

Outcomes similar for younger, older teens undergoing bariatric surgery

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and quality of life. The likelihood of developing elevated transferrin and low vitamin D levels was lower for younger adolescents (prevalence ratios, 0.52 and 0.80, respectively).

"The findings in this study support the use of early intervention based on clinical indication rather than age alone, thereby providing the patient with the best opportunity to reach a normal BMI after surgery, promoting resolution of complications of obesity, and reducing the number of obese years in a child's lifetime," the authors write.

One author disclosed financial ties to the biotechnology and medical technology industries.

More information: Abstract/Full Text

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(HealthDay)—Outcomes are similar for younger and older adolescents undergoing bariatric surgery, according to a study published online Feb. 1 in *Pediatrics*.

Sarah B. Ogle, D.O., from the University of Colorado in Aurora, and colleagues enrolled 242 adolescents (?19 years of age) who underwent <u>bariatric surgery</u> in a prospective, multicenter, longterm outcome study. Outcome data, including percent body mass index (BMI) change, comorbidity outcomes, nutritional abnormalities, and quality of life during the five years after surgery, were compared for 66 younger (13 to 15 years) and 162 older (16 to 19 years) adolescents.

For younger and <u>older adolescents</u>, the researchers observed no significant differences in the frequency of remission of hypertension or dyslipidemia. High remission of type 2 <u>diabetes</u> <u>mellitus</u> was seen in both groups, with statistically higher remission in older adolescents (relative risk, 0.86). The two age groups had similar weight loss



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