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Metabolic outcomes of bariatric surgery in obesity management: Indian perspective

Vikas Ahluwalia

Max Super Speciality Hospital, India

Desity has been a global burden in the society, destroying nations medically and economically. India has attained third place in the world after USA and China for the highest prevalence of obesity. The term obesity is no longer just a single entity; it has been revised to be termed as metabolic syndrome. It is a complex disorder with metabolic risk factors linked to diabetes, hypertension, dyslipidemia, cardiovascular disease, stroke, osteoarthritis and early death. The need for optimal integration with holistic approach (lifestyle modification + pharmacotherapy + bariatric surgery) is the road to current management of obesity. Bariatric surgery has gained popularity worldwide to treat the Diabesity (Obesity+Diabetes). The measures of postoperative outcomes of bariatric surgery are assessment indicators which improve the clinical practice. A retrospective study was conducted on 69 patients who underwent bariatric surgery, males=27 and females=42, mean age 48.3 years (range 40-62 years) in the Minimal Access Metabolic Surgery Institute, Max Hospitals, Delhi, India. The duration of study was 2012-2017. The selection criteria for these patients were BMI-30-35 Kg/m², HbA1c>8.0 mg/dl and willingness to comply with the follow up protocol. The metabolic outcomes which included hypertension, diabetes mellitus and dyslipidemia were assessed and evaluated. Results showed diabetes resolution in 88.4%, hypertension resolution in 58%, and dyslipidemia resolution in 82.1%. The study concluded that bariatric surgery can be considered as a treatment option for poorly controlled diabetics with BMI 30 to 35 kg/m². Hence, the threat of obesity is greater than the risk of surgery as the treatment option.

Biography

Vikas Ahluwalia is a Director at Metabolic & Bariatric Medicine Max Super Speciality Hospital, Saket, New Delhi. In his role as Director at Metabolic & Bariatric Medicine, he oversees the various aspects of outpatient department, also serving as the Principal Investigator of several ongoing clinical trials. He is an Executive Member of the Planning & Advisory Board at the Max Institute of Medical Excellence. He is also a faculty for postgraduate teaching at Max Healthcare. Over the years, his work has made path-breaking strides in the realm of diabetes and metabolic clinical service, community awareness programmes and medical education. These include: Designing and implementing education models for diabetes educators, including curricula for metabolic medicine; developing guidelines for insulin delivery model; generating pediatric medicine awareness, especially on obesity and; setting guidelines for bariatric and metabolic surgery.

vikas.ahluwalia@maxhealthcare.com

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