Laparoscopic sleeve gastrectomy(LSG) vs GLP-1 receptor agonists(GLP-1 RAs) in morbidly obese patients with insulin resistance:A prospective cohort study

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[] I have no potential conflict of interest to report

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Background & Objective

- Different treatments are available for obesity management, including lifestyle interventions, pharmacological therapies, endoscopic interventions, and surgeries.
- Limited evidence is available on the weight loss effect and improvement of insulin resistance in LSG or GLP-1 RAs.
- Compare the weight loss effect and metabolic changes of LSG and GLP-1 RAs in morbidly obese patients with insulin resistance.

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Methods

- A prospective cohort study
- LSG group or GLP-1 RAs group
- Follow-up for 6 months
- Primary endpoints: EWL% (Excess Weight Loss) and changes of HOMA-IR (Homeostatic Model Assessment for Insulin Resistance)

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Results

80 patients were enrolled, **9** were excluded, and the final **71** obese patients were entered into the study and analyzed,**LSG group**(**N=36**),**GLP-1 RAs group**(weekly subcutaneous injections of Semaglutide) (**N=35**).

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Table 1. Primary endpoints at 6 months

	LSG(N=36)	GLP-1RAs(N=35)	p Value
EWL(%)	88.22±22.22	69.23±23.13%	0.001
HOMA-IR Change from baseline	5.50±4.36	3.11±2.30	0.006

Table 2. Adverse events and complications through 6 monthsLSG(N=36)GLP-1RAs(N=35)Acid reflux15 (41.7%)3 (8.6%)

Acid reflux	15 (41.7%)	3 (8.6%)	0.001
Dizziness	18 (50.0%)	7 (20.0%)	0.008
Alopecia	18 (50.0%)	8 (22.9%)	0.018
Anorexia	36 (100%)	26 (74.3%)	0.001

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p Value

Conclusion

In morbidly obese patients with insulin resistance,both the weight loss effect and the improvement in insulin resistance,LSG is more effective than GLP-1 RAs.

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Thank you for your attention!

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