



**BARIATRIC SURGICAL SOCIETY TAKES ON NEW NAME, NEW MISSION
AND NEW SURGERY**

**Metabolic Surgery Expected to Play Bigger Role in Treating Type 2 Diabetes
And Other Metabolic Diseases**

GAINESVILLE, FL - AUGUST 22, 2007 – Bariatric surgery is known to be the most effective and long lasting treatment for morbid obesity and many related conditions, but now mounting evidence suggests it may be among the most effective treatments for metabolic diseases and conditions including type 2 diabetes, hypertension, high cholesterol, non-alcoholic fatty liver disease and obstructive sleep apnea.

“Surgery for severe obesity goes way beyond weight loss. This surgery results in the complete remission or significant improvement of type 2 diabetes and other life-threatening diseases in most patients. The Society’s new name and mission reflects this expanded and evolving view of surgery,” said Kelvin Higa, MD, clinical professor of surgery, UCSF- Fresno and president of the newly named American Society for Metabolic & Bariatric Surgery (ASMBS). “People generally don’t think of surgery as a treatment for diabetes or high blood pressure, but it is, and we expect metabolic surgery to play an ever increasing role in managing these diseases.”

The ASMBS was formerly known as the American Society for Bariatric Surgery (ASBS). The name change comes nearly 25 years after the Society was founded. The Society has nearly 3,000 members, which includes surgeons and other health professionals including nurses, bariatricians, psychologists, dieticians and other medical specialists.

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Metabolism is the process by which the body converts food to energy at the cellular level. The most common metabolic disease is type 2 diabetes, which occurs when the body does not adequately metabolize or regulate blood sugars due to lack of insulin or the body's inability to respond to the insulin that is produced. According to the American Diabetes Association (ADA), nearly 21 million people in the U.S. have type 2 diabetes and another 54 million have pre-diabetes.

Increased body fat is associated with an increased risk for metabolic diseases. According to the National Health and Nutrition Examination Survey (NHANES, 1999-2002), which was conducted by CDC's National Center for Health Statistics, more than half (51%) of those with diabetes had a body mass index (BMI) of 30 or more and about 80 percent of those with a BMI of 35 or more had one or more metabolic diseases.

New research indicates that metabolic surgery may improve insulin resistance and secretion by mechanisms independent of weight loss – most likely involving changes in gastrointestinal hormones. Many patients with type 2 diabetes experience complete remission within days of metabolic surgery, long before significant weight comes off. This has led to new thinking that metabolic surgery may also be appropriate for diabetic individuals who are of normal weight or only slightly overweight.

Walter Pories, MD, professor of surgery and biochemistry at East Carolina University and past president of the ASMBS, pioneered research into the effect of bariatric surgery on type 2 diabetes in a landmark paper published in the *Annals of Surgery* in 1992. The paper entitled, "Is type II diabetes mellitus (NIDDM) a surgical disease?" reported the remission of type 2 diabetes after gastric bypass.

"Twenty-five years ago we were astonished by the curative effect the surgery had on type 2 diabetes," said Dr. Pories, chairman of the Surgical Review Corporation, a non-profit corporation that reviews bariatric surgery centers of excellence. "Today it's one of the main reasons people have surgery and I'm confident new research into metabolic surgery will lead to further advances."

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Most research into metabolic and bariatric surgery has been limited to patients who are morbidly obese, meaning 100 pounds or more overweight (body mass index (BMI) of 40 or more) or 75 pounds or more overweight (BMI of 35 or more) with an obesity-related condition such as type 2 diabetes.

According to a landmark study published in the *Journal of the American Medical Association (JAMA)* in 2004, bariatric surgery patients showed improvements in the following metabolic conditions:

- Type 2 diabetes remission in 76.8% and significantly improved in 86% of patients
- Hypertension eliminated in 61.7% and significantly improved in 78.5% of patients
- High cholesterol reduced in more than 70% of patients
- Sleep apnea was eliminated 85.7% of patients

Joint disease, asthma and infertility were also dramatically improved or resolved. The study showed that surgery patients lost between 62 and 75 percent of excess weight.

Earlier this year, 25 international medical organizations and more than 60 leading experts in diabetes and metabolic disease including the ASMBS, ADA, NAASO – The Obesity Society, and The European Association for the Study of Diabetes (EASD) convened in Rome, Italy for a summit and consensus conference to review the medical evidence on the effects of gastrointestinal operations on diabetes. The group is expected to announce its findings on the role of metabolic surgery in treating type 2 diabetes later this year.

“The evidence is extensive. Most studies show prevention, improvement or remission of type 2 diabetes after surgery with a relatively low rate of risk in appropriate patients,” said Philip Schauer, MD, immediate past president of the ASMBS, director of the Cleveland Clinic Bariatric and Metabolic Institute (BMI), and one of the organizers of the Rome summit. “Metabolic surgery may be the key to battling the twin epidemics of obesity and diabetes, and surgery is becoming safer and safer.”

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According to a recent study from the Agency for Healthcare Research and Quality (AHRQ), the mortality rate associated with bariatric surgery dropped by a staggering 78.7 percent, from 0.89 percent in 1998 to 0.19 percent in 2004. Meanwhile, the mortality rate from morbid obesity was reduced by 89 percent after bariatric or metabolic surgery, according to a study published in the *Annals of Surgery* in 2004.

In 2006, the ASMBS reports an estimated 177,600 people in the U.S. had bariatric surgery. Less than 1 percent of those who meet the criteria for surgery actually have surgery. About 15 million or 1 in 50, adults in the U.S. have morbid obesity, which is associated with more than 30 other diseases and conditions including type 2 diabetes, heart disease, sleep apnea, hypertension, asthma, cancer, joint problems and infertility. The direct and indirect costs to the health care system associated with obesity are about \$117 billion annually.

The most common procedures include gastric bypass, adjustable gastric band and biliopancreatic diversion with duodenal switch. Most of these procedures are performed laparoscopically using minimally invasive techniques.

AMERICAN SOCIETY FOR METABOLIC & BARIATRIC SURGERY (ASMBS)

The ASMBS is a non-profit organization working to advance the quality of care and ethical treatment of people with obesity and obesity-related and metabolic diseases and conditions. The ASMBS educates health professionals and consumers about the dangers of obesity and metabolic diseases and the risks and benefits of bariatric and metabolic surgery. The Society develops and promotes high quality standards and practices that lead to improved patient outcomes and supports research into emerging treatments for obesity and metabolic diseases. For more information about the ASMBS visit www.asmb.org.

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