

AB050. SOH22ABS020. Early post-operative outcomes for patients on immunosuppression undergoing primary bariatric surgery

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Background: There is a paucity of data regarding the effects of immunosuppressants on bariatric surgery outcomes. The primary aim was to evaluate 30-day morbidity and mortality in immunosuppressed patients undergoing bariatric surgery. Secondary aims included adherence to an enhanced recovery after bariatric surgery (ERABS) protocol and weight loss outcomes.

Methods: A prospectively maintained database of patients undergoing bariatric surgery between August 2017-April 2020 was used to identify patients who were taking immunosuppressant medications preoperatively. Their clinical data were compared to patients not taking immunosuppressants.

Results: A total of 183 patients underwent primary bariatric surgery, 10 (5.5%) were taking immunosuppressive medication [glucocorticoids (n=1), methotrexate (n=4), and a combination of monoclonal antibody and methotrexate (n=5)]. The mean age was similar between groups (47 years versus 49 years), as was the mean preoperative weight and body mass index (BMI) (135.44±24 vs. 147.48±33.5 kg and 59.9±5.5 vs. 51.8±9.3 kg/m²). There was no 30-day mortality. The overall 30-day morbidity was 10.9%. No significant difference in morbidity between the immunosuppressed and non-immunosuppressed group was observed (P=0.91). The

median length of stay was 2 days in both groups. Readmission rates and re-operation rates were 6.94% and 4.62% in the non-immunosuppressed group compared to 0% in the immunosuppressed group. The mean 6-month weight loss was comparable in both groups.

Conclusions: This small series suggests that patients on immunosuppression are not at increased risk of morbidity or mortality after bariatric surgery, and have comparable weight loss outcomes.

Keywords: Enhanced recovery after bariatric surgery (ERABS); immunosuppression; post operative outcomes, primary bariatric surgery; weight loss

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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