

Postoperative micronutrient replacement for patients after bariatric surgery

In Sept 2014 the British Obesity and Metabolic Surgery Society (BOMSS) produced guidance on postoperative micronutrient replacement for patients after bariatric surgery. We conducted a retrospective study to see if we conformed to this guidance.

10 patients had laparoscopic gastric bypass surgery

Age range 31- 66 years old. All female (3 privately, 7 NHS).

BMI pre-op 38.2 to 61.7 and **latest post-op BMI** (one 17.7 and under specialist care) 24.4 - 52.

5/10 patients had their BMI recorded in the past 12 months.

All patients had clear instructions about blood tests and micronutrient prescriptions from secondary care available in their computerised notes.

4/10 patients developed iron deficiency anaemia.

1/10 patient developed vitamin D deficiency.

5/10 repeat prescriptions were compliant with BOMSS guidance.

0/10 patients received all the recommended blood tests annually.

Relevance and Impact:

Patients post bariatric surgery are getting suboptimal care in micronutrient supplementation and monitoring, resulting in anaemia, often 3-4 years post procedure. This group is likely to increase in numbers in line with weight loss protocols

Outcomes:

Our patients were contacted and care improved. They received education and information about their long-term requirements for monitoring and therapy.

Discussion:

BOMSS guidance <http://www.bomss.org.uk/wp-content/uploads/2014/09/BOMSS-guidelines-Final-version1Oct14.pdf> lists bloods and prescriptions required post various obesity procedures by table.

GP monitoring arrives after specialist OPC discharge at 2 years post-op and after GP repeat prescription setup, which is created immediately. General practices might be more likely to implement nutrient monitoring if the responsibility was theirs at outset and if patients had a shared care record of results.

Please collect a leaflet outlining the guidance for your practice here

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