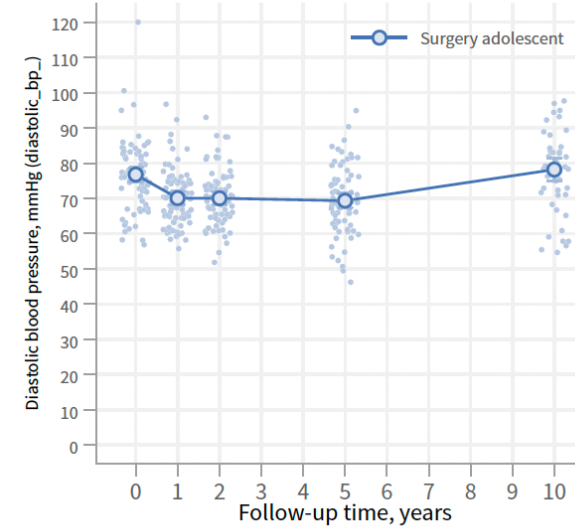
Waist circumference, cm



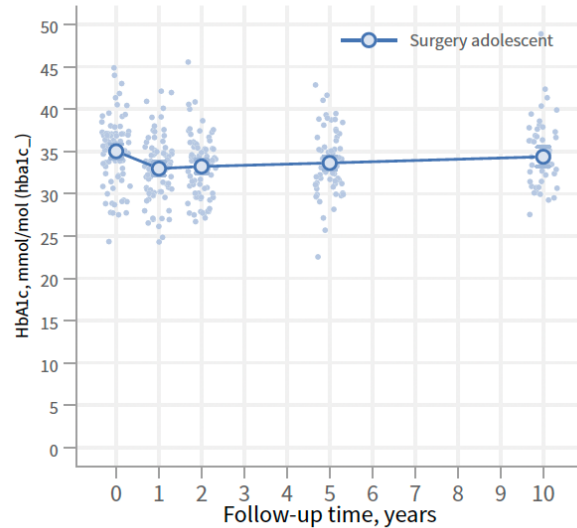
Systolic blood pressure, mmHg



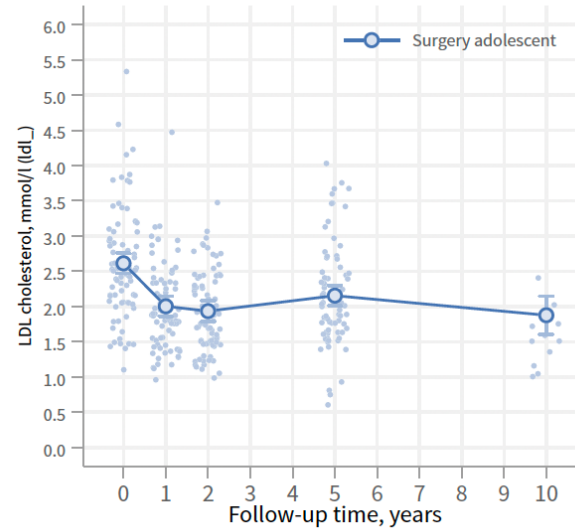
Diastolic blood pressure, mmHg



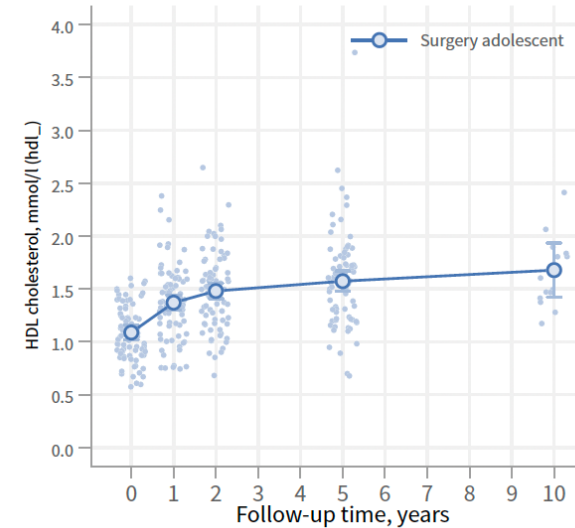
HbA1c, mmol/mol



LDL cholesterol, mmol/l

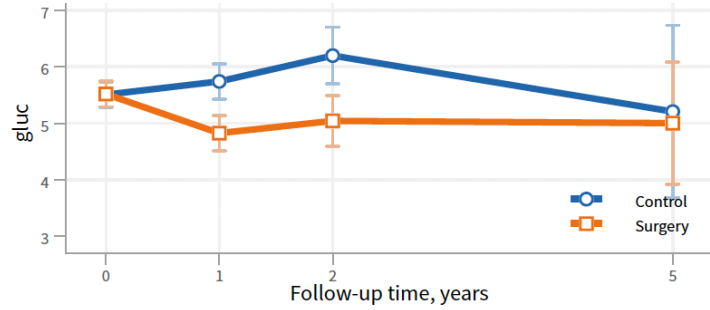


HDL cholesterol, mmol/l

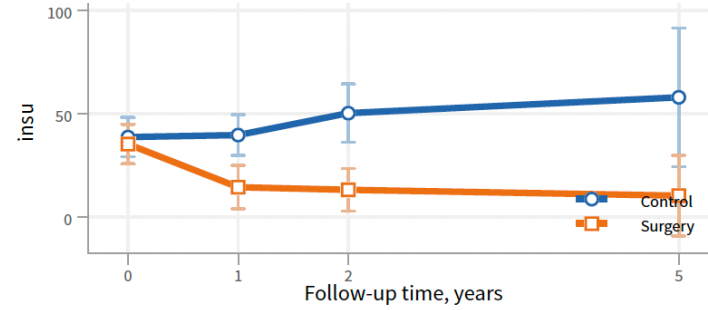


Cardiovascular risk factors (AMOS2, 5y)

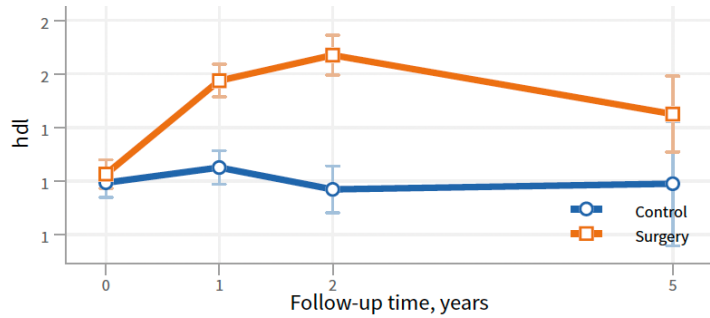
F-Glucose



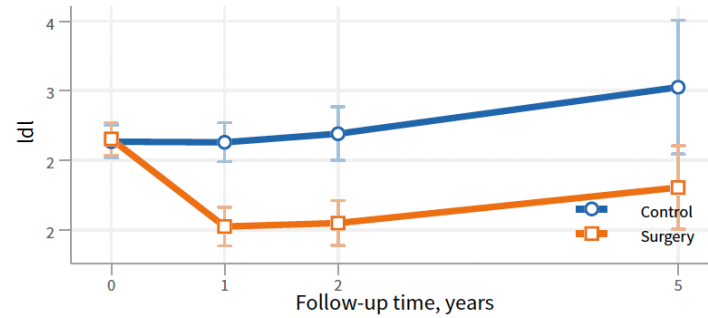
Insulin



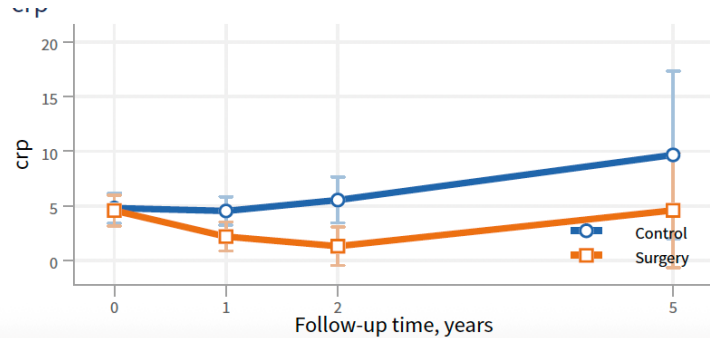
HDL



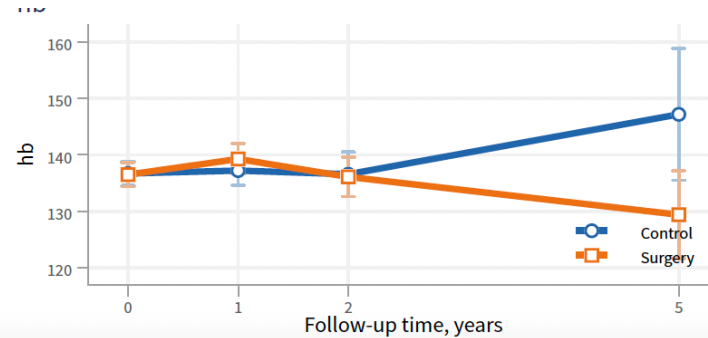
LDL



CRP



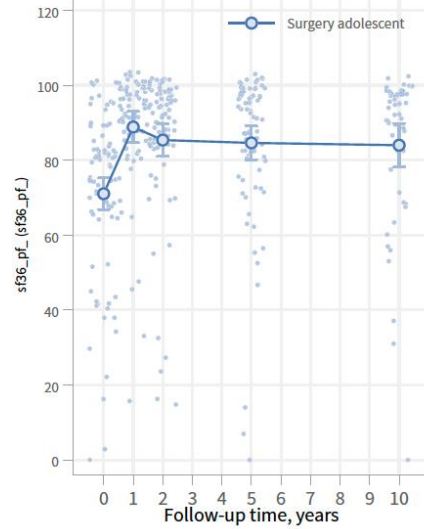
Hb



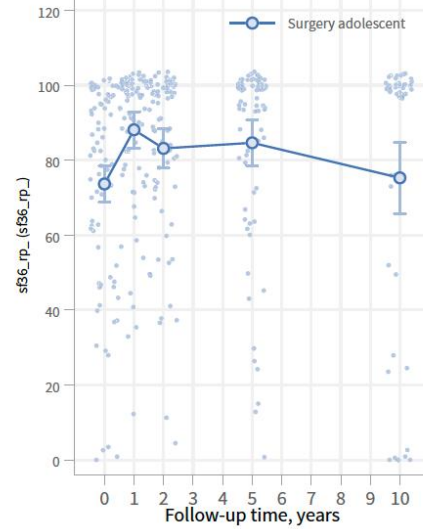
Unpublished

Secondary outcomes- *Quality of Life (AMOS, 10y)*

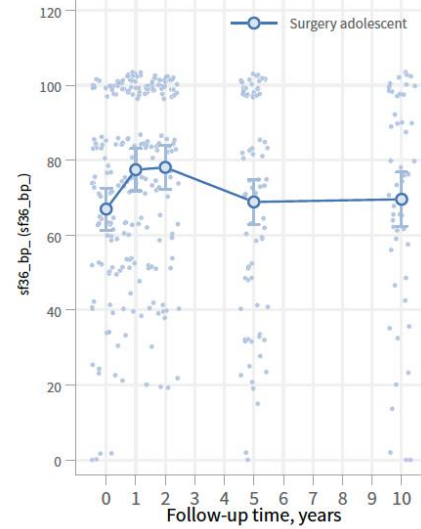
Physical function



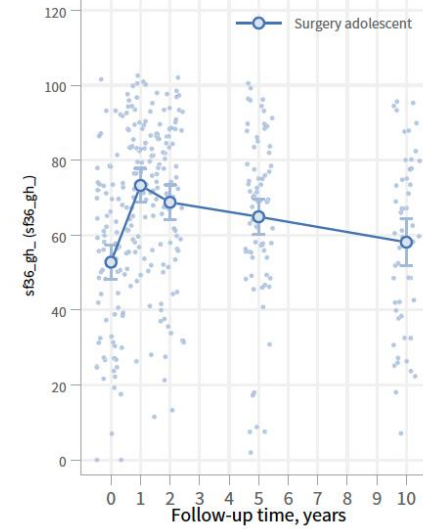
Role physical



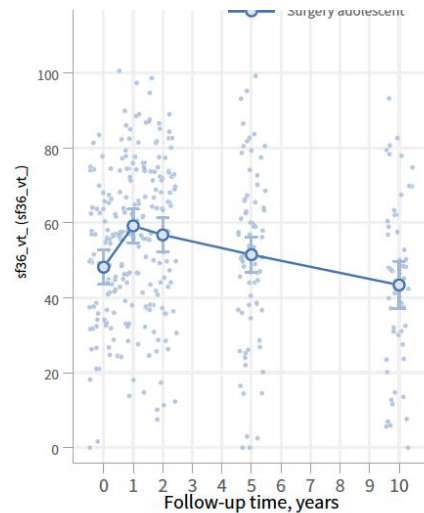
Bodily pain



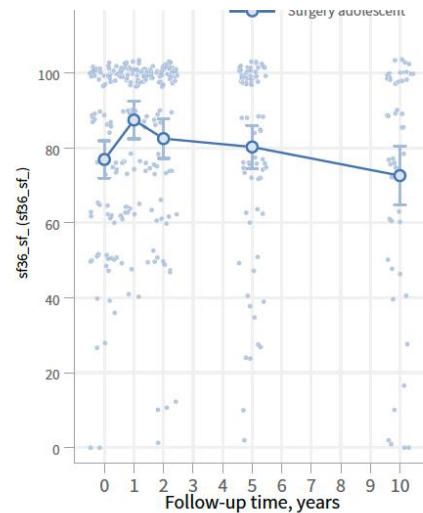
General health



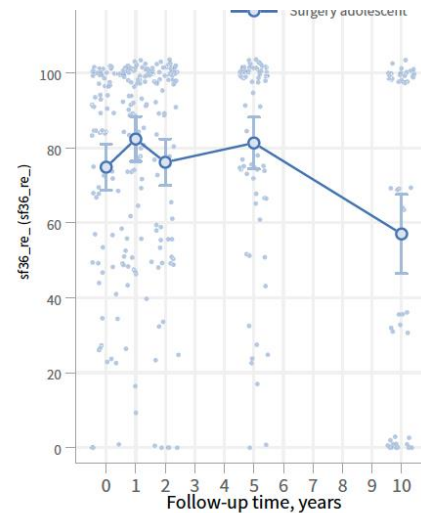
Vitality



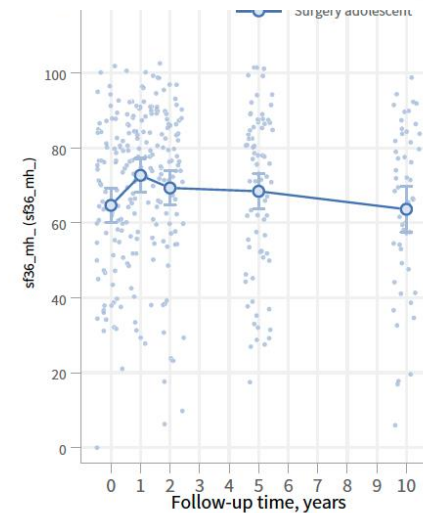
Social function



Role emotional

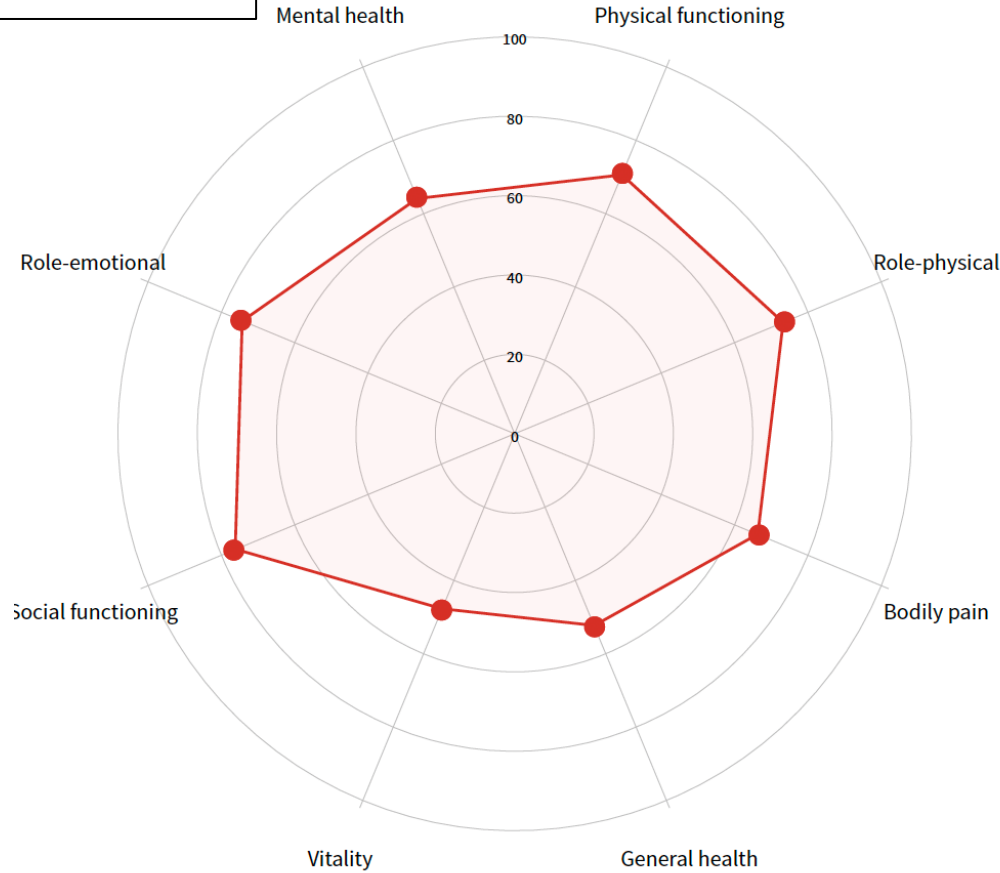


Mental health

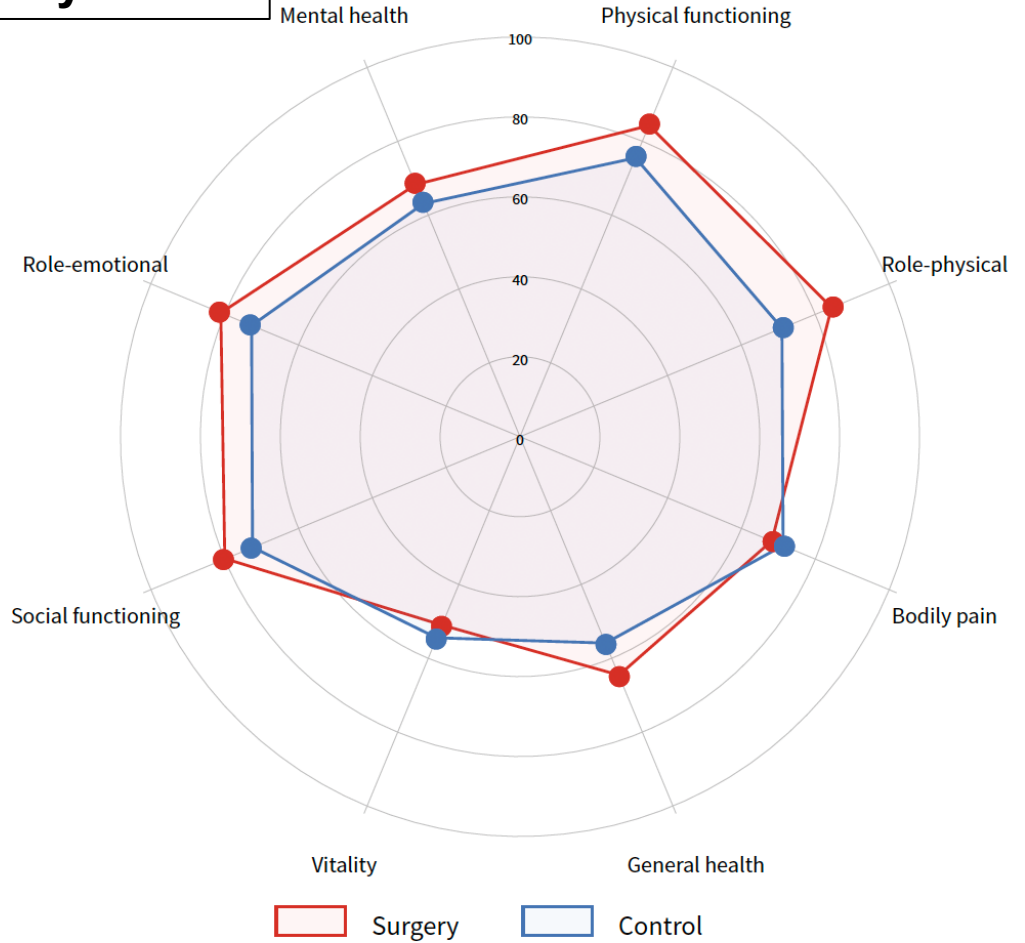


Secondary outcomes- *Quality of Life (AMOS2, 5y)*

Baseline



5 year



Legend: █ Surgery █ Control

Unpublished

Conclusions- *Secondary efficacy outcomes*

- Broad and sustained improvements in cardio-vascular risk factors
- Substantial and sustained improvements in **physical quality** of life.

Secondary safety outcomes

Adverse events in the surgical group n=4,

- all mild and without need for treatment.

Järvholm et al,
Lancet CAH, 2023



Safety outcomes -Height and Puberty

- Final height not affected
- Weight loss appears to be beneficial for pubertal development

Alqahtani et al. *J Am Coll Surg* 2021; 233: 657-664

He Q & Karlberg J. *Pediatr Res* 2001; 49: 244-251

Putri et al. *J Clin Endocrinol Metab* 2023; 109: e314-e320

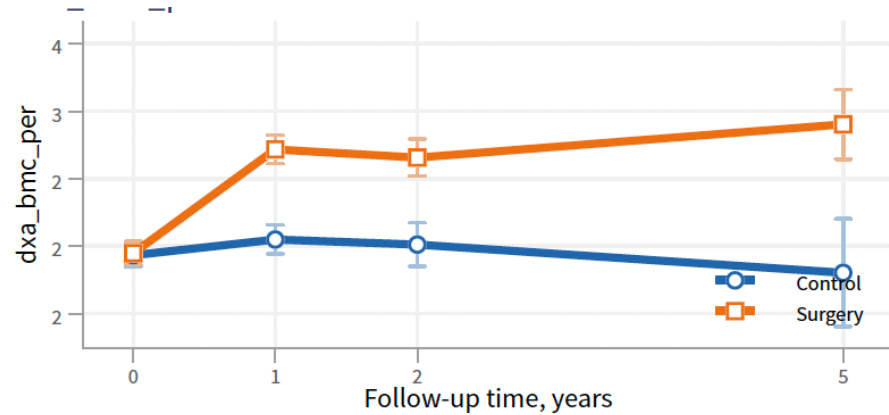
Secondary safety outcomes AMOS 5y – *Nutrition*

	Non-surgical	RYGB	p-value
Hemoglobin	138.6 (11.7) 23	134.7 (8.3) 23	0.199
B₁₂	. (.) 0	353.7 (51.2) 3	.
D-vitamin	43.7 (19.6) 6	46.3 (26.1) 9	0.838
Ferritin	25.0 (13.5) 3	39.5 (14.7) 4	0.239
Iron	8.8 (2.9) 4	12.7 (5.8) 6	0.251

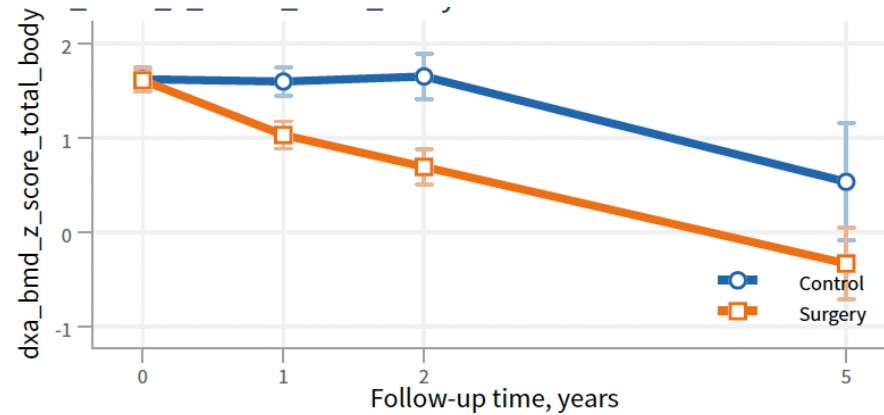
Unpublished

Secondary safety outcomes AMOS 5y – *Bone health*

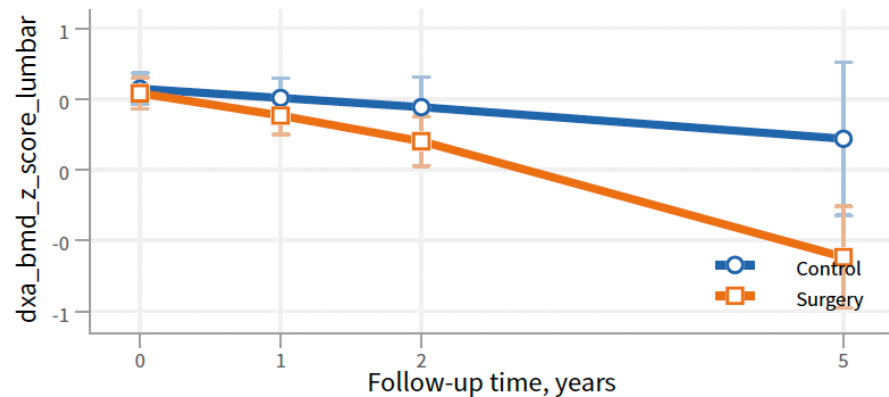
DEXA Bone Mineral Content



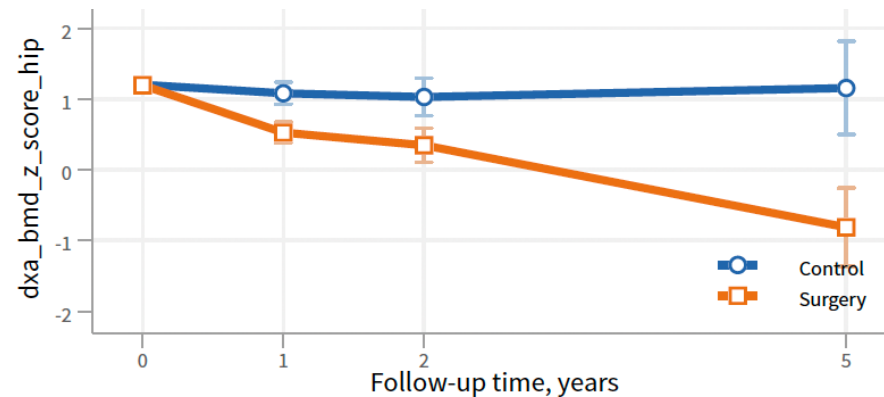
DEXA Bone Mineral Density (BMD) z-score



DEXA BMD z-score Lumbar

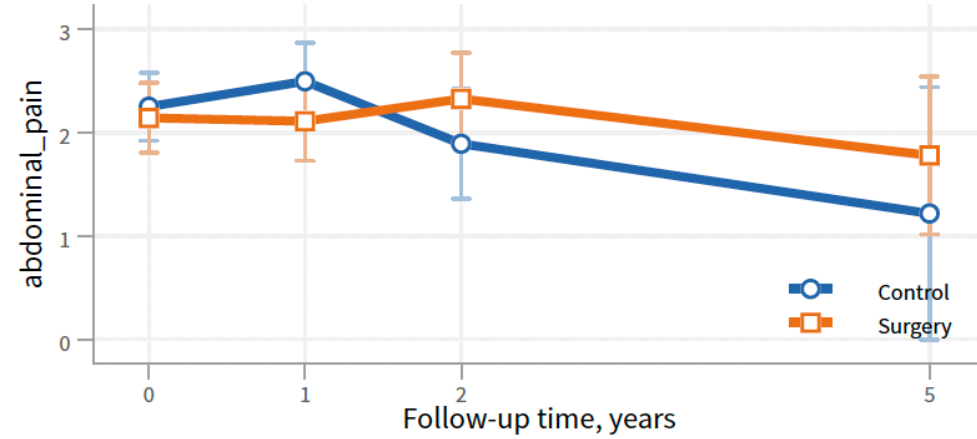


DEXA z-score Hip

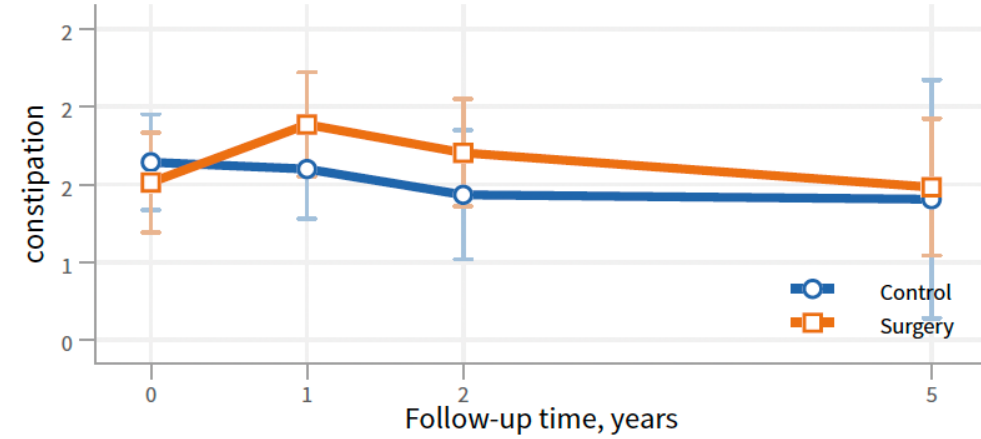


Gastro-Intestinal Symptoms

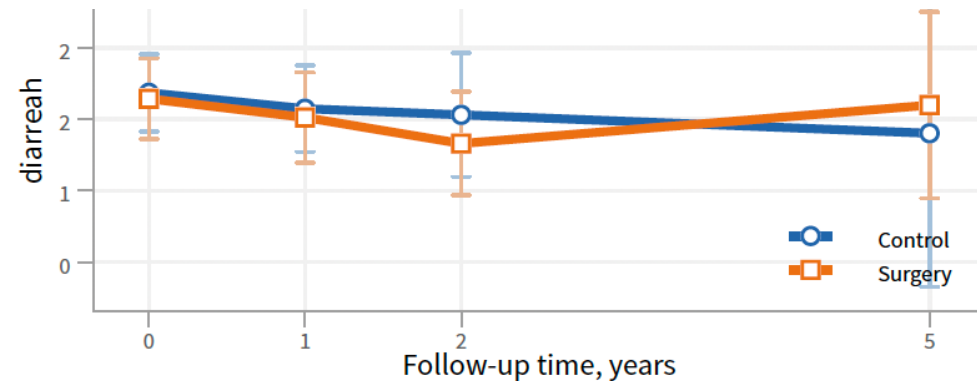
Abdominal pain



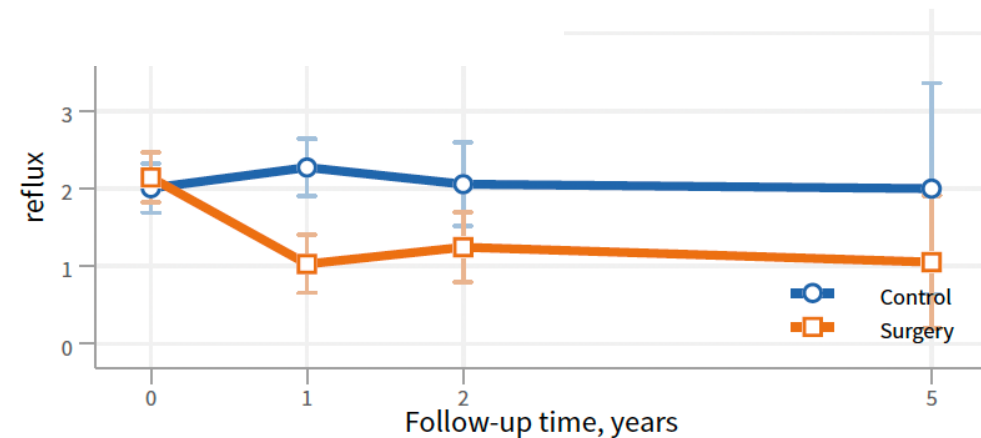
Constipation



Diarrhea



Reflux

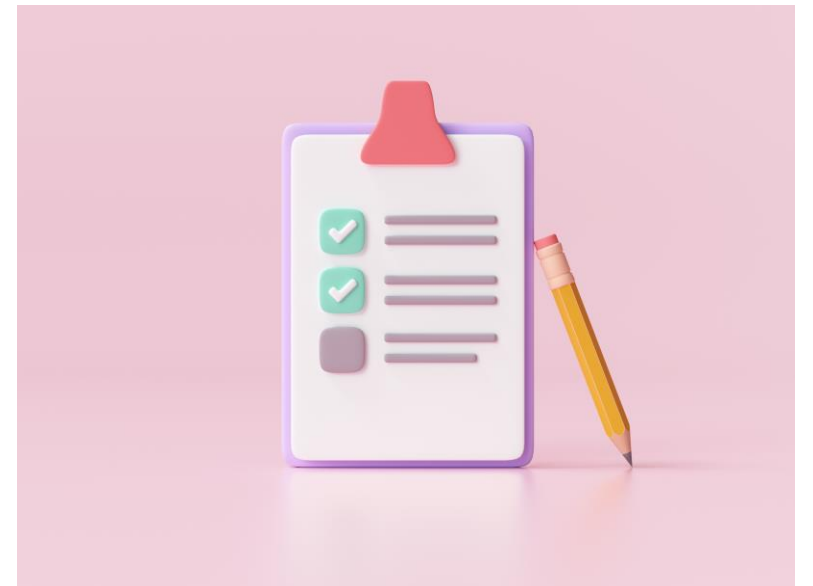


AMOS2- regretting participation?

- **Surgical group: None**
- **Non-surgical group: 2**

What should the adolescent considering surgery be told?

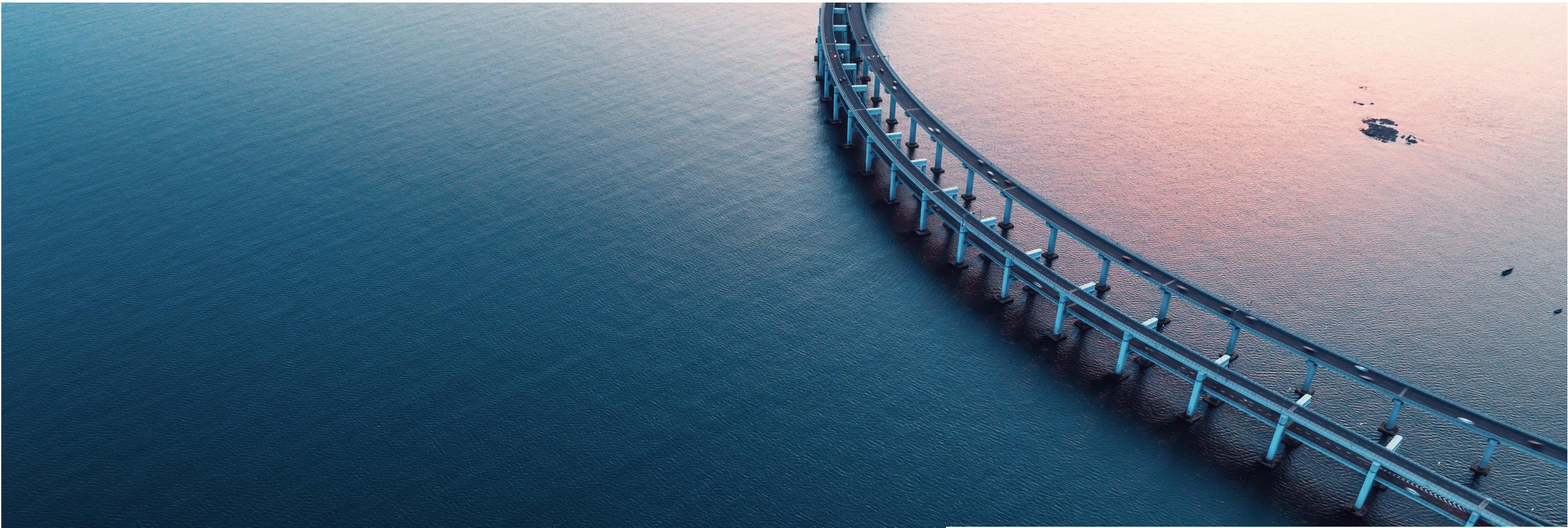
- You will most likely lose a lot of weight
- Weight loss makes you healthier, not necessarily “happier”
- We would like to follow you for many years after MBS
- You need to take supplements
- Please, contact us if you need our help!



Multidisciplinary team

- Pediatrician
- Pediatric nurse
- Psychologist
- Surgeon
- Dietician

At least one in the team should know the patient well



Mind the gap between the
child and adult clinics!

Further reading



Volume 108, Issue 9
September 2023

JOURNAL ARTICLE

Long-term Outcomes Following Adolescent Metabolic and Bariatric Surgery

Andrew J Beamish  , Elizabeth Ryan Harper , Kajsa Järholm , Annika Janson , Torsten Olbers

The Journal of Clinical Endocrinology & Metabolism, Volume 108, Issue 9, September 2023,
Pages 2184–2192, <https://doi.org/10.1210/clinem/dgad155>

Published: 22 March 2023 [Article history](#) ▼

Volume 96, Issue 6

December 2023





REVIEW ARTICLES | MARCH 09 2022


Metabolic and Bariatric Surgery in Adolescents: For Whom, When, and How?

Special Collection: [Karger e-Journal Backfile Collection 2023](#)

Subject Area:  Endocrinology ,  Women's and Children's Health

[Annika Janson](#)   ; [Kajsa Järholm](#)  ; [Lovisa Sjögren](#)  ; [Jovanna Dahlgren](#)  ;
[Andrew J. Beamish](#)  ; [Eva Gronowitz](#)  ; [Torsten Olbers](#)

Horm Res Paediatr (2023) 96 (6): 609–619.

<https://doi.org/10.1159/000524002>  [Article history](#)

PubMed:35263750

Review Article

Metabolic and bariatric surgery for adolescents with severe obesity: Benefits, risks, and specific considerations

[Kajsa Järholm](#)  , [Annika Janson](#) , [Pia Henfridsson](#) ,
[Martin Neovius](#) , [Lovisa Sjögren](#)
and [Torsten Olbers](#)



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Thank you!

