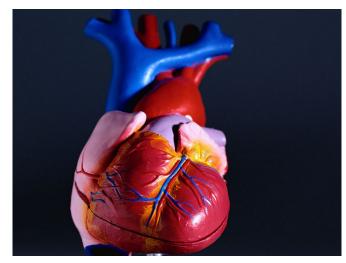


Sleeve gastrectomy improves left ventricular systolic function

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volume (SV) at six months after surgery; in addition, patients had an increase in SV index and ejection fraction. Baseline LV end-diastolic dimension, and baseline and after surgery LV mass, LV mass index, and LV mass/height^{2.7} were all significantly higher in men; other variables did not differ significantly between men and women.

"Sleeve gastrectomy improves LV systolic function and contributes to reverse LV remodeling in both genders," the authors write.

More information: <u>Abstract</u>
<u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—For men and women, sleeve gastrectomy improves left ventricular (LV) systolic function, according to a study published online April 27 in the *Journal of Clinical Ultrasound*.

Tu?ba Kemalo?lu Öz, M.D., from Dr. Siyami Ersek Thoracic and Cardiovascular Surgery Training and Research Hospital in Istanbul, and colleagues compared the effects of weight loss after sleeve gastrectomy on LV systolic function using two-dimensional speckle tracking (2D-STE) and three-dimensional echocardiography (3DE) in men versus women. Data were included for 53 obese patients (62.3 percent female) referred for sleeve gastrectomy. Participants underwent 2D-STE and 3DE prior to and six months after surgery.

The researchers found that all patients demonstrated a significant decrease in <u>body mass index</u>, body weight, blood pressure, heart rate, LV end-diastolic dimension, myocardial wall thickness, LV mass, LV mass index, LV mass/height^{2.7}, LV end-diastolic and -systolic volume, and stroke



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