

The reality of an Obesity Surgical Treatment Center in Portugal

Authores

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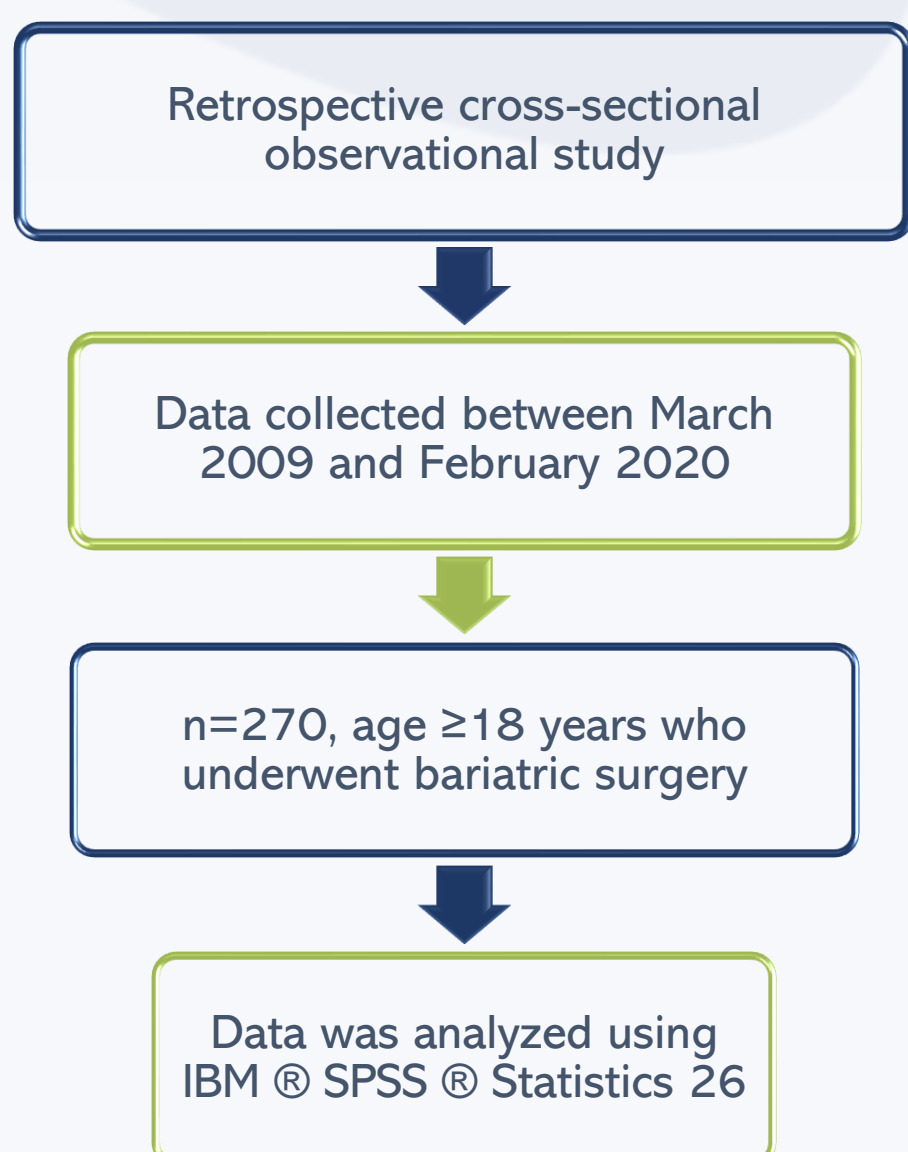
INTRODUCTION

Bariatric surgery is recognized as the most effective and durable treatment for morbid obesity, producing significant weight loss that substantially reduces the morbidity and mortality associated with obesity-related. Lusíadas Saúde was the first Portuguese health group to be recognized, by the European Association for the Study of Obesity, for the quality of care and provision of health care to obese patients.

OBJECTIVES

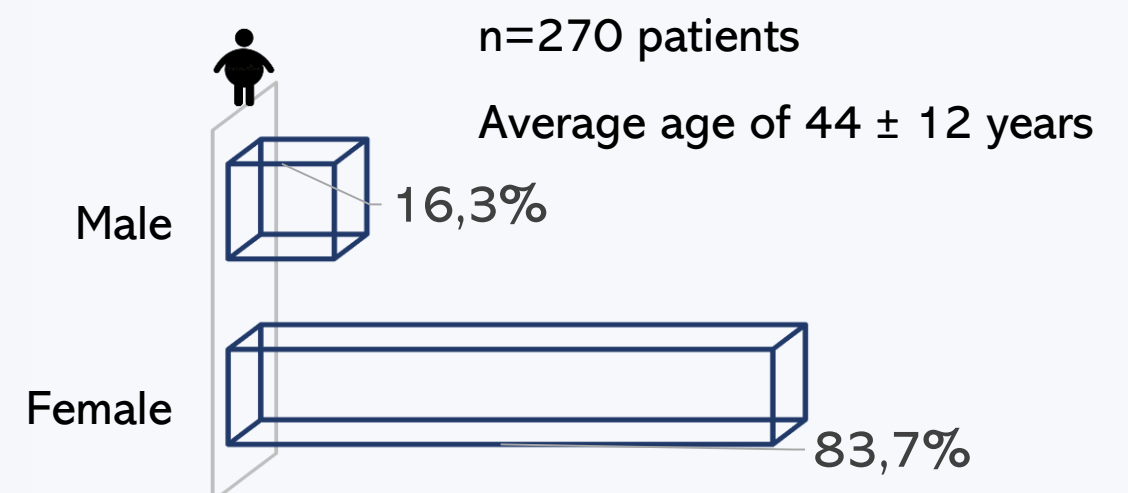
- Analyze the results of weight loss;
- Determine the type of surgery mostly performed.

METHODS

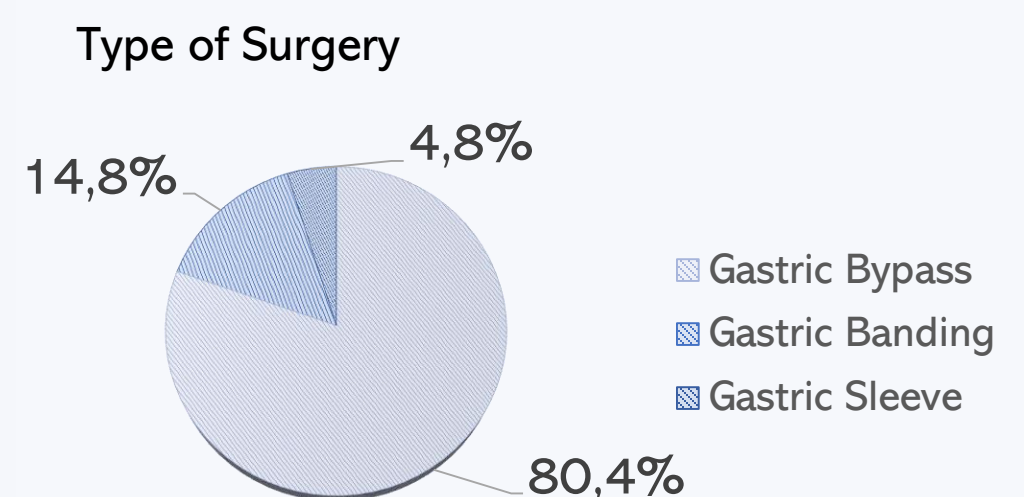


RESULTS

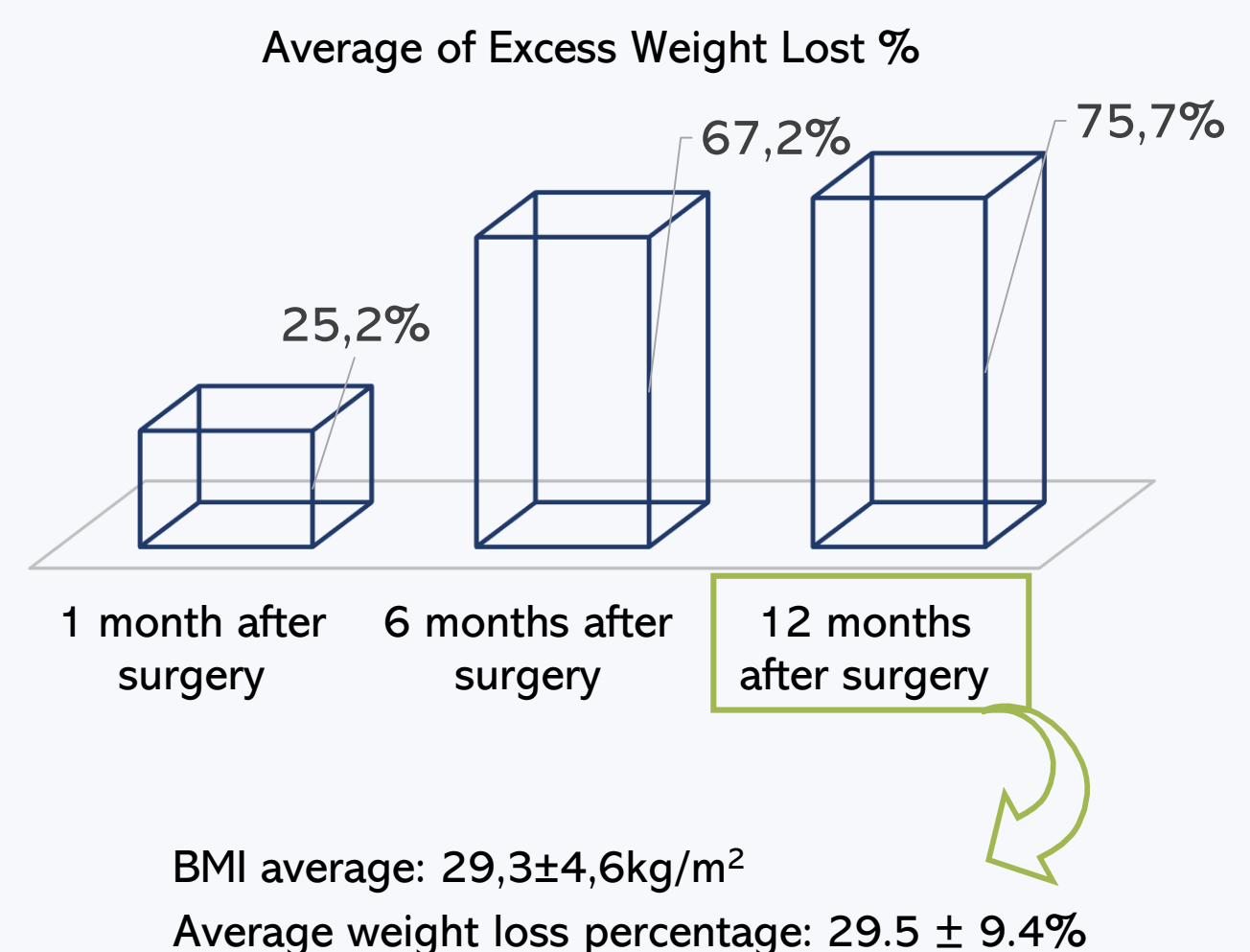
PRE-SURGERY



| | Weight | Body Mass Index (BMI) |
|---------|---------------|----------------------------|
| Maximum | 180 kg | 60,1 kg/m ² |
| Minimum | 77 kg | 30 kg/m ² |
| Average | 111,4±17,9 kg | 41,1±4,9 kg/m ² |



POST-SURGERY



CONCLUSION

Gastric Bypass is the mostly performed surgery, because it is the Gold Standard method for surgical treatment of obesity in this center. On average, all surgeries performed have extremely positive results of excess weight lost. After 1 year, patients maintained an average weight loss percentage of 29.5 ± 9.4%, in line with data presented in a study that estimated an average recorded weight loss percentage of 28.9%. Data like those presented by the American Society for Nutrition (ASN), the Obesity Action Coalition (OAC), the International Federation for the Surgery of Obesity and Metabolic Disorders (IFSO), the International Society for the Perioperative Care of the Obese Patient (ISPCOP) and the American Society for Parenteral and Enteral Nutrition (ASPEN) (2019), indicate a target weight loss percentage between 20 and 45%.

REFERENCES

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- Mechanick JI, Apovian C, Brethauer S, Garvey WT, Joffe AM, Kim J, et al. Clinical practice guidelines for the perioperative nutrition, metabolic, and nonsurgical support of patients undergoing bariatric procedures – 2019 update: cosponsored by American Association of Clinical Endocrinologists/American College of Endocrinology. *Surg Obes Relat Dis.* 2019;16(2):175–247.