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The Safety and Efficacy of Bariatric Surgery and Cardiovascular Disease

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Description

As obesity rates continue to rise globally, the demand for effective treatment options has become increasingly urgent. Among the arsenal of interventions, metabolic bariatric surgery has emerged as a viable solution for individuals struggling with severe obesity. While guidelines traditionally recommended surgery primarily for younger patients with significant comorbidities, recent research has shed light on the safety and efficacy of bariatric procedures for older adults, including those aged 65 and above. Historically, age was often considered a contraindication for bariatric surgery due to concerns about increased surgical risks and reduced long-term benefits. However, evolving evidence challenges this notion, suggesting that age alone should not preclude older adults from accessing potentially life-changing treatments. In fact, current guidelines advocate for bariatric surgery in individuals aged 65 and older, provided careful selection and assessment are undertaken to mitigate perioperative risks. Key among the considerations for older adults undergoing bariatric surgery is the choice of procedure. Laparoscopic Roux-en-Y-gastric bypass and sleeve gastrectomy have emerged as the preferred options, offering favorable outcomes in terms of weight loss and improvement in metabolic parameters.

Weight loss

These procedures, commonly performed in younger patients, have demonstrated comparable safety and efficacy profiles in older adults, paving the way for broader acceptance and adoption within this population. A growing body of research has examined the safety and efficacy of bariatric surgery specifically in individuals aged 65 and older. Studies have consistently shown that older adults can achieve significant weight loss and improvements in metabolic health following surgery, with rates of complications comparable to those seen in younger cohorts. Importantly, bariatric surgery has been associated with

reductions in obesity-related comorbidities, such as type 2 diabetes, hypertension, and cardiovascular disease, leading to enhanced quality of life and longevity. Efforts to optimize perioperative care and long-term outcomes for older adults undergoing bariatric surgery have also gained momentum. Multidisciplinary teams, including geriatricians, nutritionists, and psychologists, collaborate to provide comprehensive preoperative assessment and postoperative support tailored to the unique needs of older patients.

Metabolic improvement

Strategies to minimize surgical risks, such as prehabilitation programs and enhanced monitoring protocols, are being increasingly implemented to ensure favorable outcomes. Bariatric surgery represents a promising treatment option for individuals aged 65 and older with obesity, offering substantial benefits in terms of weight loss, metabolic improvement, and disease prevention. While challenges remain, including optimizing patient selection and perioperative management, the accumulating evidence underscores the safety and efficacy of bariatric procedures in older adults. By embracing this evolving paradigm, healthcare providers can empower older individuals to reclaim their health and wellbeing, irrespective of age. Furthermore, ongoing research endeavors aim to address remaining gaps in knowledge regarding bariatric surgery in older adults. Long-term follow-up studies are needed to assess durability of weight loss and metabolic improvements, as well as potential late-onset complications. Additionally, investigations into the psychosocial aspects of bariatric surgery in older populations, including quality of life, mental health outcomes, and adherence to dietary and lifestyle modifications, are warranted. By expanding our understanding of bariatric surgery outcomes in older adults and refining clinical practices accordingly, we can ensure that age is not a barrier to accessing effective obesity management strategies.