Weight loss surgery can be a safe option for obese children

A newly created roadmap results in fewer complications and better growth among children who undergo weight reducing procedures

Weight loss surgery does not stunt the growth of obese children when applied within a clinical pathway. It is a safe option to use and provides hope for youngsters who are unable to shed pounds through weight management programs that include counseling and lifestyle changes. So says Professor Aayed Alqahtani of King Saud University (KSU) in Saudi Arabia, after tracking the progress of almost 300 children who had all undergone such surgery through a standardized clinical pathway that was created and applied by Alqahtani in his practice at KSU. The findings are published in Springer’s journal Obesity Surgery.

Weight loss, or bariatric, surgery is already a well-accepted and safe method used to manage obesity among adults. However, there are still debates about its general safety for younger people, the timing of operations and whether it might not inhibit the growth of children.

Alqahtani followed the progress of 659 obese children and teenagers who received regular care in their practice between 2008 and 2014. Of them, 291 underwent laparoscopic sleeve gastrectomy, a type of bariatric surgery by which a large part of a patient’s stomach is removed and reshaped. During this time, the clearly defined weight management protocol and guidelines proposed in the article were already in place in Alqahtani’s practice. These include a multidisciplinary plan of care, guidelines on the surgical techniques to follow, and the necessary care that patients should receive before and after the procedure.

Most of the children significantly lost weight for at least four years after being operated on. This weight loss was also maintained. Only 4.1 percent of the youngsters suffered any complications after the operation, which is significantly lower than the 11 percent reported for adults. Also, in nine out of every ten cases the surgery led to the resolving or improving of related life-threatening diseases or conditions the patients might have had such as diabetes, sleep apnea and hypertension.

The Saudi researchers also found that in especially the first three years, the bariatric surgery patients had a greater growth spurt than those on a more typical non-surgical weight management program. They believe this shows that the procedure has no negative effect on the growth of children and adolescents.

“The clinical pathway or guidelines we propose are flexible and are designed to allow tailoring for each patient’s specific needs, including those with obesity caused by genetic factors. We recommend that bariatric surgery be used only for children and teenagers who fail weight management and whose obesity is having a major impact on their lives,” concludes Professor Alqahtani.


The full-text article is available to journalists on request.
Contact: Joan Robinson | Springer | tel +49-6221-487-8130 | joan.robinson@springer.com