

**S.I.C.O.B.
EVENTI**



SICOB CONVEGNO VENETO

VERONA Venerdì, 5 Aprile 2024

RESP. SCIENTIFICO: ROBERTO ROSSINI

**OTTIMIZZAZIONE DEL PERCORSO
IN CHIRURGIA BARIATRICA.
HA SENSO PARLARE DI ERAS?**

RUOLO DELLA TERAPIA MEDICA

LUCA BUSETTO

UNIVERSITÀ DI PADOVA

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Direttore Scuola di Specializzazione in Scienza dell'Alimentazione
Università degli Studi di Padova

Vice Presidente della European Association for the Study of Obesity (EASO)

Past President della Società Italiana dell'Obesità (SIO)



- **Luca Busetto**

- **Disclosures: - Advisory Board Member:**

Novonordisk

Bruno Farmaceutici

Pzifer

Eli Lilly

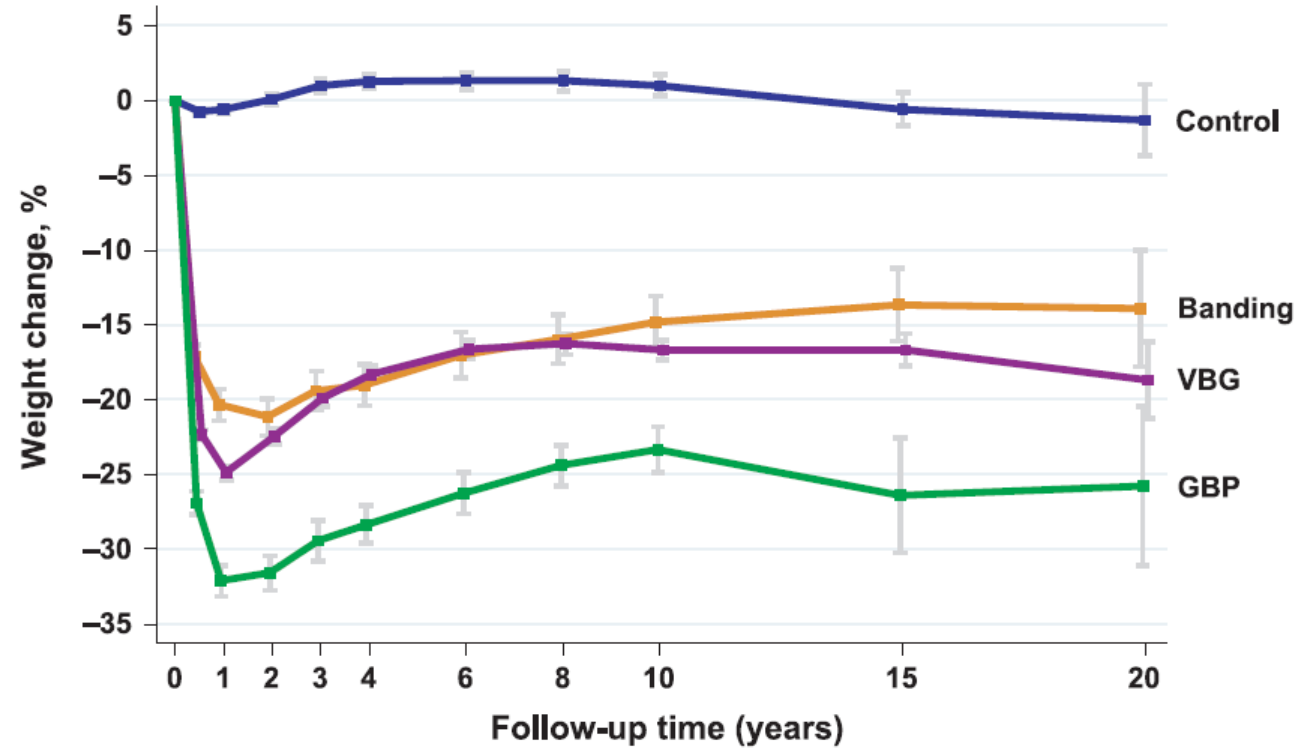
Boehringer Ingelheim

- Speaker:

Rythm Pharmaceuticals

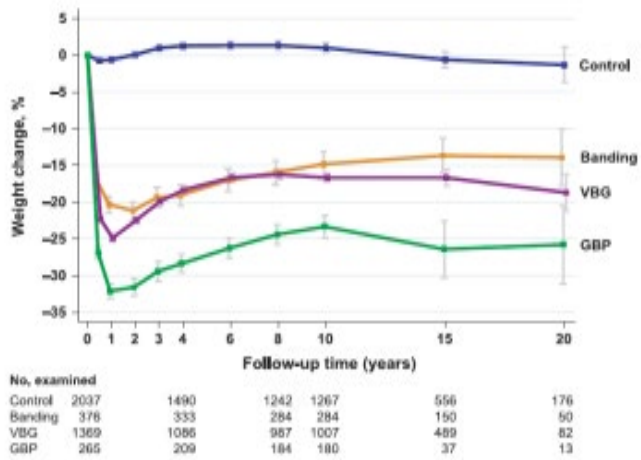
Pronokal

Review of the key results from the Swedish Obese Subjects (SOS) trial – a prospective controlled intervention study of bariatric surgery

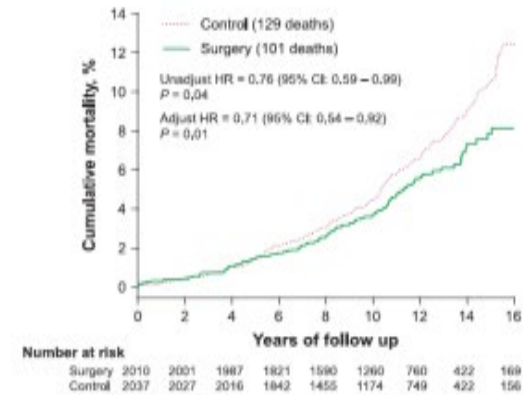
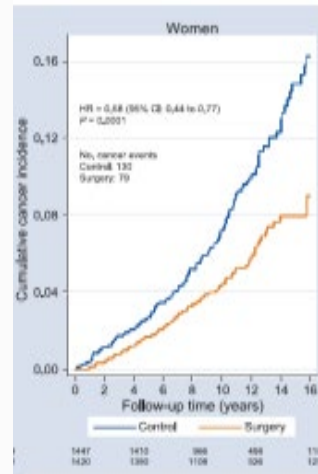
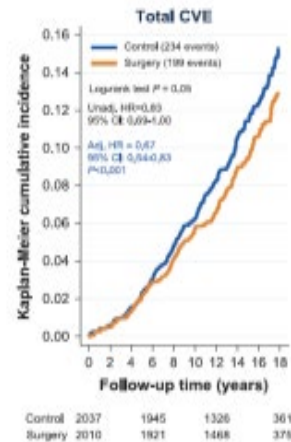
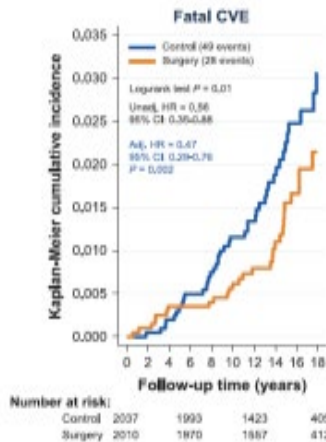
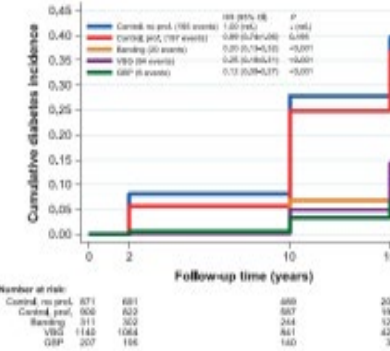
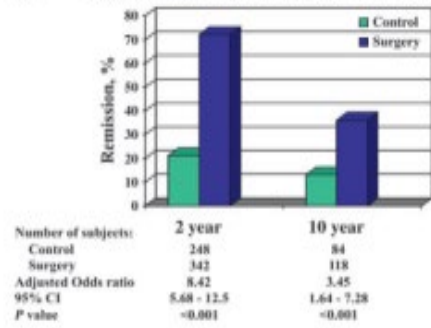


No. examined								
Control	2037		1490		1242	1267	556	176
Banding	376		333		284	284	150	50
VBG	1369		1086		987	1007	489	82
GBP	265		209		184	180	37	13

Review of the key results from the Swedish Obese Subjects (SOS) trial – a prospective controlled intervention study of bariatric surgery

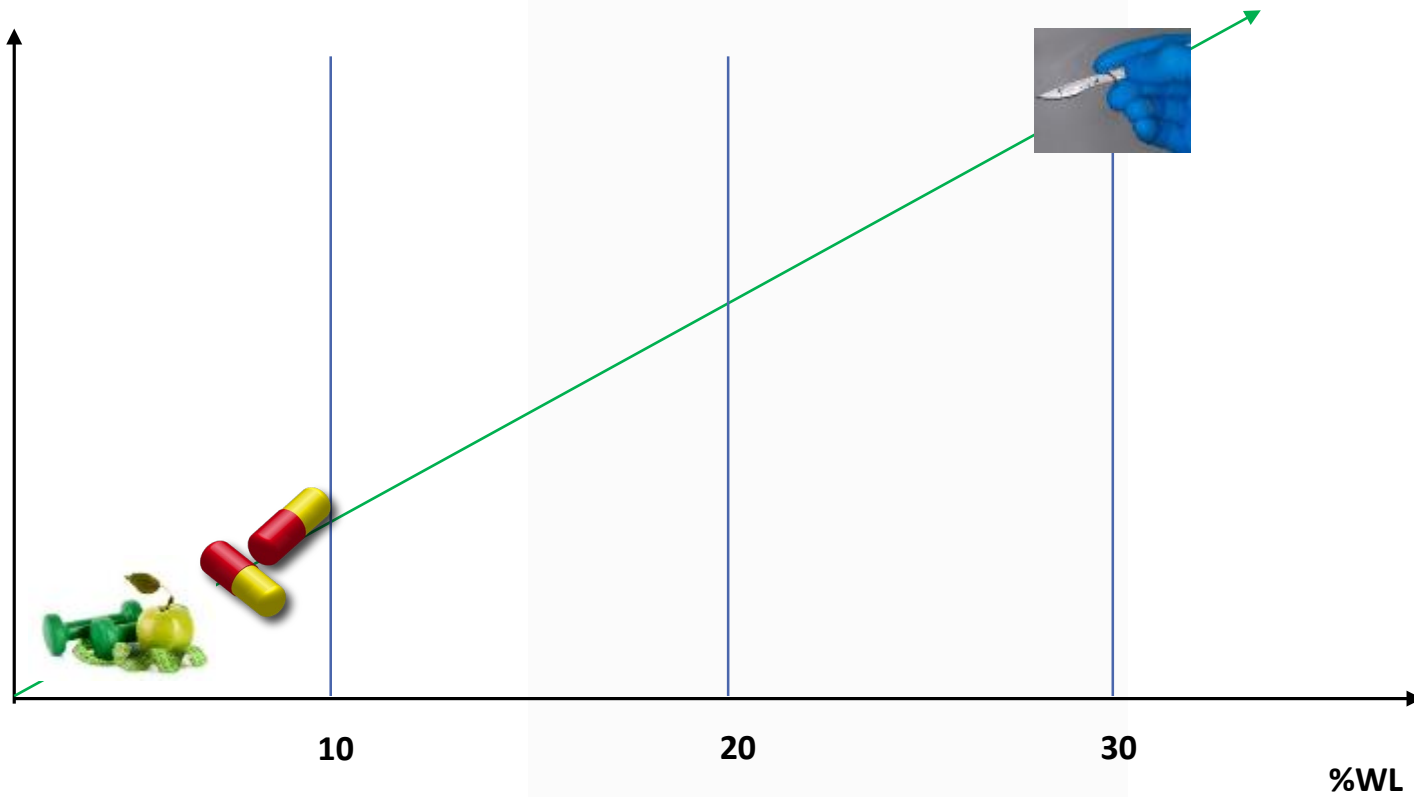


(a) SOS. Remission from diabetes over 2 and 10 years



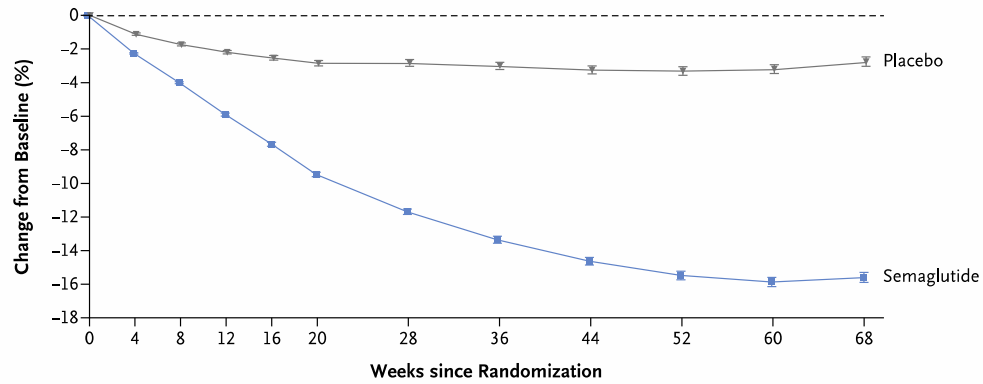
Obesity management is changing

Invasivity/Risk/Cost



Once-Weekly Semaglutide in Adults with Overweight or Obesity

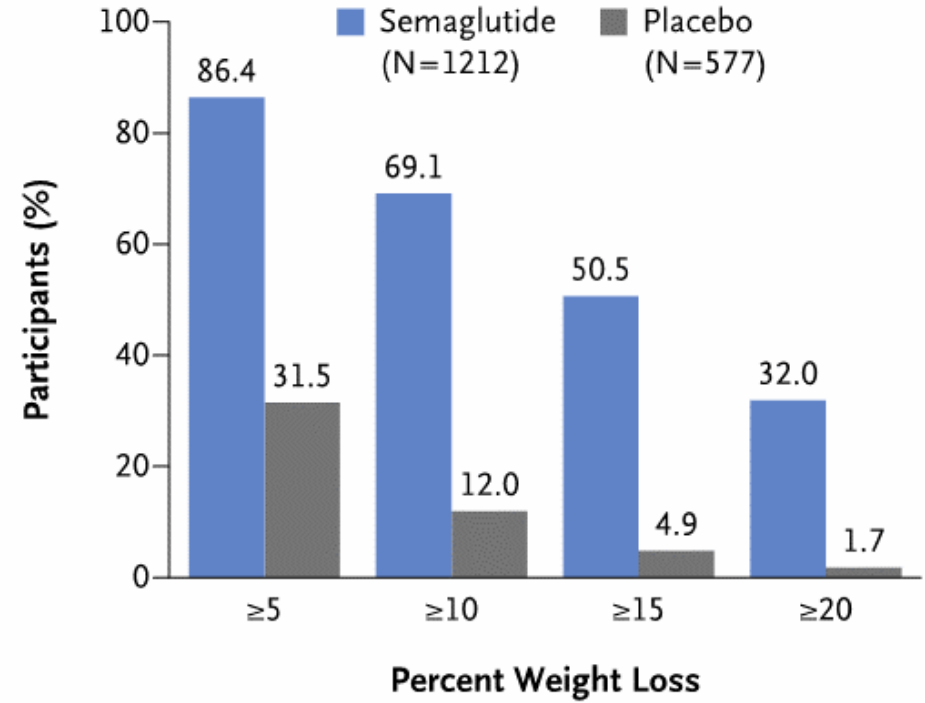
A Body Weight Change from Baseline by Week, Observed In-Trial Data



No. at Risk

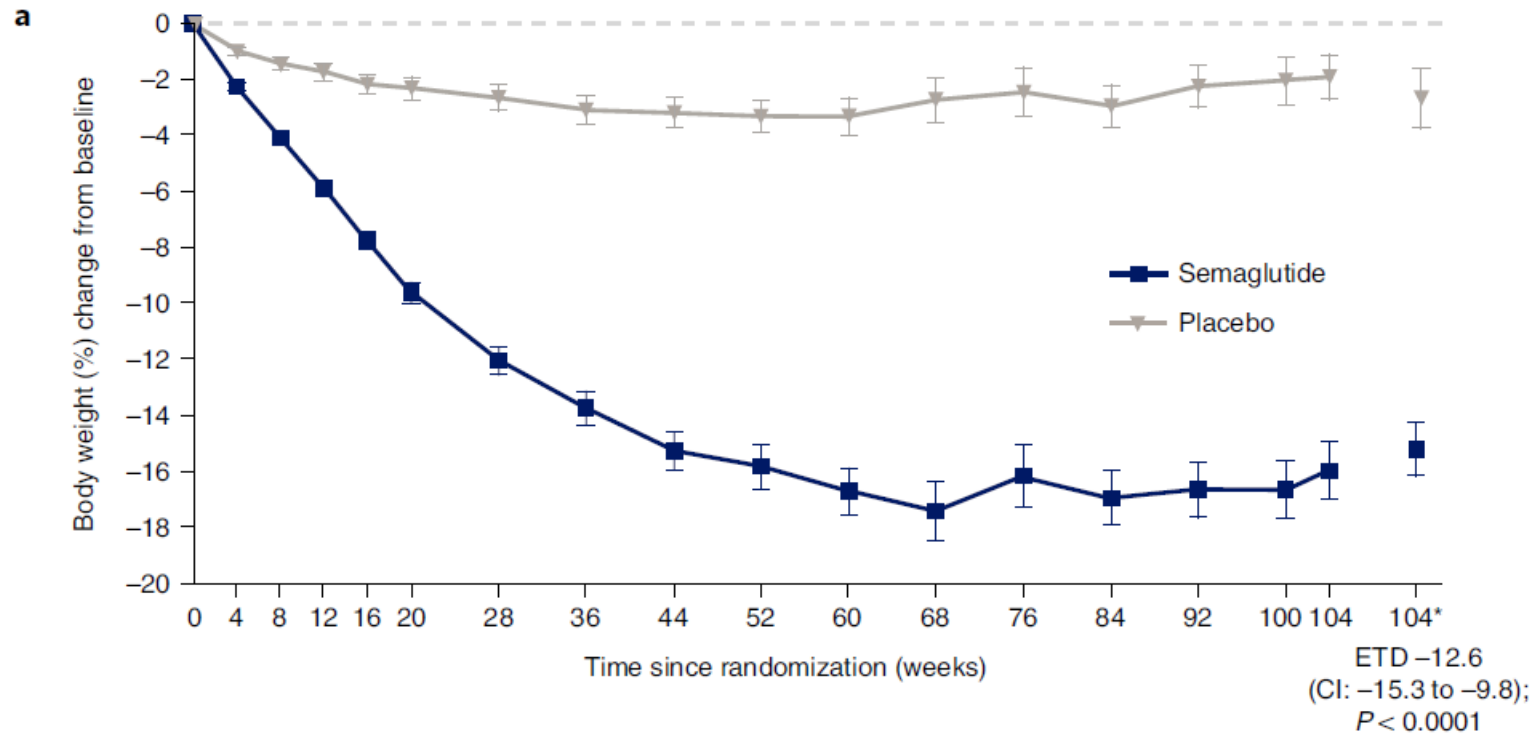
Placebo	655	649	641	619	615	603						
Semaglutide	1306	1290	1281	1262	1252	1248	1232	1228	1207	1203	1190	1212

C In-Trial Data at Wk 68



Wilding JPH et al. NEJM 2021;384:989

Two-year effects of semaglutide in adults with overweight or obesity: the STEP 5 trial

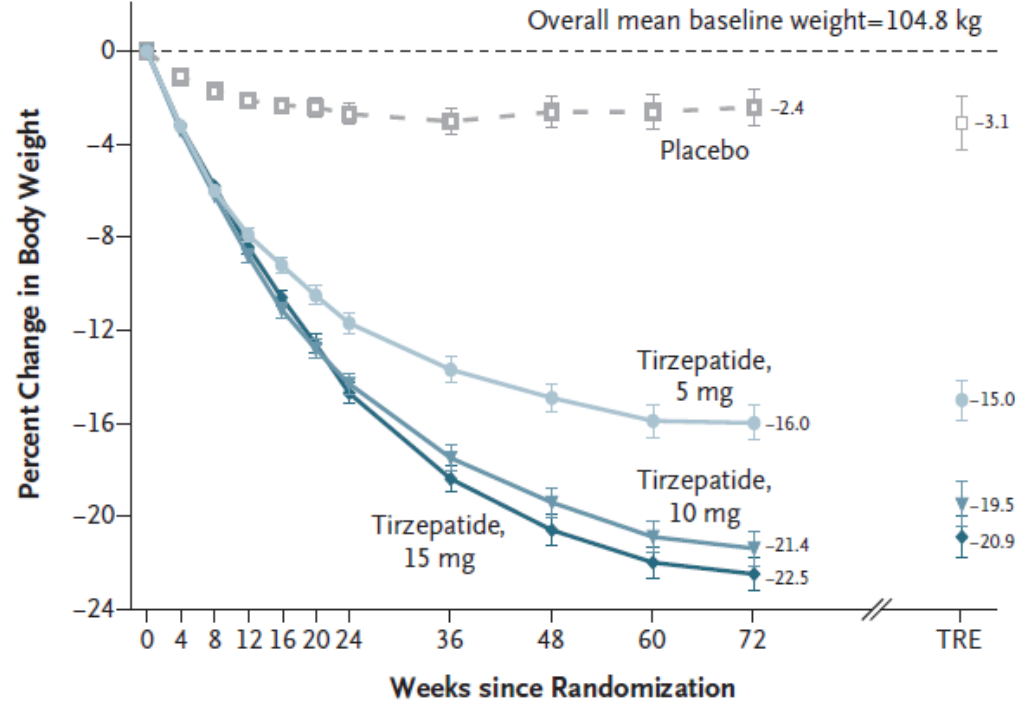


Number of participants

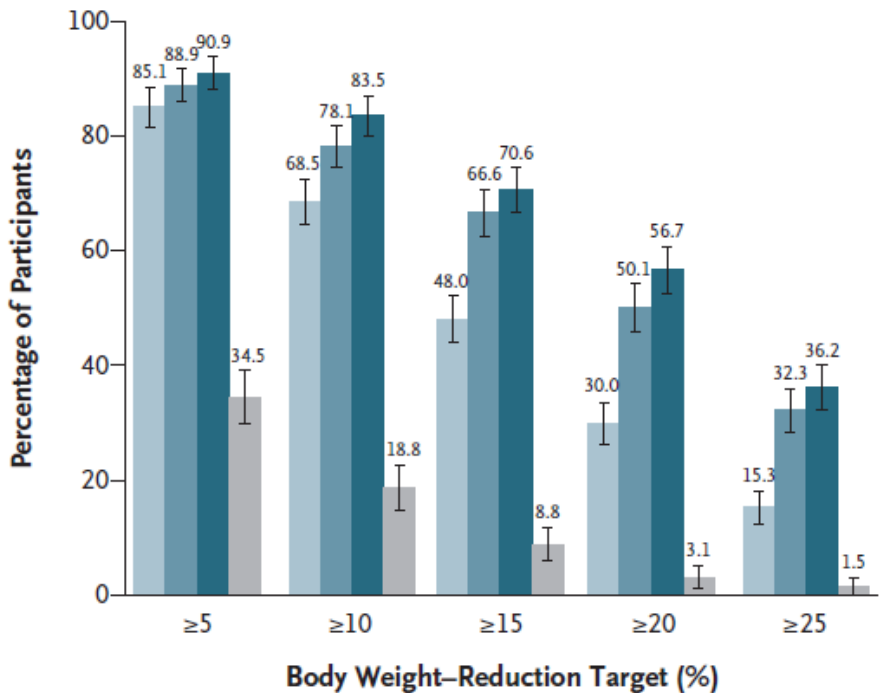
Semaglutide	152	150	151	151	151	152	152	149	146	149	136	101	92	140	137	134	144
Placebo	152	149	146	146	143	141	133	132	131	129	118	89	74	116	117	107	128

Tirzepatide Once Weekly for the Treatment of Obesity

B Percent Change in Body Weight by Week (efficacy estimand)



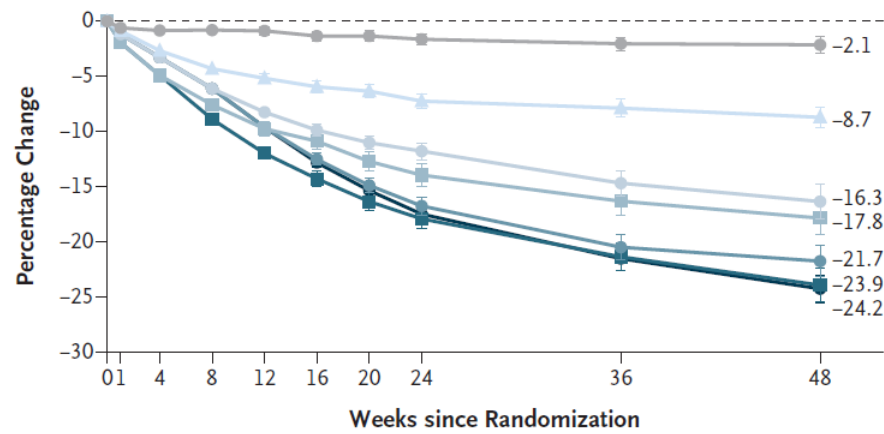
C Participants Who Met Weight-Reduction Targets (treatment-regimen estimand)



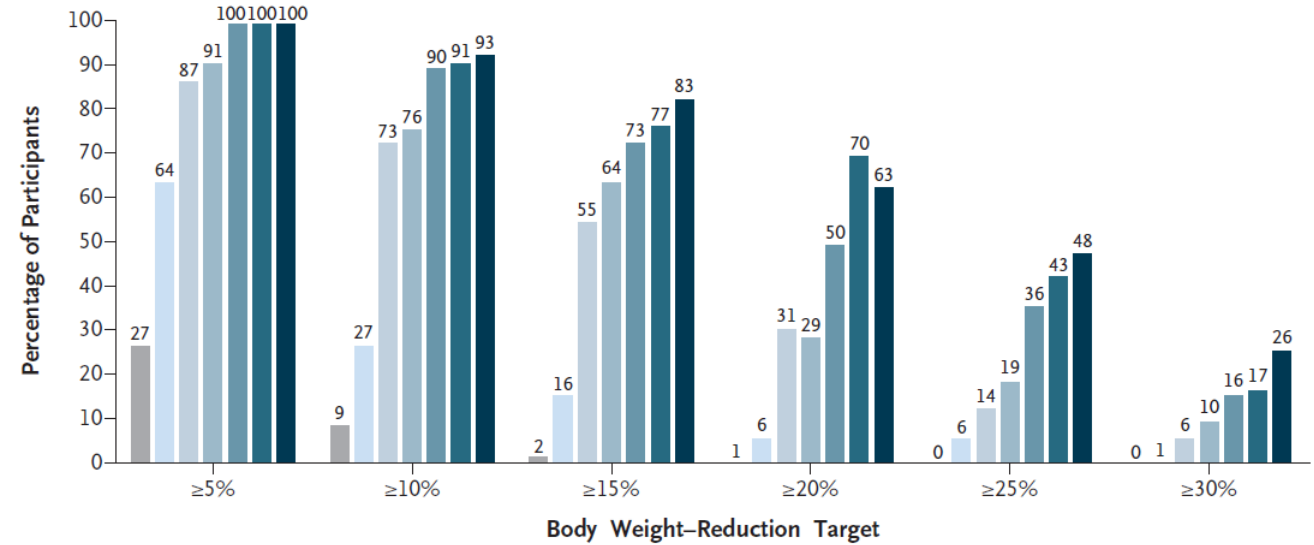
Jastreboff AM et al. N Engl J Med 2022;387:205

Triple-Hormone-Receptor Agonist Retatrutide for Obesity — A Phase 2 Trial

A Changes in Body Weight

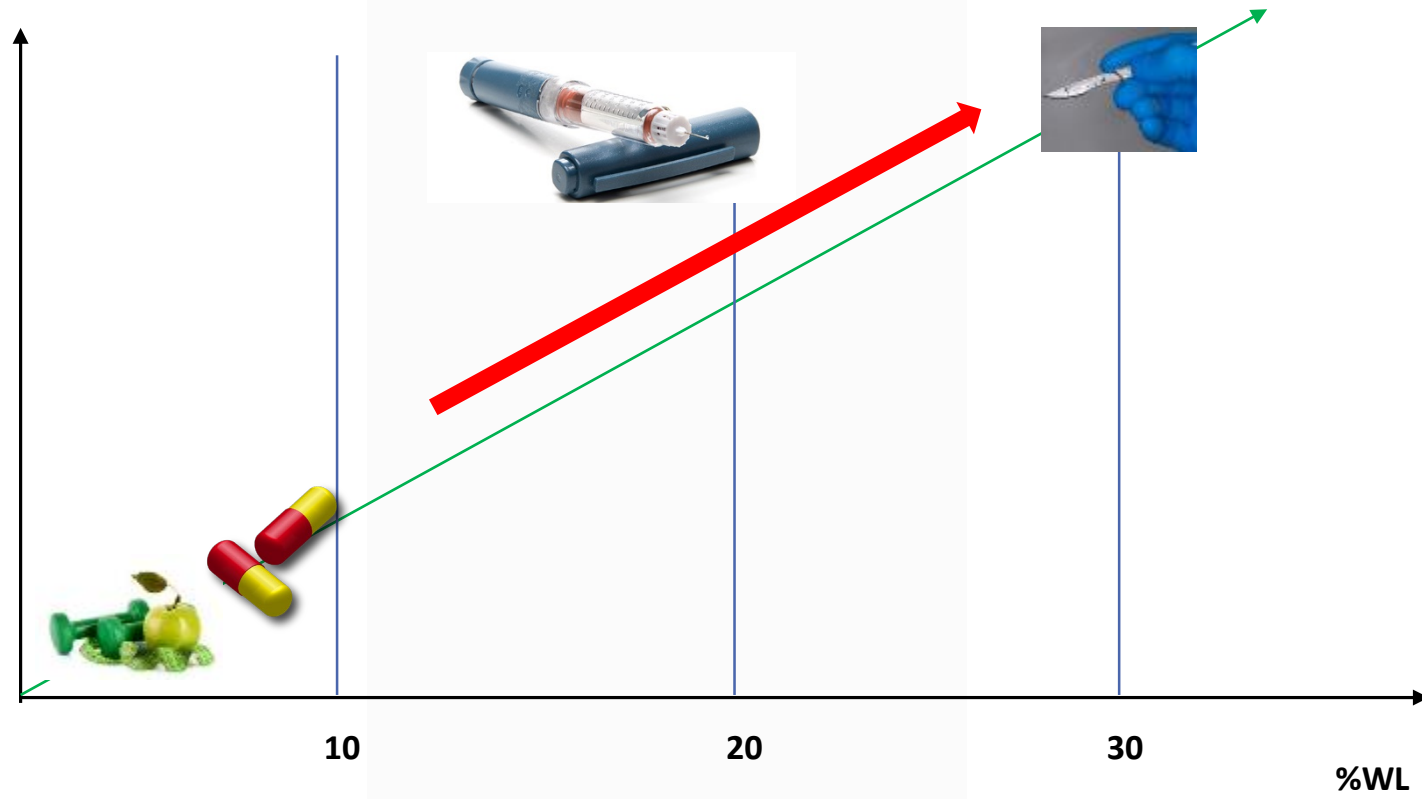


B Attainment of Weight-Reduction Targets



Placebo
 Retatrutide, 1 mg
 Retatrutide, 4 mg (ID, 2 mg)
 Retatrutide, 4 mg (ID, 4 mg)
 Retatrutide, 8 mg (ID, 2 mg)
 Retatrutide, 8 mg (ID, 4 mg)
 Retatrutide, 12 mg (ID, 2 mg)

Invasivity/Risk/Cost



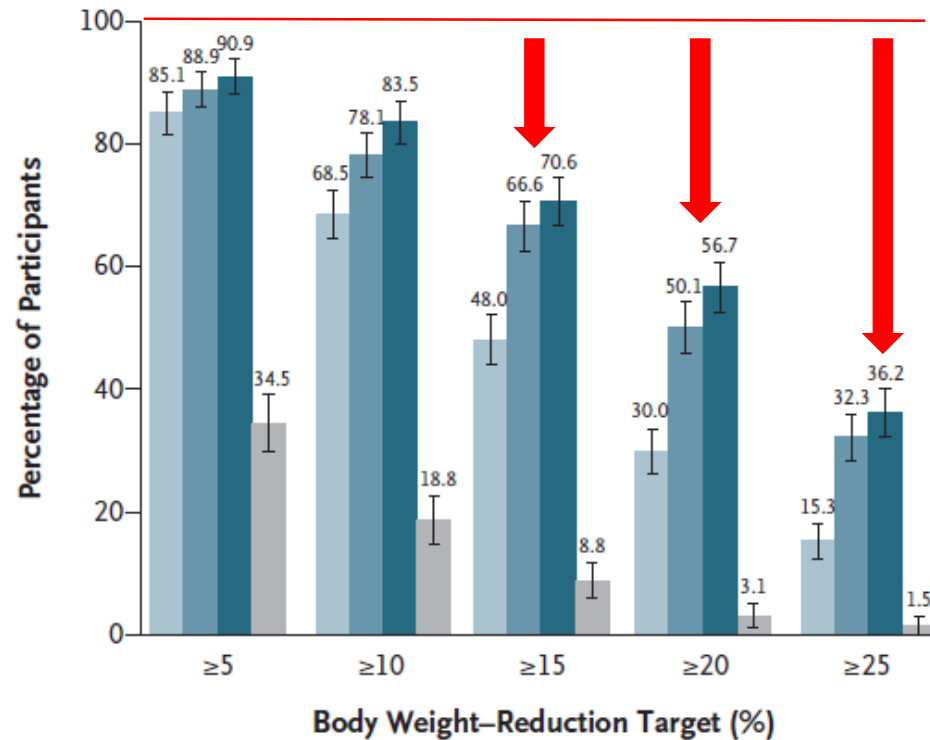
Will new pharmacological treatment for obesity and early diabetes replace bariatric surgery?

There is no magic bullet for obesity

Tirzepatide Once Weekly for the Treatment of Obesity

A significant proportion of patients do will not achieve the target with obesity management medications

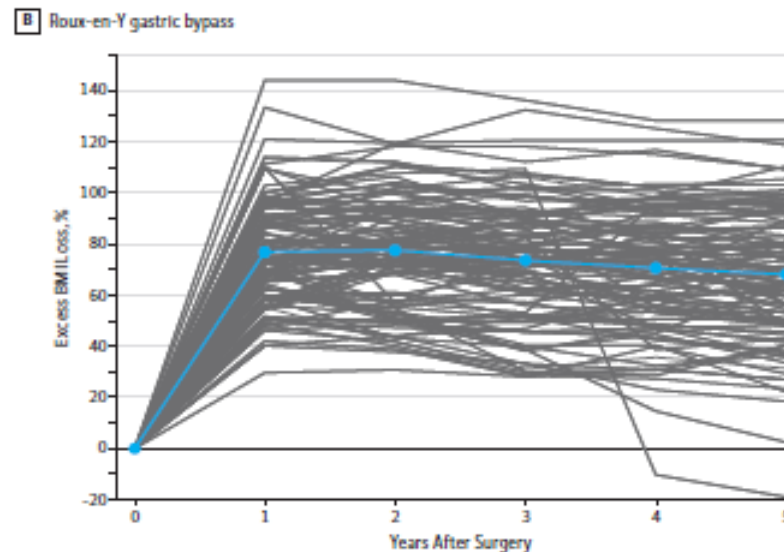
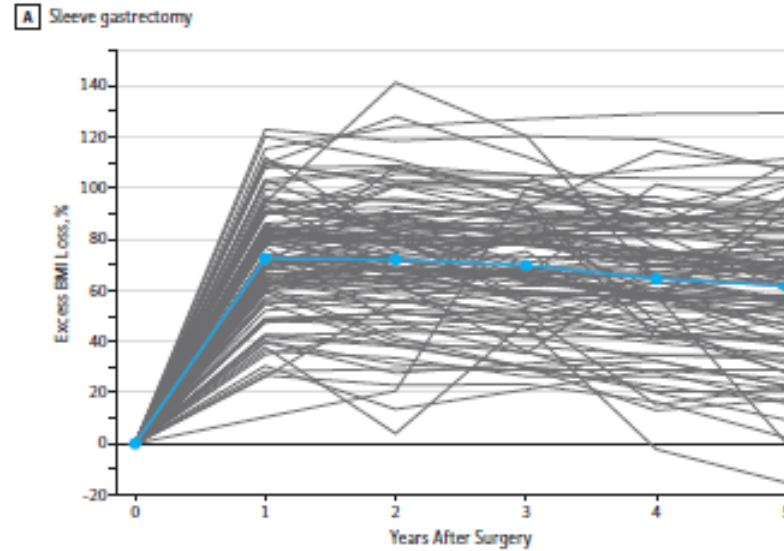
C Participants Who Met Weight-Reduction Targets (treatment-regimen estimand)



Effect of Laparoscopic Sleeve Gastrectomy
vs Laparoscopic Roux-en-Y Gastric Bypass
on Weight Loss in Patients With Morbid Obesity
The SM-BOSS Randomized Clinical Trial

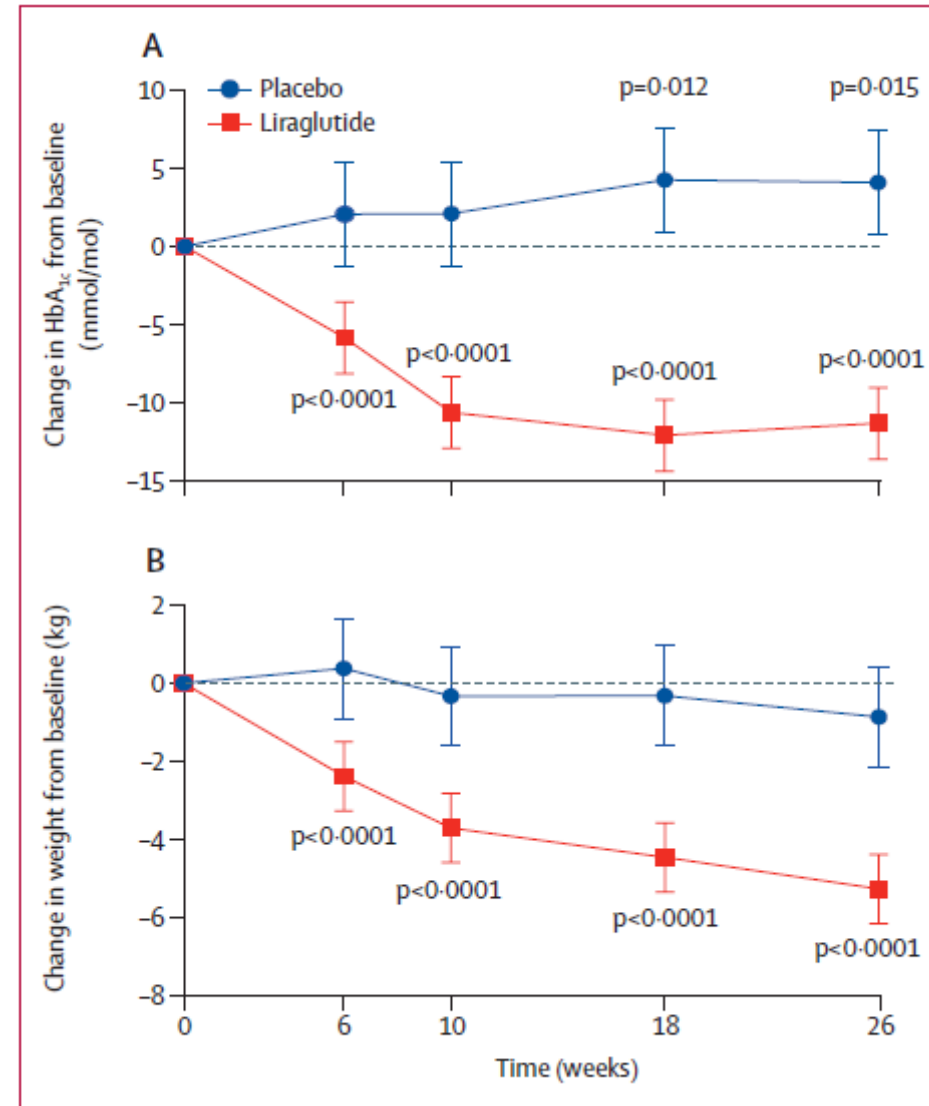
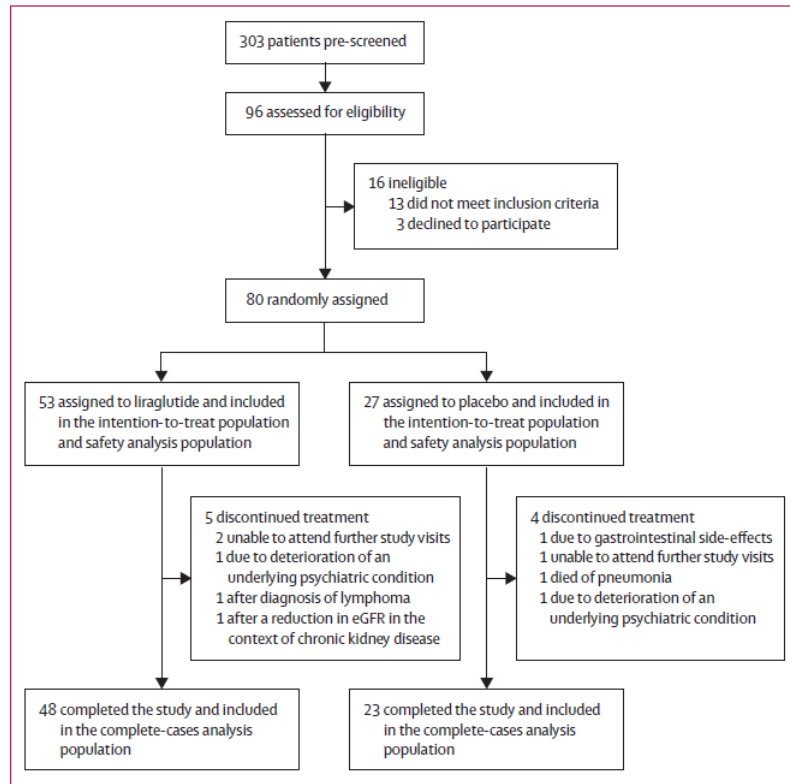
A significant proportion
of patients do will not
achieve the target with
bariatric/metabolic
surgery

Peterli R et al. JAMA 2018;319:255



Adjunctive liraglutide treatment in patients with persistent or recurrent type 2 diabetes after metabolic surgery (GRAVITAS): a randomised, double-blind, placebo-controlled trial

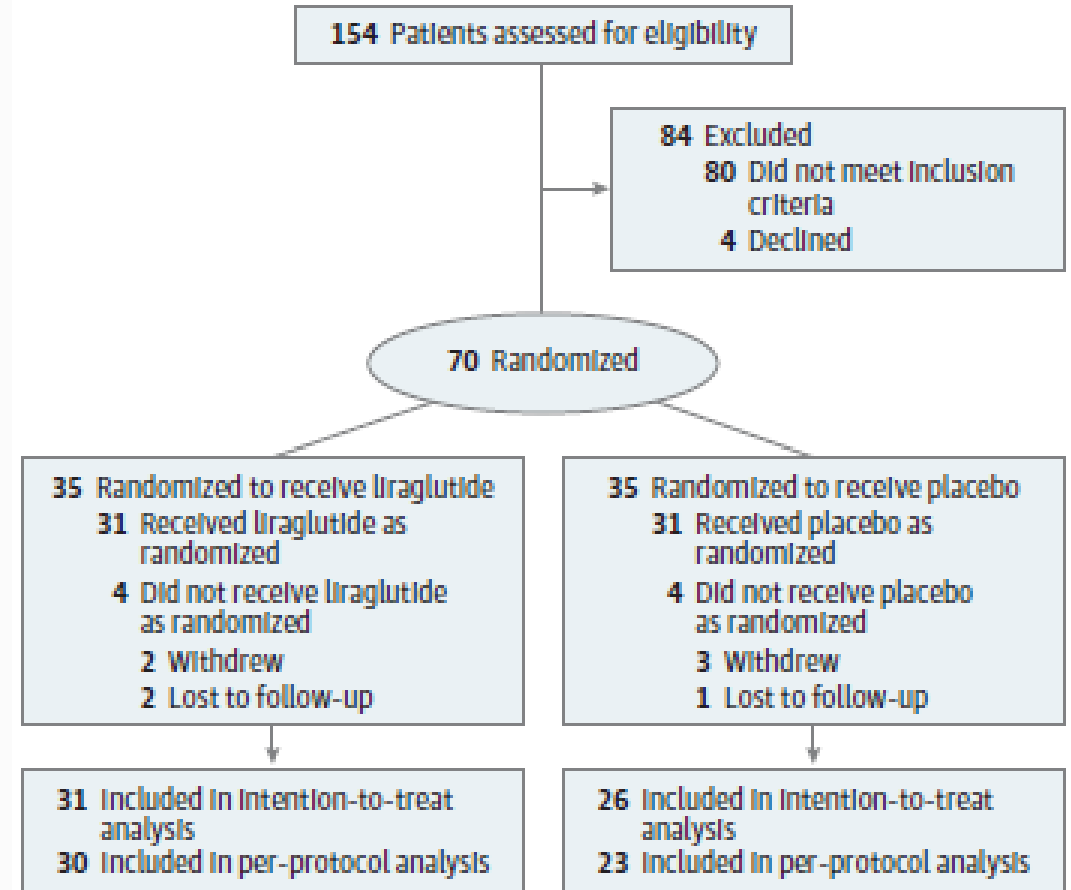
RYGB or LSG patients with persistent or recurrent type 2 diabetes at least 1 year after surgery from five hospitals in London, UK.



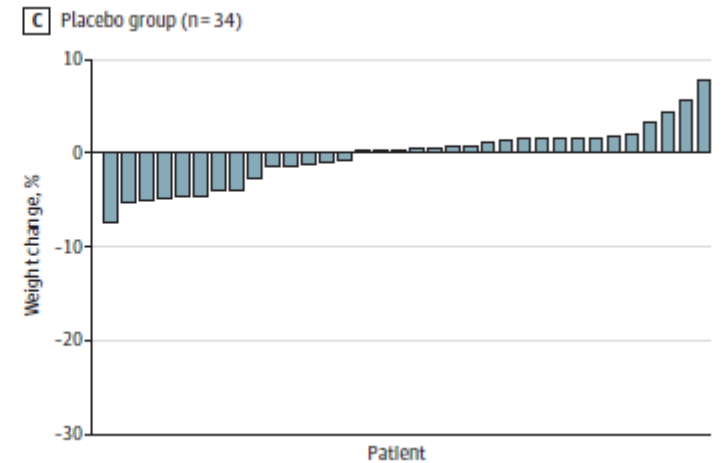
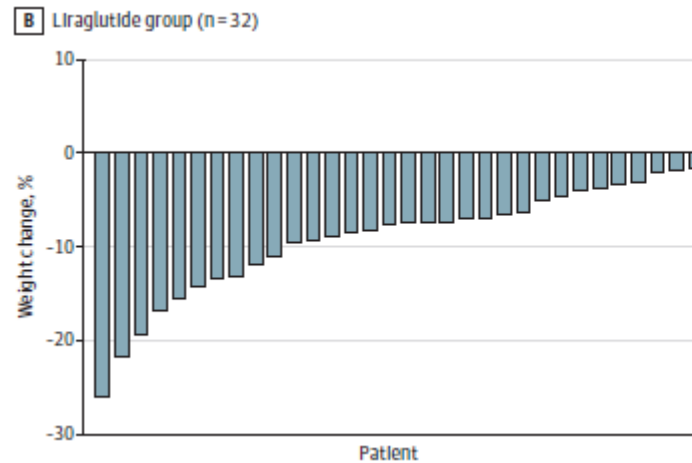
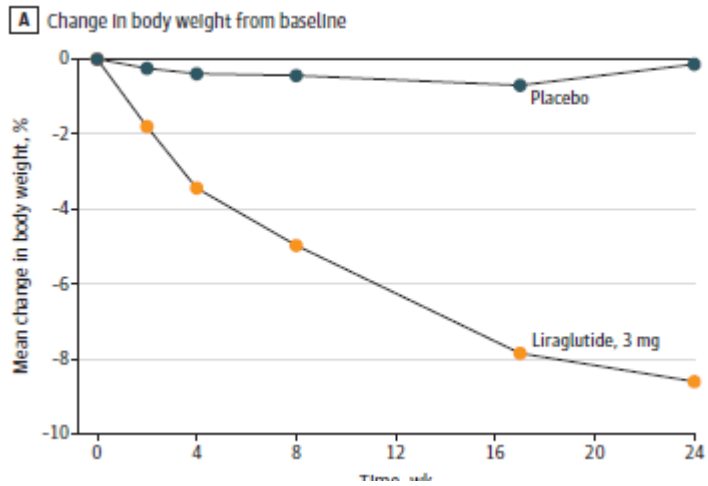
Safety and Efficacy of Liraglutide, 3.0 mg, Once Daily vs Placebo in Patients With Poor Weight Loss Following Metabolic Surgery
The BARI-OPTIMISE Randomized Clinical Trial

Inclusion criteria:

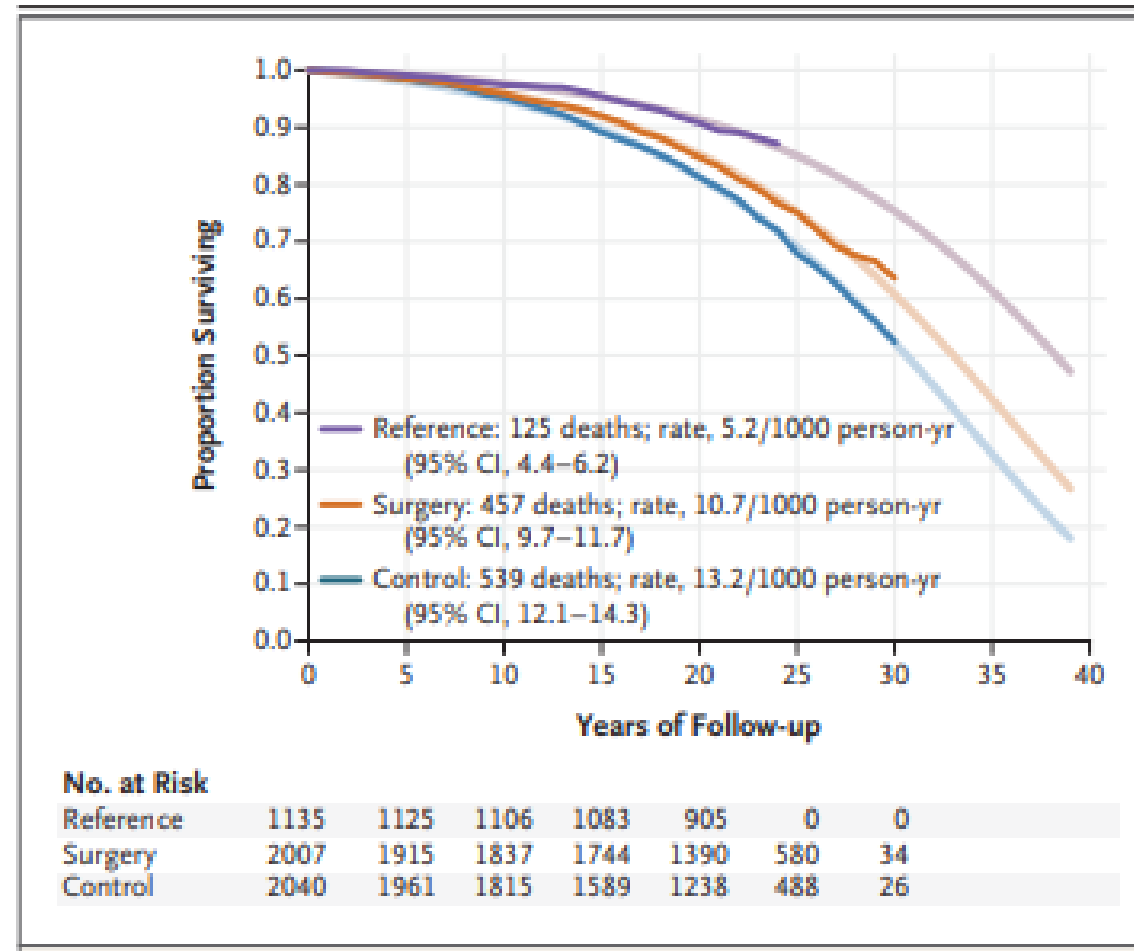
- **Poor weight loss after MS (RYGB or LSG)**
≤ 20% body weight loss at least 1 year after MS
- **Suboptimal nutrient-stimulated GLP-1 response**
≤ 2-fold increase in circulation GLP-1 between 0 and 30 min following a standardised 500 kcal mixed liquid meal



Safety and Efficacy of Liraglutide, 3.0 mg, Once Daily vs Placebo in Patients With Poor Weight Loss Following Metabolic Surgery The BARI-OPTIMISE Randomized Clinical Trial

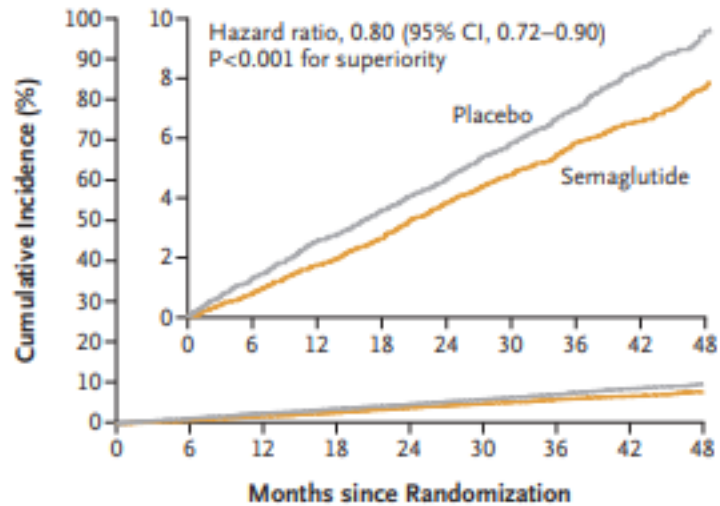


Life Expectancy after Bariatric Surgery in the Swedish Obese Subjects Study



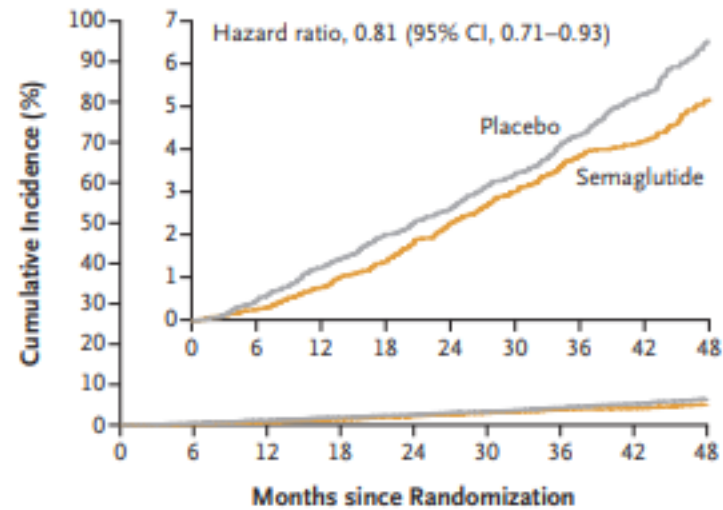
Semaglutide and Cardiovascular Outcomes in Obesity without Diabetes

A Primary Cardiovascular Composite End Point



No. at Risk	
Placebo	8801 8652 8487 8326 8164 7101 5660 4015 1672
Semaglutide	8803 8695 8561 8427 8254 7229 5777 4126 1734

D Death from Any Cause



No. at Risk	
Placebo	8801 8733 8634 8528 8430 7395 5938 4250 1793
Semaglutide	8803 8748 8673 8584 8465 7452 5988 4315 1832

TREATING OBESITY TO TARGET



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Grazie !!!



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CONGRESS
ON OBESITY**

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