

# High rate of symptoms, hospitalization following gastric bypass surgery for obesity

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Although the vast majority of patients reported improved well-being after Roux-en-Y gastric bypass (RYGB) surgery, the prevalence of symptoms such as abdominal pain and fatigue were high and nearly one-third of patients were hospitalized, according to a study published online by *JAMA Surgery*.

For [patients](#) with morbid obesity, bariatric surgery, including RYGB surgery, is an effective treatment for weight loss and diseases associated with obesity. However, various medical, nutritional, and surgical [symptoms](#) requiring treatment may occur after RYGB surgery and may impair patients' quality of life (QoL). Knowledge about possible predictors of these symptoms is important for prevention.

Sigrid Bjerge Gribsholt, M.D., of Aarhus University Hospital, Aarhus, Denmark, and colleagues surveyed patients who underwent RYGB surgery between January 2006 and December 2011 in the Central Denmark Region. A comparison cohort of 89 individuals who were matched with patients according to sex and [body mass index](#) but who did not undergo RYGB surgery were surveyed as a point of reference. The researchers measured the prevalence and severity (based on contacts with health care system, ranging from no contact to hospitalization) of self-reported symptoms following RYGB surgery.

Of 2,238 patients undergoing RYGB surgery, 1,429 (64 percent) responded to the survey. Among these patients, 89 percent reported 1 or more symptoms a median of 4.7 years after RYGB surgery. A total of 1,219 of 1,394 patients (87 percent) reported that their well-being was improved after vs before RYGB surgery, while 8 percent reported reduced well-being. Sixty-eight percent of patients had been in contact with the health care system about their symptoms vs 35 percent of those in the comparison group, and 29 percent had been hospitalized vs 7 percent of

those in the comparison group.

The symptoms most commonly leading to [health care](#) contact after RYGB surgery were [abdominal pain](#) (34 percent), fatigue (34 percent), anemia (28 percent) and gallstones (16 percent). The risk of symptoms was higher among women, among patients younger than 35 years, among smokers, among unemployed persons, and in those with surgical symptoms before RYGB [surgery](#). Quality of life was inversely associated with the number of symptoms.

"Focus on the QoL among patients with many symptoms may be required since such patients are at risk of depression. Development of new [weight loss](#) treatments with less risk of subsequent symptoms should be a high priority," the authors write.

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