

## VARIATION BY AGE IN BASELINE CLINICAL CHARACTERISTICS AND POST-OPERATIVE OUTCOMES AFTER LAPAROSCOPIC ROUX-EN-Y GASTRIC BYPASS (LRYGB)

Christopher Bashian, D.O., Malinda Lyon, D.O., Gus J Slotman M.D.

Department of Surgery, Inspira Health Network, Vineland, NJ

**Introduction:** Baseline data and LRYGB clinical outcomes by age are unknown. Objective: To identify age variation in pre-operative LRYGB characteristics and post-operative outcomes.

**Methods:** 83,059 LRYGB patients from the Surgical Review Corporation's BOLD database were analyzed pre-operatively through 24 months by age: <30, 30-40, 40-50, 50-60, 60-70, >70. Statistics: ANOVA, Chi-squared, linear and categorical models.

**Results:** Female/male <30 (85%/15%) to >70 (63%/37%) ( $p<0.0001$ ). Race: Caucasian <30-68%/>70-88%; African-American 30-40-14%/>70-3.5%; Hispanic <30-14%/>70-4% ( $p<0.0001$ ) Insurance: Medicaid: <30-9.9%/>70-2.2%; Medicare: <30-2%/>70-53%; Private; 40-50-87%/>70-42% ( $p<0.0001$ ). Baseline to 24 months, diabetes, hypertension, back and musculoskeletal pain, gout, dyslipidemia, peripheral vascular disease, pulmonary hypertension, sleep apnea (OSA), and stress urinary incontinence increased linearly <30->70 ( $p<0.0001$ ) as did 24 month angina and leg edema ( $p<0.0001$ ) support group and GERD ( $p<0.05$ ). Weight and BMI ( $p<0.001$ ), PCOS, pseudotumor cerebri, and smoking varied by inverse age, <30 highest to 24 months, as did baseline substance abuse, and alcohol abuse to 12 months, ( $p<0.0001$ ). 30-40: highest baseline-12 mental health diagnosis and 12 month alcohol. 50-60: highest baseline asthma, GERD, liver disease, depression, and psychological impairment. 60-70: highest angina, OHS, cholelithiasis, panniculitis, leg edema, and fibromyalgia. Liver disease, panniculitis, asthma, mental health, pulmonary hypertension, and substance abuse did not vary by age after LRYGB.

**Conclusion:** Clinical characteristics and LRYGB outcomes vary by age. Older patients who have obesity the longest had highest weight-related problems, and resolved them least. In spite of greater weight, BMI and alcohol/tobacco abuse, youngest patients fared best. This advance knowledge could help LRYGB patient selection and optimize management. .