

Bariatric surgery in teens may cut diabetic kidney disease risk

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and increased from 7 to 48 percent in TODAY during five years of follow-up. There was a decrease in elevated UAE from 27 to 5 percent in Teen-LABS and an increase from 21 to 43 percent in TODAY. TODAY participants had greater odds of hyperfiltration and elevated UAE at five years of follow-up after adjustment for baseline age, sex, body mass index, and hemoglobin A1c (odds ratios, 15.7 and 27.3, respectively).

"Surgical treatment of severely obese youth with type 2 <u>diabetes</u> is associated with substantially lower odds of diabetic kidney disease over five years of follow-up compared with standard medical therapy," the authors write.

Several <u>pharmaceutical companies</u> provided donations to support the TODAY study.

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

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(HealthDay)—Among obese adolescents with type 2 diabetes, metabolic bariatric surgery is associated with decreased rates of hyperfiltration and elevated urinary albumin excretion (UAE), according to a study published in the January issue of *Diabetes Care*.

Petter Bjornstad, M.D., from the University of Colorado Anschutz Medical Campus in Aurora, and colleagues performed a secondary analysis of data obtained from obese adolescents.

Participants were enrolled in either the Teen-Longitudinal Assessment of Bariatric Surgery (Teen-LABS) study and underwent metabolic bariatric surgery or the Treatment Options of Type 2 Diabetes in Adolescents and Youth (TODAY) studies and were randomly assigned to metformin alone or in combination with rosiglitazone or intensive lifestyle intervention (30 and 63 participants, respectively).

The researchers found that hyperfiltration decreased from 21 to 18 percent in Teen-LABS



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