

First International Diabetes Surgery Summit Results in Consensus

Submitted by Ramona Bates MD on Nov 24th, 2009

The first International Diabetes Surgery Summit (DSS) was held at the Catholic University of Rome, Italy earlier this year. The DSS involved a multidisciplinary group of 50 voting delegates from around the world and input from 22 international medical and scientific organizations. Included were the American Diabetes Association, the American Society for Metabolic and Bariatric Surgery, Diabetes United Kingdom, The Obesity Society and the European Association for the Study of Diabetes.

In September the consensus statement draft from the first international DDD was presented for critical review by official representatives of these organizations during the recent 1st World Congress on Interventional Therapies for Type 2 Diabetes, held in New York City and organized by NewYork-Presbyterian Hospital/Weill Cornell Medical Center.

Yesterday (November 23), the resulting first-of-its-kind consensus statement on diabetes surgery was published online in the Annals of Surgery. The document is considered to be the foundation of diabetes surgery.

Currently, only patients with severe obesity (BMI of 35 or more) with an obesity-related condition, or morbid obesity (BMI of 40 or more) with or without any obesity-related condition are considered candidates for bariatric surgery. These guidelines were established by the National Institutes of Health (NIH) in 1991. The DSS consensus statement acknowledged that this cutoff was arbitrary rather than supported by scientific evidence.

The DSS recognized the legitimacy of surgical approaches to treat diabetes in carefully selected patients. The DDS summarized the mounting body of evidence showing that bariatric surgery effectively reverses type 2 diabetes in a high proportion of morbidly obese patients, sometimes within weeks or even days, well before these patients have lost a significant amount of body weight.

Bariatric surgery was deemed a reasonable treatment option for patients with poorly controlled diabetes and a body mass index ≥ 30 kg/m². The Summit encouraged clinical trials to investigate the exact role of surgery in patients with less severe obesity and type 2 diabetes.

Summary of the Diabetes Surgery Summit position statement:

Surgery should be considered for the treatment of type 2 diabetes" in patients with a BMI of 35 or more "who are inadequately controlled by lifestyle and medical therapy."

Surgery may also be appropriate for treatment of people with type 2 diabetes and merely mild-to-moderate obesity (BMI 30-35).

In the United States, type 2 diabetes is a leading cause of death and the number-one cause of blindness, kidney failure and amputation.

Article reference

The Diabetes Surgery Summit Consensus Conference: Recommendations for the Evaluation and Use of Gastrointestinal Surgery to Treat Type 2 Diabetes Mellitus; *Annals of Surgery*, Nov 19, 2009; doi: 10.1097/SLA.0b013e3181be34e7; Rubino, Francesco MD; Kaplan, Lee M. MD, PhD; Schauer, Philip R. MD; Cummings, David E. MD; On Behalf of the Diabetes Surgery Summit Delegates