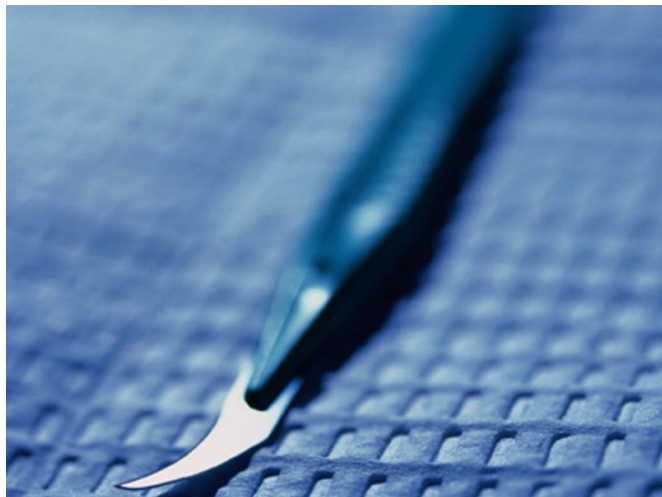


# Long-term weight loss, T2DM remission for roux-en-Y surgery

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at baseline, diabetes remission occurred in 75, 62, and 51 percent at two, six, and 12 years, respectively. For the incidence of type 2 diabetes at 12 years, the odds ratios were 0.08 and 0.09 for the surgery group versus nonsurgery group 1 and nonsurgery group 2, respectively. Higher remission rates and lower incidence of hypertension and dyslipidemia were seen for the [surgery](#) group versus nonsurgery group 1.

"This study showed long-term durability of weight loss and effective remission and prevention of type 2 diabetes, hypertension, and dyslipidemia after Roux-en-Y gastric bypass," the authors write.

One author received royalties for licensing of the Impact of Weight on Quality of Life-Life questionnaire; a second disclosed financial ties to Obalon Therapeutics.

(HealthDay)—For patients with severe obesity, Roux-en-Y gastric bypass is associated with lasting benefits, according to a study published in the Sept. 21 issue of the *New England Journal of Medicine*.

Ted D. Adams, Ph.D., M.P.H., from Intermountain Live Well Center Salt Lake in Salt Lake City, and colleagues reported 12-year follow-up data for 1,156 [patients](#) with [severe obesity](#) in three groups: 418 patients sought and underwent Roux-en-Y-gastric bypass (surgery group), 417 patients sought but did not undergo surgery (nonsurgery group 1), and 321 patients did not seek surgery (nonsurgery group 2).

The researchers found that the adjusted mean changes from baseline in body weight in the surgery group were ?45.0, ?36.3, and ?35.0 kg at two, six, and 12 years, respectively; the mean changes at 12 years were ?2.9 and 0 kg in nonsurgery groups 1 and 2, respectively. For patients in the surgery group with type 2 [diabetes](#)

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