

Dietetic medical nutrition therapy support needs following bariatric surgery: data from a national bariatric service in Ireland



Breen C¹, Mellotte J¹, O’Keeffe S¹, Maher G¹, Noone M¹, Rhynehart A¹, O’Connell J¹, Heneghan H¹, Fearon N¹
¹ Centre for Obesity Management, St Columcille’s Hospital, Loughlinstown, and St Vincents University Hospitals, Co. Dublin, Ireland



Background

- Registered dietitians play a key role in bariatric care in obesity, as part of a multidisciplinary team. Medical nutrition therapy (MNT) in bariatric care involves nutrition assessment, diagnosis, intervention and monitoring components as they relate to the altered gastrointestinal tract, changes in appetite and body composition and health behaviour change¹.
- Dietetic resourcing needs post-operatively can be estimated based on a standard care pathway with best practice frequency of review, but little is known about additional MNT needs that may arise peri-operatively

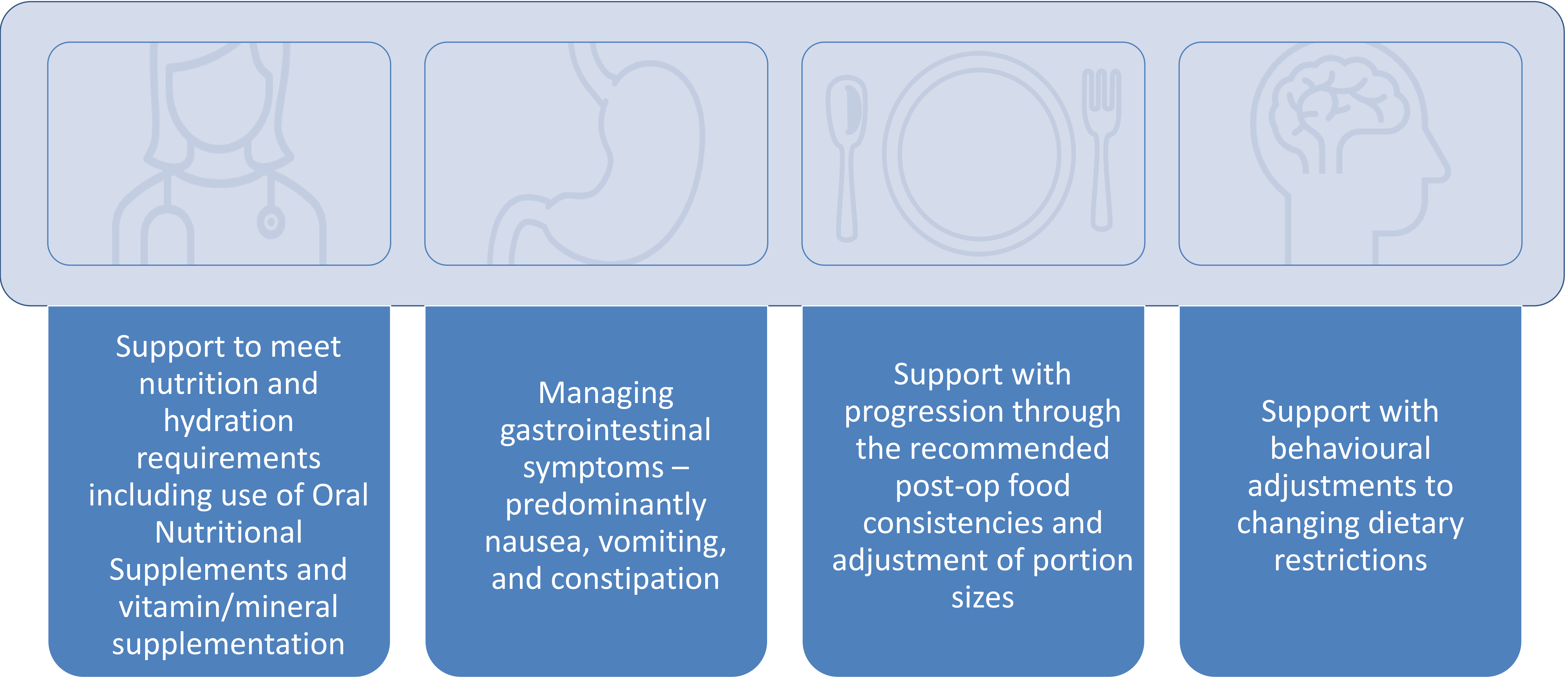
Aims, objectives and research design

- We audited fidelity to the standard initial 8-week post-bariatric surgery dietetic care pathway, and the need and indications for additional MNT in the Centre for Obesity Management in St Columcille’s Hospital, Dublin over a 24-month period.
- Data were gathered and retrospectively audited from electronic clinical databases and dietetic activity data on Microsoft Excel 2010 (Microsoft, USA) for all bariatric patients with a surgical date from January 2022 – December 2023.

Results

- Data were available on 253 individuals (70.7% female).
- Two-hundred and twenty-nine (90.5%) had a post-op review at 2 days and 246 (97.2%) at 6-8 days.
- Fifty-five patients (22%) had at least one additional review. Activity data for these patients requiring additional reviews were available for n46 showing a median of 2.0 (range 0.25-5.25) hours spent across 3 (range 1-9) appointments per patient.
- Indications for additional review are summarised in Figure2

Figure 2: Indications for additional MNT in the first 8 weeks after bariatric surgery



Conclusions

- Almost a quarter of patients needed additional MNT in the first 6-8 weeks after surgery, with significant variation in the time needed, from 15 minutes to over 5 hours across 1-9 appointments.
- This data will be helpful for estimating dietetic resourcing requirements in bariatric services.
- Dietitians delivering MNT in the peri-operative period need skills in bariatric nutrition, gastrointestinal complications and supporting patients with behavioural adjustments.

References: ¹ ASOI Adult Obesity Clinical Practice Guideline adaptation (ASOI version 1, 2022) by: Rhynehart A, Collins C, Woods C. Chapter adapted from: Shiau J, Biertho L. Available from: <https://asoi.info/guidelines/postop/> Accessed [11/03/2024].