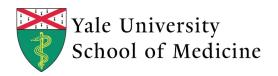
Prevalence and Outcomes of Same Day Discharge after Metabolic and Bariatric Surgery in Patients >65 Years Old

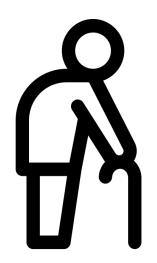
Safraz A. Hamid, MD; Elena Graetz, PhD; Eric Schneider, PhD; Karen E. Gibbs, MD

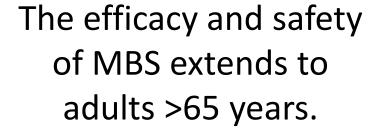




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There has been increasing use of MBS in this population.



There is increasing interest in same day discharge (SDD).

SDD is safe, but selection criteria are not standardized.



The prevalence and safety profile of SDD after MBS in adults >65 is unclear.



Retrospective cohort study using the MBSAQIP database, 2015 to 2022

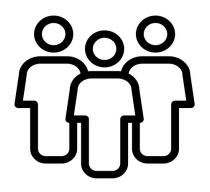
Older than 65 years, primary laparoscopic sleeve gastrectomy or Roux-en-Y gastric bypass



Stratified by discharge day: SDD, POD1, POD2, POD3, POD4+

Preoperative comorbidities and 30-day reoperation, intervention, readmission, and ED visit.

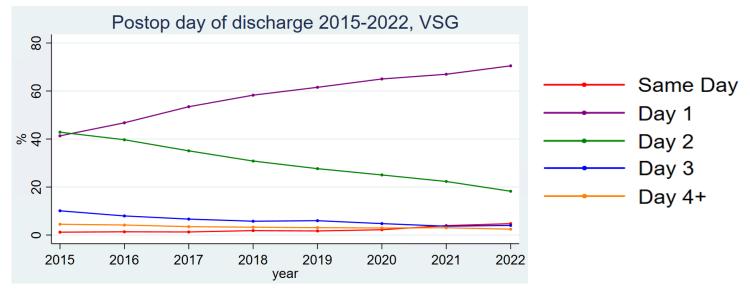


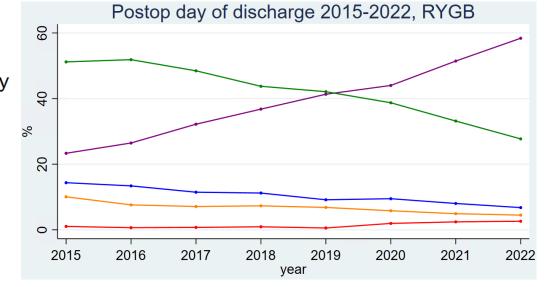


58,587 patients, 71.0% VSG 71.8% female Median age 68 years (IQR 4) Median BMI 42 (IQR 8)

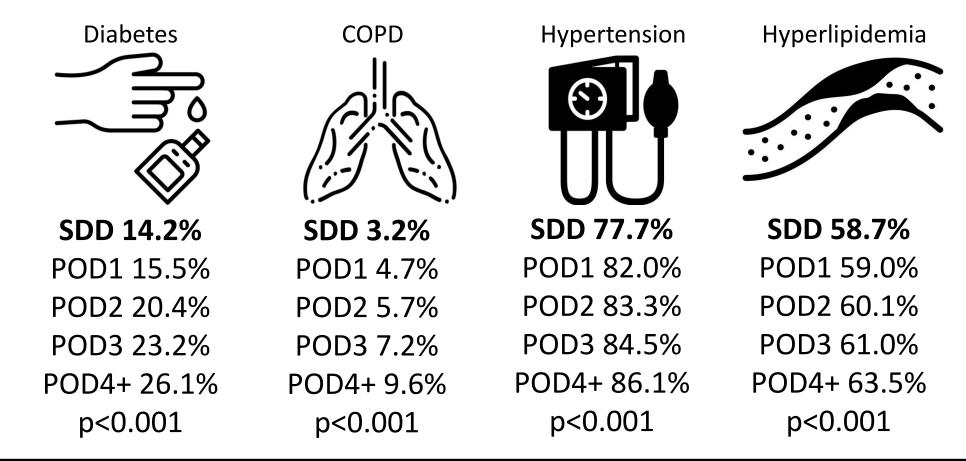


Overall, 1.98% of patients underwent SDD 52.7% were discharged on POD1, 33.7% on POD2









On multivariate analysis, there were no significant associations between SDD and odds of **30-day readmission**, **reoperation**, **unplanned ICU admissions**, or **ED visits** compared to patients discharged on POD1 (p>0.05).



Over the 8-year study period, there was a modest increase in the number of SDD among adults >65 years.





Adults >65 years discharged the same day have fewer cardiopulmonary comorbidities than those who are hospitalized.

SDD was not associated with more postoperative events, but further study is needed.



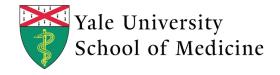


Thank You











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