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Bariatric surgery and metabolic syndrome: are the '91 NIH guidelines still adequate?

US have the highest mean BMI among high income countries. One in three adults has BMI >30. Between 1980 and 2008, global mean BMI increased at an annualized rate of 0.4 kg/m²/decade for men and 0.5 for women. Diabetes parallels the obesity trend. Total estimated cost of obesity in US is \$147 billion to nearly \$210 billion per year. Dietary restrictions have demonstrated only 6% success. Physician supervised, medically approached weight loss strategies have about 12% success rate. Bariatric surgery has proved to be the most effective strategy in treating obesity. Currently, indications for bariatric surgery are based on the guidelines established by National Institute of Health (NIH) in 1991 (BMI ≥35+ associated medical co-morbidities or BMI ≥40). A significant and growing number of patients who have one or more components of metabolic syndrome and a BMI <35 are left out from bariatric surgery intervention as payers base their coverage for bariatric surgery on the 1991 NIH guidelines. We do review the currently available literature on the topic and present our bariatric surgery center experience and initiatives aiming to overcome the limitations of NIH guidelines for bariatric surgery and to start a constructive and collegial conversation on their possible revision.

Biography

Antonio Gangemi has received his Medical degree from the University of Magna Graecia (UMG), Catanzaro, Italy and his General Surgery certification from University of Padua, Italy with flying color and summa cum laude in 1997 and 2004 respectively. He then moved to the United States to complete his Post-doctoral studies on the treatment of diabetes through pancreatic islet transplantation and further training in general surgery, robotic and bariatric surgery at the University of Illinois at Chicago. He is Board-Certified General, Bariatric and Robotic Surgeon and fellow of the American College of Surgeons (FACS) and of the American Society of Metabolic and Bariatric Surgery (FASMBS) and has been providing and continues to deliver high-quality patient care as highlighted by the 2017 America's Top Surgeons Recognition Award, presented to him by the Consumers' Research Council of America. He is also the Medical Director of the Surgical Innovation and Training Laboratory of University of Illinois at Chicago and Executive Member of the Clinical Robotic Surgery Association (CRSA). Furthermore, he holds the rank of Vice-Chairman of Surgery at St. Anthony, Hospital, Chicago, IL. He is an Accomplished Investigator with a record of over 50 papers published in peer-reviewed journals. He is also Member of the Editorial Board of Obesity Surgery, the second highest impact factor journal in bariatric surgery and the official journal of the International Federation for the Surgery of Obesity and metabolic disorders (IFSO).

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