Costs and outcomes of increasing access to bariatric surgery for obesity: cohort study and cost-effectiveness analysis using electronic health records

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Plain English summary

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Rates of severe and morbid obesity are rising quickly. Bariatric surgery is an effective treatment for severe obesity, but is currently offered to just a small number of the patients who might benefit. This study looked at the costs and health outcomes of increasing access to bariatric surgery for obesity treatment. Patient electronic health records were used to investigate obesity and the use of bariatric surgery. We found that patients who are obese and do not have surgery rarely maintain weight loss. The cost of health care for the obese is largely due to obesity-related disease and depression. Bariatric surgery is being used more frequently over time, with older and heavier patients now being treated. Women still account for 75% of surgeries but the gender imbalance is decreasing. Bariatric surgery was found to reduce the onset of type 2 diabetes by 80%, and in patients who had diabetes already almost six times more went into remission compared with those who did not have surgery. Bariatric surgery patients often have psychological difficulties and surgery may not help these. Morbidly obese patients who have bariatric surgery can expect to live for longer overall, and for longer without diabetes, than those who do not have surgery. Overall, bariatric surgery was associated with higher health-care costs, but also improved health status, meaning that overall it was a cost-effective treatment. It was slightly more cost-effective in patients with diabetes.
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