Overview of Metabolic Surgery Worldwide

<u>Karl Miller</u>, MD, FACS, Hallein Clinic, Austria Henry Buchwald, Department of Surgery, University of Minnesota USA

An email survey was sent to the leadership of the 36 International Federation for the Surgery of Obesity and Metabolic Disorders nations or national groupings, as well as Denmark, Norway, and Sweden. Responses were tabulated; calculation of relative prevalence of specific procedures was done by weighted averages. Out of a potential 39, 36 nations or national groupings responded. In 2008, 344, 221 bariatric surgery operations were performed by 4,680 bariatric surgeons; 220,000 of these operations were performed in USA/Canada by 1,625 surgeons. The most commonly performed procedures were laparoscopic adjustable gastric banding (AGB; 42.3%), laparoscopic standard Roux-Y gastric bypass (RYGB; 39.7%), sleeve gastrectomies 4.5%. 0ver 90% of procedures were and total performed laparoscopically. Comparing the 5-year trend from 2003 to 2008, all categories of procedures, with the exception of biliopancreatic diversion/duodenal switch, increased in absolute numbers performed. However, the relative percent of all RYGBs decreased from 65.1% to 49.0%; whereas, AGB increased from 24.4% to 42.3%. Markedly, different trends were found for Europe and USA/Canada: in Europe, AGB decreased from 63.7% to 43.2% and RYGB increased from 11.1% to 39.0%; whereas, in USA/Canada, AGB increased from 9.0% to 44.0% and RYGB decreased from 85.0% to 51.0%. The absolute growth rate of bariatric surgery decreased over the past 5 years (135% increase), in comparison to the preceding 5 years (266% increase). Bariatric surgery continues to grow worldwide, but less so than in the past. The types of procedures are in flux; trends in Europe vs USA/Canada are diametrically opposed.