



Can We Delay Bariatric Surgery in the Current Pandemic Situation

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Short Communication

Bariatric surgery is an operation that helps you reduce by making changes to your gastrointestinal system. Some sorts of bariatric surgeries make your stomach smaller, allowing you to eat and drink less at just one occasion and making you are feeling full sooner. Other bariatric surgeries also change your small intestine—a part of your body that absorbs calories and nutrients from foods and beverages.

Bariatric surgery could also be an option if you've got severe obesity and haven't been ready to reduce or keep from gaining back any weight you lost using other methods like lifestyle treatment or medications. Bariatric surgery also could also be an option if you've got serious health problems, like type 2 diabetes or apnea, associated with obesity. Bariatric surgery can improve many of the medical conditions linked to obesity, especially type 2 diabetes.

Studies show that a lot of people that have bariatric surgery lose about 15 to 30 percent of their starting weight on the average, counting on the sort of surgery they need. However, no method, including surgery, is certain to supply and maintain weight loss. Some people that have bariatric surgery might not lose the maximum amount as they hoped. Over time, some people regain some of the load they lost. the quantity of weight people regain may vary.

The coronavirus 2019 pandemic is wreaking havoc on society, especially health care systems, including disrupting bariatric and metabolic surgery. the present limitations on accessibility to non-urgent care undermine postoperative monitoring of patients who have undergone such operations. Furthermore, like most elective surgery, new bariatric and metabolic procedures are being postponed worldwide during the pandemic. When the outbreak abates, a backlog of individuals seeking these operations will exist. Hence, surgical candidates face prolonged delays of beneficial treatment. due to the

progressive nature of obesity and diabetes, delaying surgery increases risks for morbidity and mortality, thus requiring strategies to mitigate harm. the danger of harm, however, varies among patients, counting on the sort and severity of their comorbidities. A triaging strategy is therefore needed. the normal weight-centric patient-selection criteria don't favour cases supported actual clinical needs. during this Personal View, experts from the Diabetes Surgery Summit consensus conference series provide guidance for the management of patients while surgery is delayed and for postoperative surveillance. We also offer a technique to prioritise bariatric and metabolic surgery candidates on the idea of the diseases that are presumably to be ameliorated postoperatively. Although our system is going to be particularly germane within the immediate future, it also provides a framework for long-term clinically meaningful prioritisation.

Bariatric patients are unique from other surgical patients thanks to their higher prevalence of hypertension, type 2 diabetes, disorder, and respiratory illnesses. The outbreak of the Novel Coronavirus (COVID-19) has drastically changed the way bariatric surgeon's practice today. This review aims to access the simplest practices to treat our bariatric patient during the COVID-19 pandemic of 2019–2020.

In response to the COVID-19 pandemic outbreak, the International Federation for the Surgery of Obesity and Metabolic Disorders (IFSO) has issued these recommendations to our global healthcare providers aimed toward keeping all our patients and practice staff in an as safe an environment as possible.

IFSO has an obligation to assist contain and mitigate the consequences of the pandemic on the worldwide scientific, surgical and integrated health communities and protect the health of all IFSO members and their families and everyone those related to our members at work, reception and within the community. We decide to work together and supply updates as appropriate.

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