

# HYPOCALCEMIA

in the **immediate** postoperative period following MBS

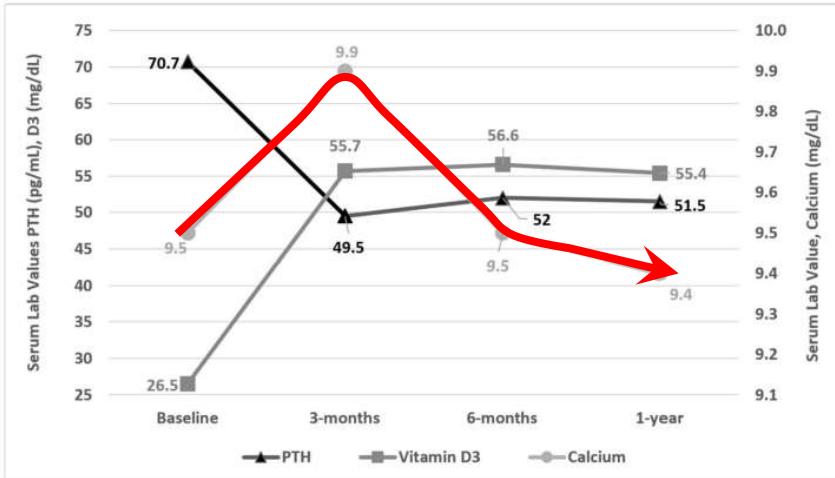
*hype or harm?*

Athanasiос G. Pantelis  
Greece

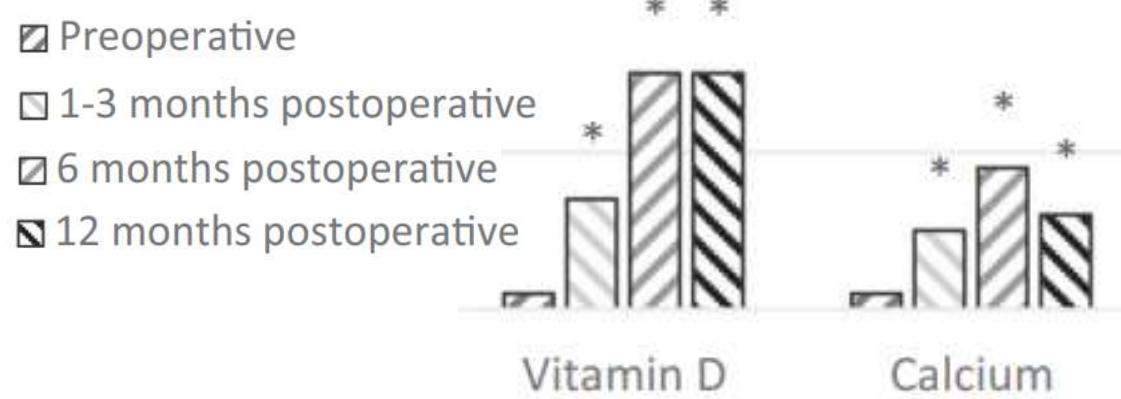
**I have no potential conflict of interest to report.**



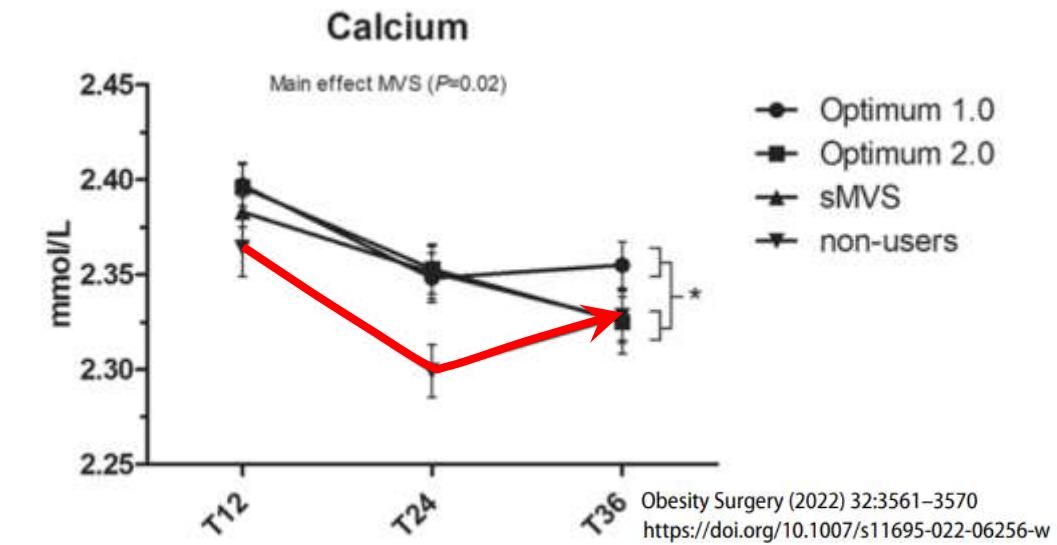
# BACKGROUND



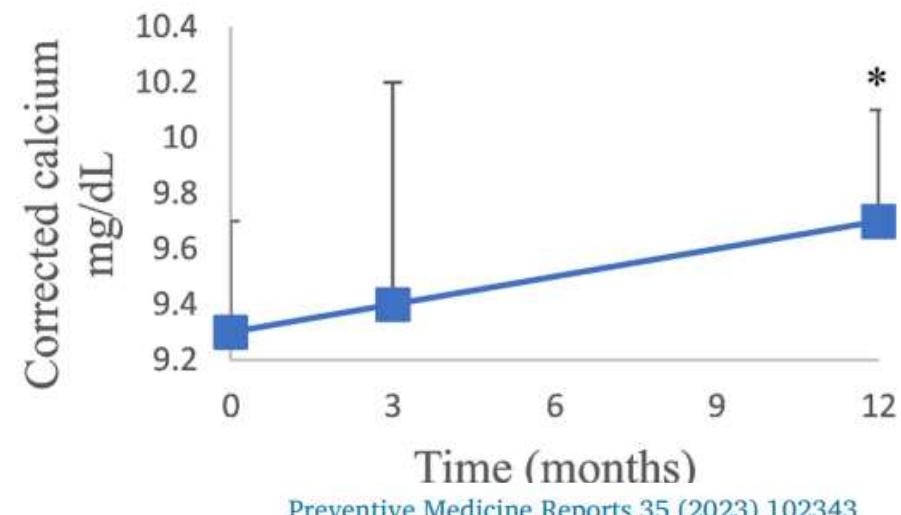
Surgical Endoscopy  
<https://doi.org/10.1007/s00464-023-10218-3>



*European Journal of Clinical Nutrition*; <https://doi.org/10.1038/s41430-023-01318-3>



Main effect MVS ( $P=0.02$ )  
*Obesity Surgery* (2022) 32:3561–3570  
<https://doi.org/10.1007/s11695-022-06256-w>



*Preventive Medicine Reports* 35 (2023) 102343

# METHODS

- All MBS patients.
- $\Delta t = \text{Oct 2022} - \text{Mar 2023}$ .
- Prospective data collection.

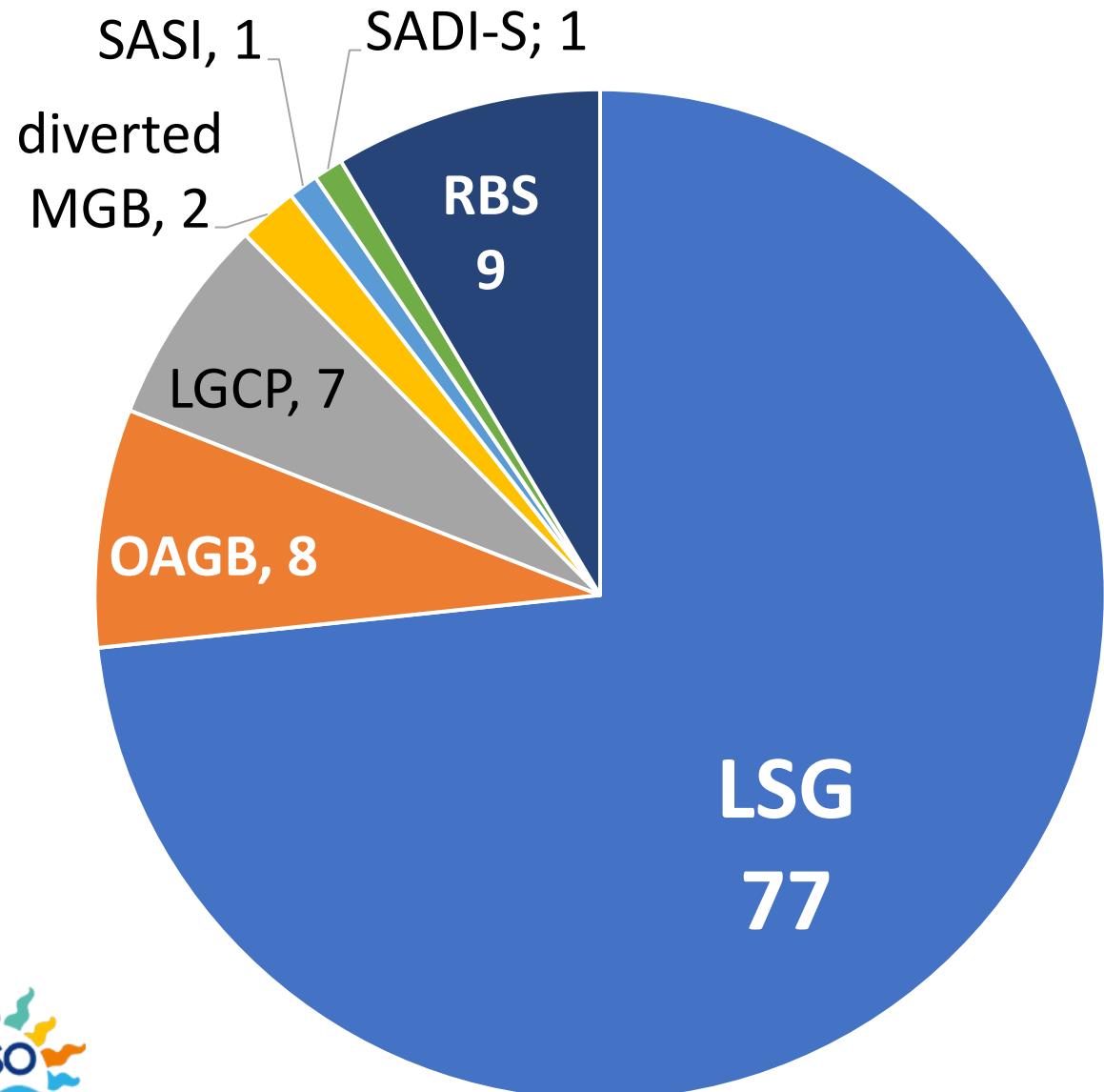
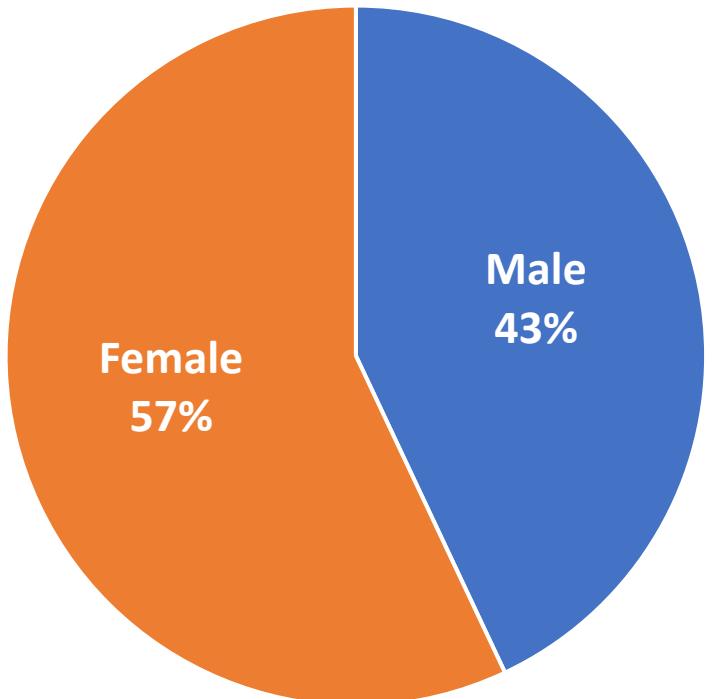
- Preop BMI.
- Type of surgery.
- Preop. serum  $\text{Ca}^{++}$ , albumin & corrected  $\text{Ca}^{++}$  (Payne formula).
- Postop. serum  $\text{Ca}^{++}$ , albumin & corrected  $\text{Ca}^{++}$ .
- Postop urine output.
- Bolus IVF.
- Bolus furosemide.

# RESULTS

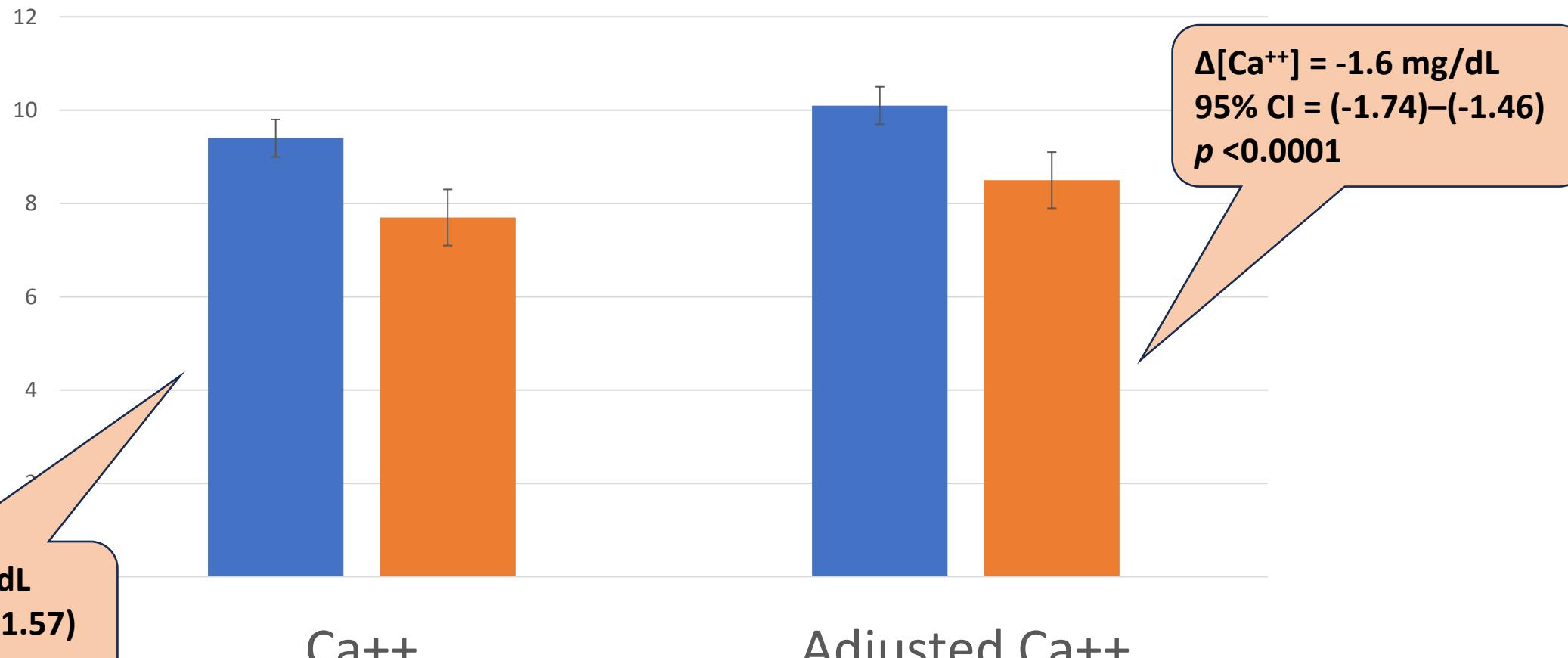
N = 105

Primary: 105

Revisional: 9

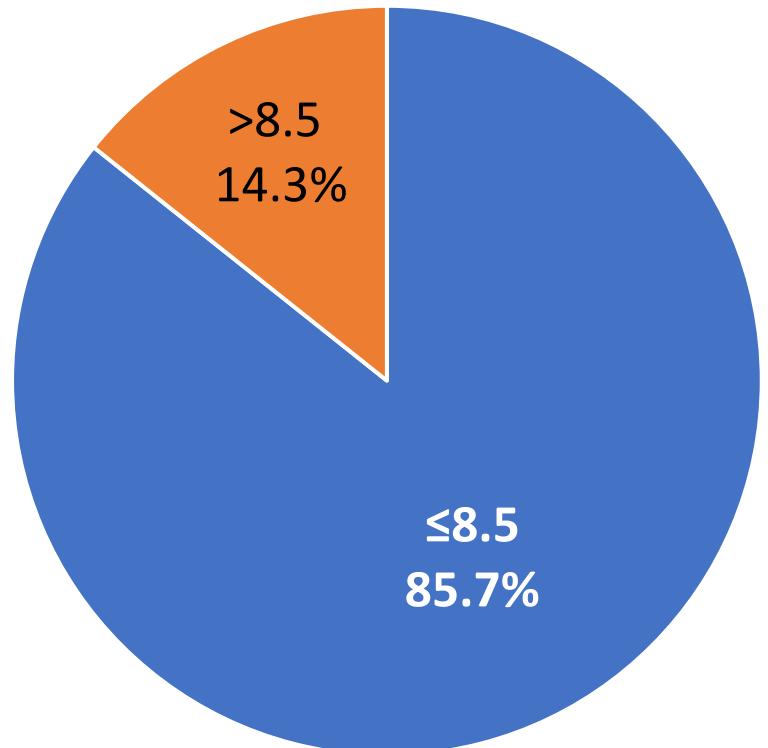


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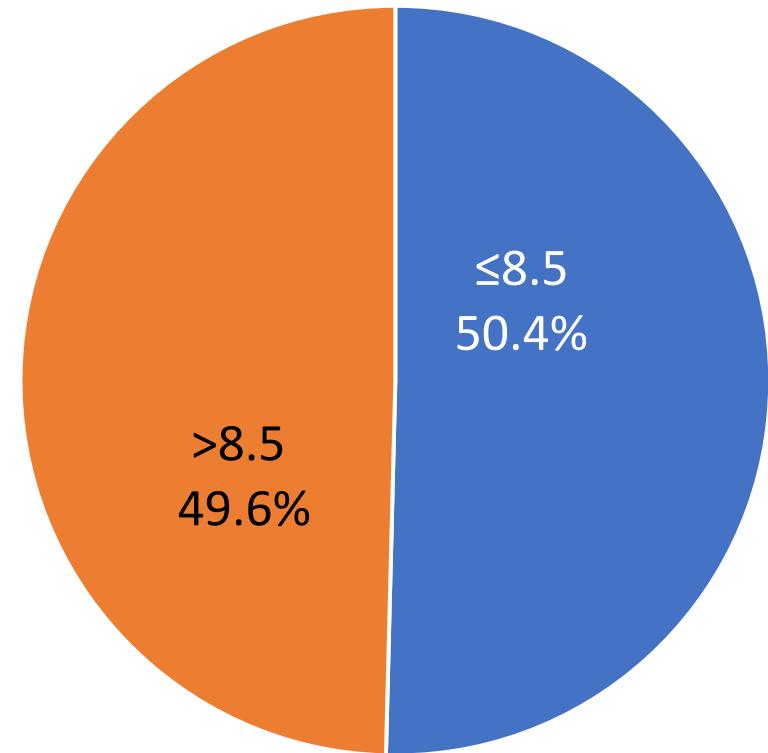


# RESULTS

Postop Ca<sup>++</sup> <8.5 mg/dL



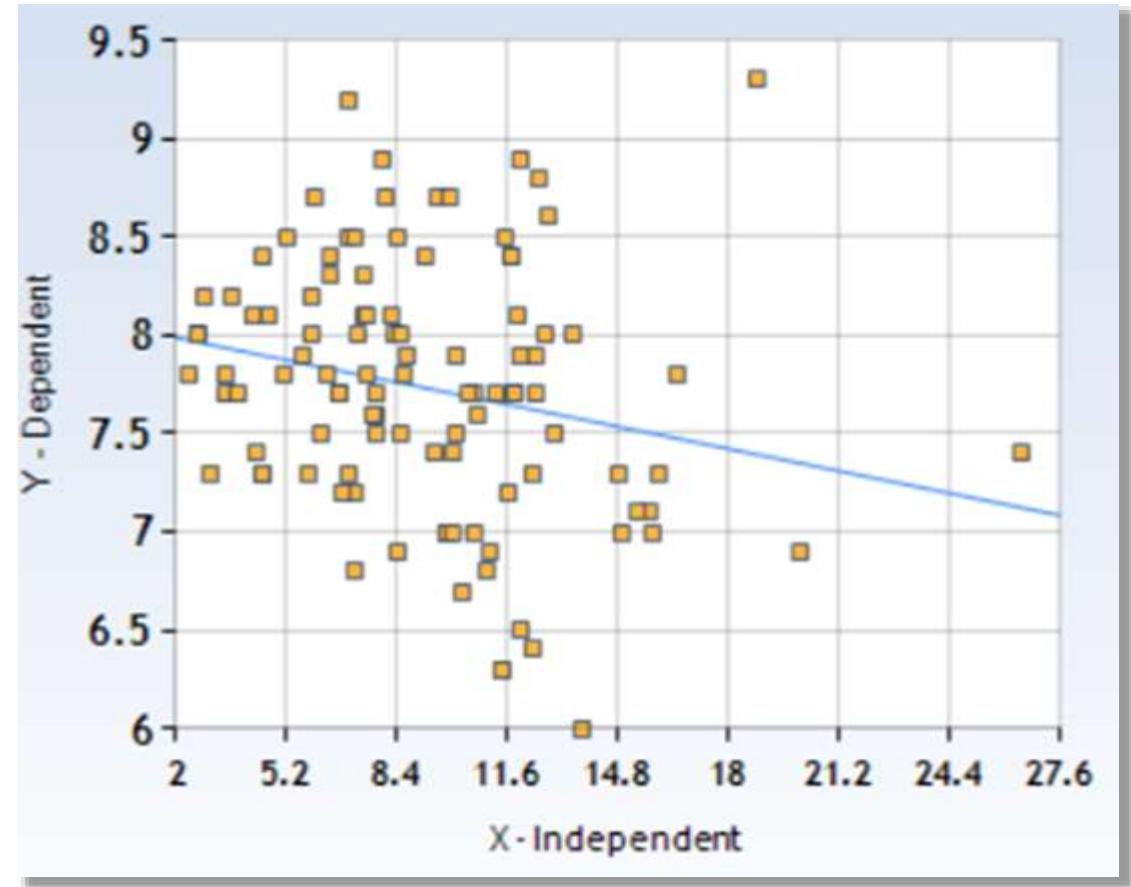
Adjusted postop Ca<sup>++</sup> <8.5 mg/dL



# RESULTS

## POTENTIAL CONFOUNDERS

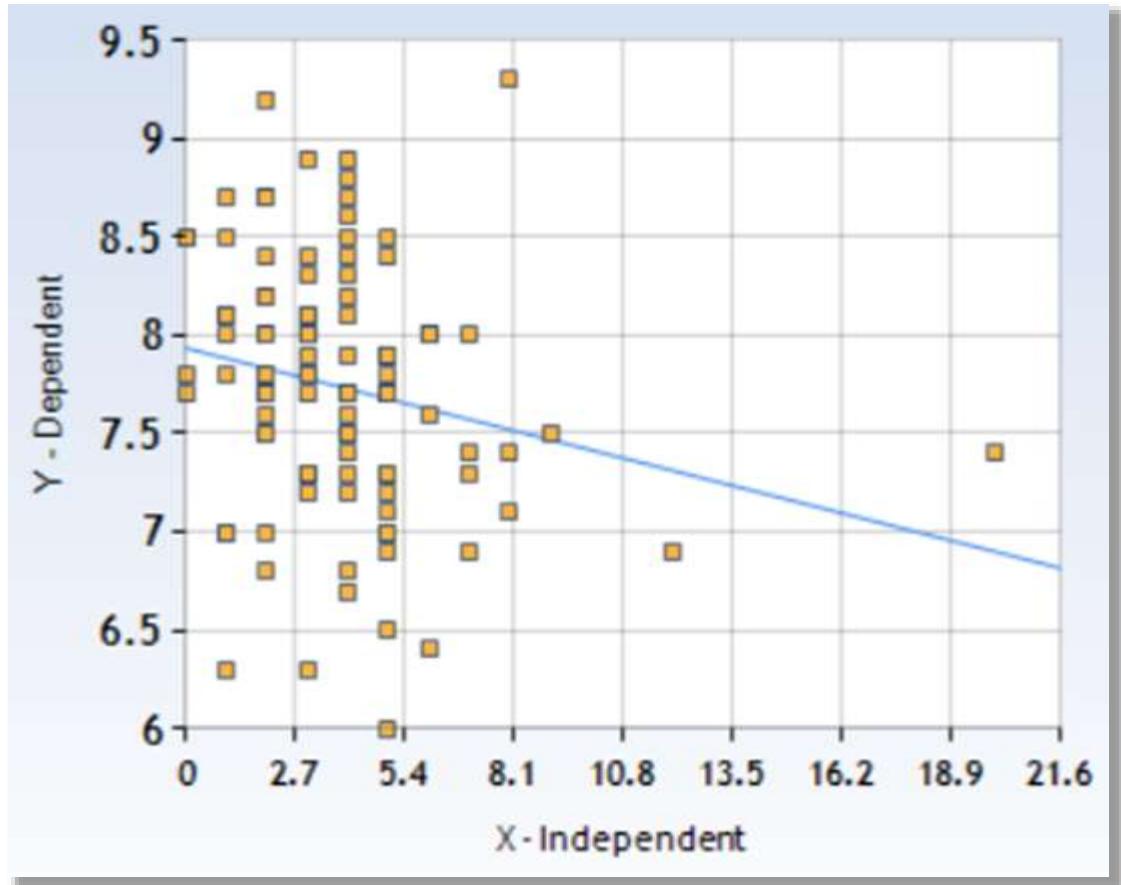
- Urine output (UO).
- Mean UO in first 24h:  
 $9.0 \text{ L} \pm 3.9$  (2.4 – 26.5).
- **$r = -0.18$**



# RESULTS

## POTENTIAL CONFOUNDERS

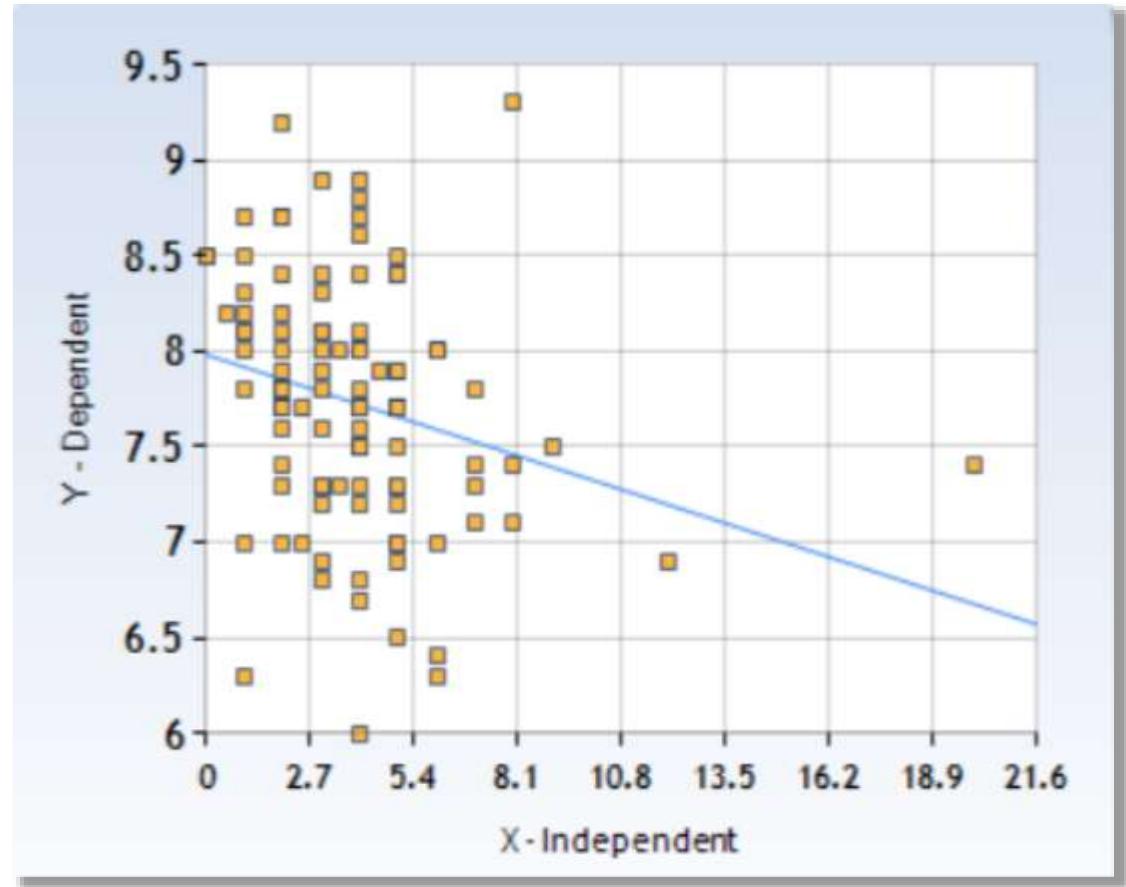
- Bolus iv fluids (BIVF).
- Mean BIVF in first 24h:  
 $3.8 \text{ L} \pm 2.6 (0 - 20)$ .
- **$r = -0.26$**



# RESULTS

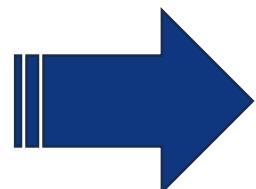
## POTENTIAL CONFOUNDERS

- Bolus furosemide (BF).
- Mean BF in first 24h:  
30 mg /2mL (0 – 140).
- **$r = -0.16$**

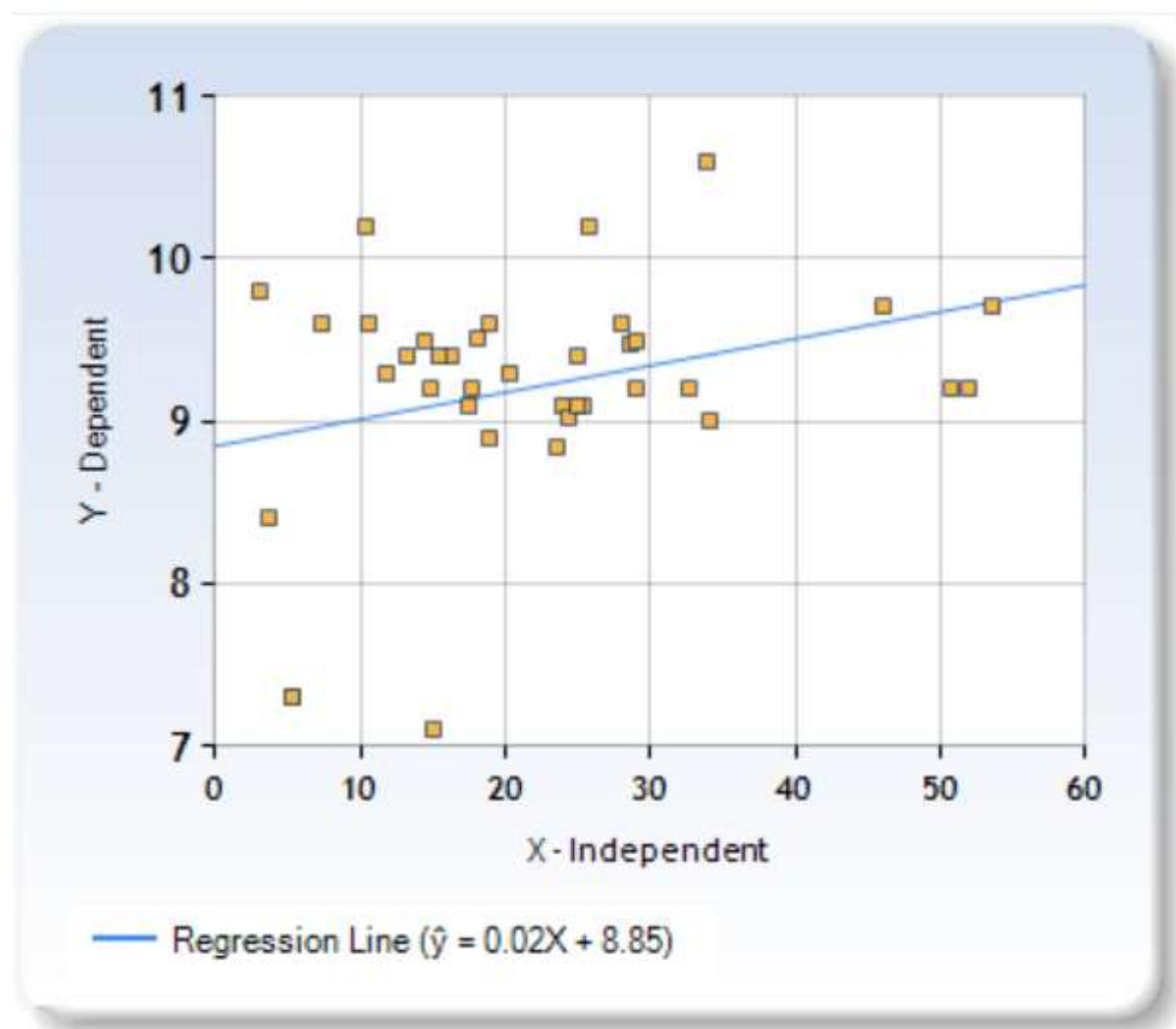


# LIMITATIONS

1) Preop Vit-D available  
only for 38 patients.  
(mean = 22.4 mg/dL)



- 2) PTH levels not measured.
- 3) Effects of laparoscopy & anesthesia on calcium levels.



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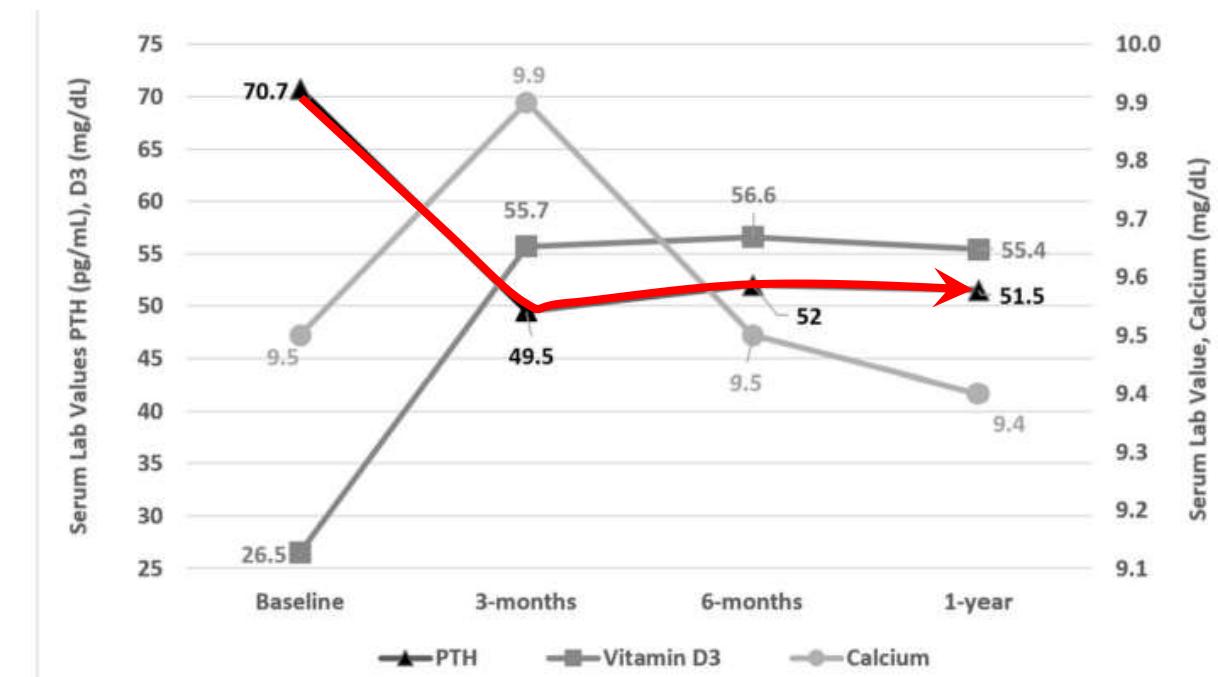
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3) Effects of laparoscopy & anesthesia on calcium levels.

## Prevalence and risk factors for secondary hyperparathyroidism (SHPT) in patients undergoing bariatric surgery

Laura E. Fischer<sup>3,4</sup>  · Fernando Moreno-Garcia<sup>1</sup> · Rachel Tran<sup>1</sup> · Allison Harmon<sup>1</sup> · Cooper Little<sup>1</sup> · Grayson Domingue<sup>2</sup> · Kenneth Stewart<sup>3</sup> · Fernando Mier Giraud<sup>3,4</sup> · Rishi Thakral<sup>2</sup>



Surgical Endoscopy  
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> J Clin Endocrinol Metab. 1999 Aug;84(8):2654-8. doi: 10.1210/jcem.84.8.5889.

## Hypocalcemia induced during major and minor abdominal surgery in humans

R Lepage <sup>1</sup>, G Légaré, C Racicot, J H Brossard, R Lapointe, M Dagenais, P D'Amour

Affiliations + expand

PMID: 10443655 DOI: 10.1210/jcem.84.8.5889

Randomized Controlled Trial > Vet Anaesth Analg. 2007 Mar;34(2):89-98.

doi: 10.1111/j.1467-2995.2006.00300.x.

## The effects of surgery and anesthesia on blood magnesium and calcium concentrations in canine and feline patients

Benjamin M Brainard <sup>1</sup>, Vicki L Campbell, Kenneth J Drobatz, Sandra Z Perkowski

Affiliations + expand

PMID: 17316389 DOI: 10.1111/j.1467-2995.2006.00300.x

# CONCLUSION

- Hypocalcemia is a real problem in the immediate post-MBS period.
- $\text{Ca}^{++} < 8.5 = 85.7\%$ .
- Adjusted  $\text{Ca}^{++} < 8.5 = 50.4\%$
- Weak correlation with urine output, IVF, furosemide.
- Mechanisms remain elusive.

# Thank you!



Patalpani waterfall,  
Madhya Pradesh, India