Analyzing long-term BMI change following gastric bypass surgery

Nils Carlsson Division of Public Health Sciences Department of Surgery

Obesity and overweight

- Obesity and overweight are conditions in which excess body fat accumulates.
- Both are associated with increased mortality
- Both are associated with increased incidence of many illnesses, including hypertension, diabetes, coronary heart disease, and stroke

How to classify overweight and obesity

- $BMI = \frac{weight(kg)}{height^2(m^2)}$
- Overweight : BMI ≥ 25.
 Obese: BMI ≥ 30.
- What BMI is not: an absolute indicator of healthy versus unhealthy weight
- What BMI is: a convenient and useful way to approximate body fat in an individual



Lebron James: Perennial NBA All Star Height: 6'8" (203 cm) Weight: 249 lbs (113 kg) <u>BMI: 27.4 kg/m²</u>

Obesity and overweight in the United States

- More than one-third of U.S. adults are obese, while two-thirds are overweight.
- Improving diet and exercising regularly are two ways to prevent excess fat accumulation.
- Bariatric surgery is most effective; refers to a variety of procedures in which part of the stomach is either removed or modified

Types of Bariatric Surgery

 Four examples of bariatric surgery procedures are gastric bypass, sleeve gastrectomy, adjustable gastric band, and biliopancreatic diversion with duodenal switch





In a sleeve gastrectomy, the stomach is cut down in size and made into a banana shape. The new stomach is smaller and doesn't stretch, which helps with controlling appetite and losing weight. Adjustable Gastric Band





Our Research



- Our research focused on gastric bypass surgery (most common of all bariatric procedures)
- Looked at two outcomes after surgery:
 - 1. BMI change as a function of time after surgery
 - 2. Complications after surgery (in progress)

Methods

- We used data abstracted from the clinical records of Dr. Christopher Eagon, a bariatric surgeon here at WUSM, to form a retrospective cohort
- Data were abstracted into 3 excel files:
 - 1. Demographics
 - 2. BMI measurements (post-op and pre-op)
 - 3. Post-surgery complications

Let the SAS begin!

- The 3 excel files were converted into SAS data files using the *PROC IMPORT* statement
- proc import
- datafile = "H:\bmi_data";
- out = Nilslib.bmi_data;
- sheet = 'sheet 1';
- run;

Merging of Data

- Next step was to merge the 3 files, now in SAS datefile format, into one to facilitate analysis
- Done using DATA step
- data Nilslib.merged_data;
- merge Nilslib.bmi_data Nilslib.demographics_ data Nilslib.complications_data;
- *by ID;*
- run;

Unadjusted Analysis

- File now ready for analysis.
- 1st step: unadjusted analysis. A B-spline polynomial fitting method was used to fit a curve to BMI change as a function of time after surgery
- proc sgplot data=Nilslib.merged_data;
- title "bmi_change, unadjusted ";
- yaxis VALUES=(-40 to 10 by 5) label="bmi change";
- xaxis VALUES=(0 to 20 by 0.2) label="duration after surgery";
- pbspline x=duration y=bmi change/NKNOTS=7 nomarkers LINEATTRS=(COLOR=red PATTERN=1 THICKNESS=2)
- clm="95% CLM";
- *run;*

Unadjusted Analysis



BMI Loss Example



Height: 5'9" (175 cm) Weight: 325 lbs (147 kg) <u>BMI: 48 kg/m²</u>

> Δ BMI = 21 kg/m² Δ Weight = 145 lbs (66 kg)



Height: 5'9" (175 cm) Weight: 180 lbs (82 kg) BMI: 27 kg/m²

Multivariable Adjusted Analysis

- Following unadjusted analysis, a linear mixed model was fit to the data
- Mixed model: one that takes into account the correlation between multiple measurements for the *same* individual
- proc mixed data = Nilslib.merged_data noclprint covtest noitprint ord;
- class ID duration_cat primary_insurance (ref = "Private Insurance") sex race;
- model bmi_change = AGE pre_surg_bmi duration_cat primary_insurance sex race duration Duration_2 duration_3 duration_4 duration_5 duration_6 /solution ddfm = bw outpm = Nilslib.predicted;
- random intercept Duration / subject = ID type = un;
- run;

Results

Covariate	Estimate	P-value	Covariate	Estimate	P-value
Age	0.03	0.02	Sex		
Pre-surg BMI	-0.27	<mark><.0001</mark>	Female	-0.30	0.32
Pre- Surgery BMI Measurement Date			Male (reference)	0.00	
BMI Measured >90 days pre-op	-0.35	0.30	Race		
BMI Measured 30-90 days pre-op	0.31	0.37	Hispanic	1.57	0.37
BMI Measured <30 days pre-op (reference)	0.00		African-American	1.32	0.00
Primary Insurance			Caucasian (reference)	0.00	
Medicaid	-0.17	0.75	Duration	-24.08	<.0001
Medicare	0.74	0.01	Duration ²	11.30	<mark><.0001</mark>
Other Government	-0.31	0.62	Duration ³	-2.29	<mark><.0001</mark>
Self Pay	0.65	0.49	Duration ⁴	0.23	<mark><.0001</mark>
Private Insurance (reference)	0.00		Duration ⁵	-0.01	<mark><.0001</mark>
			Duration ⁶	0.00	<.0001

Predicting BMI Change After Surgery



BMI Change Analysis

- We used PROC GPLOT to plot the predicted BMI change generated from the estimates in the linear mixed model
- First define axes:
- axis1 label=(height=3.5 angle=-90 rotate=90 'BMI change') order=(-40 to 10 by 5) value=(height=2.5) offset=(3);
- axis2 label=(height=3.5 'Duration (years)'), order=(0 to 20 by 5) value=(height=2.5) offset=(3);

BMI Change Analysis

- Now we use PROC GPLOT
- *proc gplot data=Nilslib.predicted;*
- plot lower*duration upper*duration
 pred*duration/ areas = 4 overlay vaxis=axis1
- haxis=axis2 ;
- title2 h=4 'Predicting Bmi Change From Duration after surgery';
- *run;*

Predicting BMI Change After Surgery: entire cohort



Predicting BMI change after surgery: sample person





Conclusions

- Gastric bypass surgery is an effective way to treat obesity
- The long follow-up times present in this data set allow us to observe noticeable and <u>persistent</u> BMI loss after surgery
- Limitation: thinning of data after ~12 years post surgery

Next Steps

- Analyzing complications after bariatric surgery
- Analyzing remission/improvement of comorbidities after surgery

Acknowledgements

- Dr. J. Christopher Eagon
- Dr. Cynthia Herrick
- Zhuchen Xu
- Zhongyu Li
- Nikki Freeman
- Dr. Su-Hsin Chang