



## Hypoglycemia after Bariatric Surgery

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### Rapid Communication

Severe hypoglycemia characterized by neuroglycopenic symptoms may be a recently described and comparatively uncommon complication of gastric bypass surgery. It occurs several months to years after surgery and should be distinct from the more commonly encountered dumping syndrome that happens early within the postoperative course and typically improves with time. Nesidioblastosis has been proposed as a possible underlying mechanism for late postoperative hypoglycemia. This syndrome is distinct from noninsulinoma pancreatogenous hypoglycemia and certain features a multifactorial etiology. It responds variably to nutrition and pharmacological interventions. Partial pancreatectomy and reversal of the bypass have sometimes been won't to ameliorate symptoms [1].

Those who develop hypoglycemia after bariatric surgery, eating can triggers release of hormones which then causes a rapid drop by glucose. the matter isn't typically the pancreas, but with the signals which instruct the pancreas to release insulin. Pancreas surgery isn't recommended for post-bariatric hypoglycemia because it isn't "cured" by removal of the pancreas [2].

An endocrinologist must confirm that other causes of hypoglycemia aren't present, as these could also be treated differently.

It is important to promptly treat hypoglycemia when it develops, in order that your brain has enough glucose to function normally.

If you're diagnosed with hypoglycemia, please make certain your glucose level isn't low before driving or other potentially hazardous activities.

Dietary and drugs treatments are available to scale back the frequency and severity of hypoglycemia.

### Recommended Lifestyle Changes and Treatment

Start a hotel plan which is aimed toward preventing rapid increases in blood glucose and increases within the hormones which trigger rapid drops in glucose.

This includes avoiding liquids with meals, avoiding foods high in sugar or easily-digested carbohydrates.

Proteins and healthy fats should be emphasized.

Complete avoidance of carbohydrates isn't desirable.

Avoid alcohol and caffeine

Take nutritional supplements to stop nutrient deficiencies.

Since this is often complicated, a dietitian experienced during this condition should be seen.

If changes in hotel plan aren't enough to enhance hypoglycemia, medications which reduce insulin and other hormones are often used.

Data evaluating the efficacy of surgery in managing hypoglycemia after gastric bypass are limited to case reports and case series. Some patients with severe symptoms and a positive selective arterial calcium-stimulated test have responded well to partial pancreatectomy, with resolution or significant improvement in hypoglycemia. The extent of surgery is dictated by the results of the calcium stimulation test. In extreme cases, reversal of the bypass could also be required because feeding into the bypassed stomach has been shown to stop hypoglycemia [3].

The complex pathophysiology of this rare syndrome remains poorly understood, and it's likely multifactorial in etiology. It responds variably to nutrition changes and pharmacological therapy, and partial pancreatectomy or reversal of the gastric bypass could also be required for severe cases [4].

Hypoglycemia, occurring after gastric bypass surgery, is challenging for patients and physicians alike. This review provides a scientific approach to diagnosis and treatment supported the underlying pathophysiology.

### References

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