

PSYCHOLOGICAL CHANGES AFTER SLEEVE GASTRECTOMY

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INTRODUCTION

The aim of this study was to observe the psychological evolution at one year in a group of patients undergoing laparoscopic sleeve gastrectomy (LSG) and multidisciplinary follow-up.

METHODS

Initially -before the LSG surgery- patients filled in a series of tests: Bulimic Investigatory Test Edinburgh BITE; Body Shape Questionnaire BSQ; Health Questionnaire SF-36; Quality of Life Index QLI-SP; and Eating Disorders Inventory EDI-1. At 12 months there was a second psychometric evaluation (same test protocol). A group of 39 patients completed the test to the 12 months. Mostly women (M/F = 9/30), having an average age of 37 years.

RESULTS

After 12 months, average body mass index (BMI) decreased from 43 ± 6 to 27 ± 4 ($p < 0.01$). Psychological tests showed an improvement on almost all scales tested, except perfectionism. In the next table you can see the most significant changes:

	Bulimia	Body Dissatisfaction	Mental Health	Social Functioning	Physical Functioning	Vitality	General Health	Quality of Life
0 months	1,78	17,03	60,40	76,06	66,63	48,00	51,75	63,33
12 months	0,26	7,32	76,32	91,12	96,45	72,89	80,92	80,66
Improvement	1,51	9,71	15,92	15,06	29,82	24,89	29,17	17,33
%	85,17	57,03	20,86	16,52	30,92	34,15	36,05	21,49
p	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01

DISCUSSION

At our study, with a protocol involving laparoscopic sleeve gastrectomy and multidisciplinary follow-up, is an effective intervention for improving bulimic symptoms and quality of living, and the result of this psychological changes, are closer to Roux-en-Y Gastric Bypass than Vertical Banded Gastroplasty or Adjustable Gastric Band. However, long-term studies are necessary to confirm this trend.

REFERENCES

- 1- Cánovas B, Sastre J, Moreno G, et al. Effect of a multidisciplinary protocol on the clinical results obtained after bariatric surgery. *Nutr Hosp* 2011;26:116-21.
- 2- Pataky Z, Carrard I, Golay A. Psychological factors and weight loss in bariatric surgery. *Curr Opin Gastroenterol* 2011;27:167-73.
- 3- Henderson M, Freeman A. Self-rating Scale for Bulimia. The BITE. *Br J Psychiatry* 1987;150:18-24.
- 4- Ware JR, Sherbourne CD. The MOS 36-item short-form health survey (SF-36) (I). Conceptual framework and item selection. *Med Care* 1992;30:473-83.