

Abstract

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Origins of and Recognition of Micronutrient Deficiencies After Gastric Bypass Surgery.

Bal BS, Finelli FC, Koch TR.

Section of Gastroenterology, Washington Hospital Center, Washington, DC, 20010, USA,.

BACKGROUND: Roux-en-Y gastric bypass surgery remains the major surgical option for individuals with medically complicated obesity. The importance of preoperative evaluation to permit identification of micronutrient deficiencies is being re-evaluated. The risk of complications related to pregnancy after gastric bypass supports careful follow-up.

FINDINGS: Micronutrient deficiencies are common in postoperative gastric bypass patients, despite the suggested use of routine vitamin and mineral supplements after surgery. Copper deficiency must be considered as an origin for visual disorders after gastric bypass. Vitamin D deficiency with metabolic bone disease remains common after gastric bypass and the results suggest that the present postoperative supplements of calcium and vitamin D are inadequate. Major nutritional complications of bariatric surgery are occurring more than 20 years after surgery. There is no evidence for intestinal adaptation as there remains decreased intestinal absorption of iron up to 18 months after gastric bypass surgery.

CONCLUSIONS: This article supports ongoing examination of nutritional complications after gastric bypass surgery and supports the notion that the daily doses of micronutrient supplements, such as vitamin D, may need to be revised.

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