

# Inpatient bariatric procedures for adolescents appear to have plateaued since 2003

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Inpatient bariatric procedures among adolescents appear to have plateaued since 2003 to about 1,000 procedures annually, and the preferred type of operation has changed to minimally invasive laparoscopic procedures from open procedures, according to a study published Online First by *Archives of Pediatrics & Adolescent Medicine*, a JAMA Network publication.

About 1 in 3 children in the United States is overweight or obese, a three-fold increase since 1980. Also, diseases associated with obesity previously only seen in adults, such as type 2 diabetes mellitus, are now increasingly diagnosed in children. Effective weight loss strategies are needed to curtail these changes, and bariatric surgery may be an effective strategy for achieving significant weight reduction in adolescents who are already morbidly obese, according to the study background.

Deirdre C. Kelleher, M.D., and colleagues from the Children's National Medical Center, Washington, D.C., conducted a study to determine the current rate of inpatient bariatric surgical procedures among adolescents (individuals ages 10 to 19 years) and to analyze national trends of use from 2000 to 2009. The authors used discharge data from the Healthcare Cost and Utilization Project Kids' Inpatient Database from 2000 through 2009.

"Our study confirms the previously reported growth in bariatric procedures from 2000 to 2003 among adolescents. Despite the suggestion that adolescent bariatric surgery has increased in popularity and continued to grow exponentially, inpatient surgery use leveled off from 2003 through 2009, reaching a plateau of about 1,000 procedures annually," the authors comment.

The inpatient bariatric procedure rate increased

from 0.8 per 100,000 in 2000 to 2.3 per 100,000 in 2003 (328 vs. 987 procedures) but the rate did not change significantly in 2006 (2.2 per 100,000) or 2009 (2.4 per 100,000), with 925 vs. 1,009 procedures. The use of laparoscopic adjustable gastric banding (LAGB) approached one-third (32.1percent) of all procedures by 2009, the study results indicate.

"While the rate of adolescent inpatient procedures did not increase from 2003 through 2009, the preferred type of operative approach changed from open to laparoscopic, further mirroring the trends in adults. Laparoscopic RYGB [Roux-en-Y gastric bypass] almost completely replaced open RYGB, and the use of LAGB increased after its approval for adults in 2001," the authors comment.

According to the study results, bariatric surgical procedures were performed in patients as young as 12 year old, however they were increasingly performed in [adolescents](#) older than 17 years (70.8 percent in 2003 and 77.5 percent in 2009). Most of the patients were female. Private insurance also remained the primary payer source throughout the study period, although Medicaid use increased from 7.7 percent in 2003 to 17.2 percent in 2009, according to study results.

"The data show that adolescent bariatric surgery trends mirror those observed in the adult population, with a plateau in volume during the mid-2000s and a shift toward less invasive procedures. They also point to low use of this potentially life-altering treatment in adolescent boys and groups of lower socioeconomic status," the authors conclude.

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