

Prevalence of pediatric metabolic, bariatric surgery examined

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significantly. From 2005 to 2014, there was a decrease in in-hospital complications from 8.8 to 2 percent. From 2005 to 2014, there was an increase in vertical sleeve gastrectomy and a decrease in laparoscopic Roux-en-Y gastric bypass. Use of the adjustable gastric band peaked in 2009 and then decreased.

"The possible causes for the low rate of surgical management among this population are multifactorial and include a likely overestimation of the short- and long-term risks of MBS along with an underrecognition of the long-term detrimental consequences of <u>pediatric obesity</u>," the authors write.

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

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(HealthDay)—From 2005 through 2014, an estimated 14,178 metabolic and bariatric surgery (MBS) procedures were performed among pediatric patients aged 20 years and younger with severe obesity, according to a research letter published online Oct. 22 in *JAMA Pediatrics*.

Cornelia L. Griggs, M.D., from Massachusetts General Hospital in Boston, and colleagues examined contemporary trends in the use of MBS among U.S. children, adolescents, and young adults with <u>severe obesity</u> using data from the Kids' Inpatient Database and National Inpatient Sample.

The researchers found that among <u>pediatric</u> <u>patients</u> aged 20 years or younger, an estimated 14,178 MBS procedures were performed from 2005 through 2014. Patients were mainly white versus black and Hispanic (59.4 versus 15.4 and 17.5 percent, respectively) and mainly female versus male (78.1 versus 21.9 percent). During the 10-year period, these numbers did not change



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