



Gastric surgery slashes deadly heart attacks

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OBESSE people who undergo gastric surgery may be saving their own lives as well as shedding unhealthy kilos, after researchers found such patients also see a marked reduction in fatal heart attacks and strokes compared with those who try to manage their weight in other ways.

A new analysis of data from a Swedish study found the number of fatal heart attacks was cut by half in the surgery patients compared with those in a control group who did not have the operations, while the number of fatal strokes fell by two-thirds.

Overall, numbers of strokes and heart attacks, including the fatal and non-fatal, also fell, although not by as much: 30 per cent for heart attacks and 33 per cent for strokes. The study found there were 49 deaths from strokes and heart attacks combined in the 2037 patients in the control group, compared with the 28 such deaths among the 2010 surgery patients, all of whom were recruited between September 1987 and January 2001 and followed up until December 2009.

Gastric or bariatric surgery covers a number of operations, including the increasingly common gastric banding in which a plastic band is placed around the top part of the stomach to create a narrowing that induces patients to feel full sooner and to eat less.

Other operations, common at the time patients were recruited into the Swedish study, but which have since lost popularity on safety grounds, include gastric bypass techniques in which food exits the stomach sooner and

travels directly to a lower part of the intestine, reducing the amount of nutrients absorbed.

The latest analysis found the surgery patients had lost 18 per cent of their starting body weight after 20 years. Control patients, who instead received standard clinical care, lost an average of 1 per cent after 20 years.

Writing in the *Journal of the American Medical Association*, the authors from the University of Gothenburg said the results "demonstrate there are many benefits to bariatric surgery and that some of these benefits are independent of the degree of the surgically induced weight loss".

Paul O'Brien, emeritus director of the Centre for Obesity Research and Education at Monash University, who has championed gastric banding, said while there were weaknesses in the study it showed the case for the operations to be provided more widely in Australian public hospitals.

Obesity surgery can cost more than \$10,000 for those without private insurance and even those with cover can face out-of-pocket bills between \$5000 and \$8000.

"This is probably the most powerful medical therapy available today . . . it's unbelievable that there's a resistance to it because if there were something this effective relating to cancer people would be storming the walls of government to say 'Why aren't you allowing us to do it'," Professor O'Brien said.

But Jane Martin, senior policy adviser with the Obesity Policy Coalition, said bariatric surgery was "expensive and risky".

"Seven million Australians will be obese by 2025 and it is not feasible to treat large numbers of people using surgery," she said.