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Obesity surgery helps diabetics

CHICAGO - WEIGHT loss surgery can be especially helpful to patients with diabetes and can even help them reverse the disease, Australian researchers reported on Tuesday.

They found that obese patients with diabetes who had weight loss surgery were five times more likely to get their disease under control than those who dieted - probably because they lost more weight.

The study, published in the Journal of the American Medical Association, is among the first to look at surgery as a potential treatment for obese patients with type 2 diabetes.

Type 2 diabetes, which is closely linked to obesity, is on the rise worldwide. At least 170 million people are estimated to have the disease and the number is predicted to at least double by 2030.

Bariatric surgery, which involves altering the digestive system to limit food intake, has been growing at a rapid pace, with the number of procedures rising to 200,000 in the United States in 2006, from just 13,000 in 1998.

Dr John Dixon of Monash University in Melbourne and colleagues wanted to see if surgically induced weight loss could be an effective treatment for type 2 diabetes.

Dr Dixon's team studied 60 obese people with a body mass index greater than 30 but less than 40. Body mass index or BMI is a ratio of height and weight. A BMI of 30 or greater is considered obese.

Patients got either surgery or a weight loss programme that focused on diet and lifestyle changes.

Those in the surgery group were treated with an adjustable gastric banding device that limits food intake. Both groups also received conventional diabetes medications.

At the end of two years, 73 per cent of the diabetics who had surgery no longer had diabetes, compared with 13 per cent of those in the diet group. People who got surgery also needed far fewer diabetes medications.

The surgical group on average lost 20.7 per cent of their body weight, compared with 1.7 per cent in the diet and lifestyle group. There were no serious complications in either group.

It was the large weight loss, not the surgery per se, that helped the patients, the researchers said.

'This has important implications as it suggests that intensive weight-loss therapy may be a more effective first step in the management of diabetes than simple lifestyle change,' they wrote.

In a commentary in the same journal, Drs David Cummings and David Flum of the University of Washington in Seattle said policy and health leaders will need to balance the costs and risks of surgery against the chance of reversing diabetes.

But, they said, 'the insights already beginning to be gained by studying surgical interventions for diabetes may be the most profound since the discovery of insulin'. -- REUTERS

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