Women Versus Men: Pre-Operative Traits In Obese Patients Undergoing Open Roux-En-Y Gastric Bypass

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Background: The obesity epidemic plagues patients and their physicians. In this clinically fragile population, every insight helps. However, few investigations have evaluated differences between the sexes among patients with severe obesity. Objective of this study is to investigate these variations.

Methods: Data on 5,389 patients, pre-operative for open gastric bypass (RYGB), from the Surgical Review Corporation’s BOLD database was examined in two groups: Women (n=4,093) and Men (n=1296). Statistics: analysis of variance and the Chi-squared equation.

Results: Female/male age (45.6+/-27.22/46.96+/-11.68; p<0.0003), BMI (49.39+/-9.63/52.85+/-10.52; p<0.0001), plus race (Caucasian 68/74%, African-American 10/7%), health insurance (Medicaid 10/6%, Medicare 10/12%) and unemployment (27/31%) (p<0.0001) varied. Females had higher rates of asthma, mental health diagnoses, cholelithiasis, depression, fibromyalgia, GERD, pseudotumor cerebri, psychological impairment, urinary stress incontinence (p<0.0001) and back pain (p<0.01) (N=10). Males had higher alcohol and tobacco abuse, diabetes, gout, hypertension, ischemic heart disease, dyslipidemia, leg edema, obesity hypoventilation syndrome, obstructive sleep apnea (p<0.0001), abdominal hernia, angina, CHF, impaired functional status, pulmonary hypertension (p<0.001), and DVT/PE (p<0.02) (n=16). Abdominal panniculitis, liver disease, peripheral vascular disease, and substance abuse did not vary by sex.

Conclusions: Significant variations exist between pre- operative clinical characteristics of women versus men with severe obesity who chose RYGB. Men were older and heavier, drank and smoked more, and carried 60% more obesity co-morbidities than did women. Women had more musculoskeletal and psychological problems. Cardiopulmonary and endocrine problems dominated in men. Understanding these variations may aid recognition of and clinical management of fragile patients with obesity.