

Meta-synthesis of primary care practitioner and patient perspectives of care following bariatric surgery

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I have no potential conflict of interest to report

Introduction



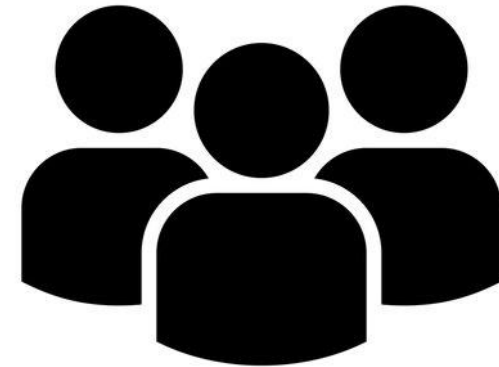
Post-operative care for 2 years



Ongoing healthcare and monitoring for life

How do I manage patients after bariatric surgery?

Am I getting good care after my bariatric surgery?



Aim

To understand the facilitators and barriers to optimal post-bariatric surgery management in primary care, as reported by both primary care practitioners and patients

Why

To provide recommendations to improve patient care after bariatric surgery, in the primary care setting

Methodology

Meta-synthesis of qualitative research

- Guided by the Enhancing Transparency in Reporting the synthesis of Qualitative research (ENTREQ) guidelines¹
- Thematic synthesis approach by Thomas and Harden²

ELIGIBILITY

- **STUDIES:** mixed methods & qualitative studies:
 - cohort
 - case-controlled
 - ethnographic
 - surveys
 - interviews
 - focus groups
- **COHORTS:**
 - adult patients
 - primary care practitioners

DATABASES

- Scopus
- MEDLINE
- EMBASE
- PsycINFO
- The Cochrane library
- Google Scholar
 - up to July 2023

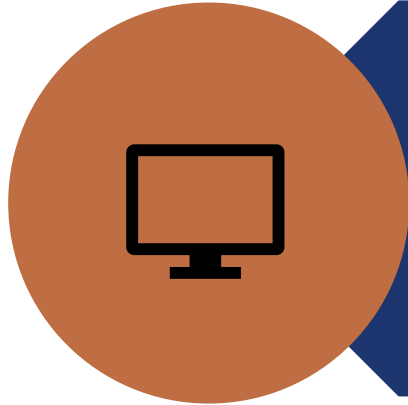
SEARCH TERMS

- “metabolic and obesity surgery”
- bariatric surg*
- “gastric bypass”
- “weight loss surgery”
- “sleeve gastrectomy” AND
- “general practitioner” OR “family physician” OR “family doctor” OR “primary care”
- AND
- patient or “patient care” OR support

1. Tong A, Flemming K, McInnes E, Oliver S, Craig J. Enhancing transparency in reporting the synthesis of qualitative research: ENTREQ. *BMC Med Res Methodol.* 2012;12(1):181.

2. Thomas J, Harden A. Methods for the thematic synthesis of qualitative research in systematic reviews. *BMC Med Res Methodol.* 2008;8:45.

Methodology



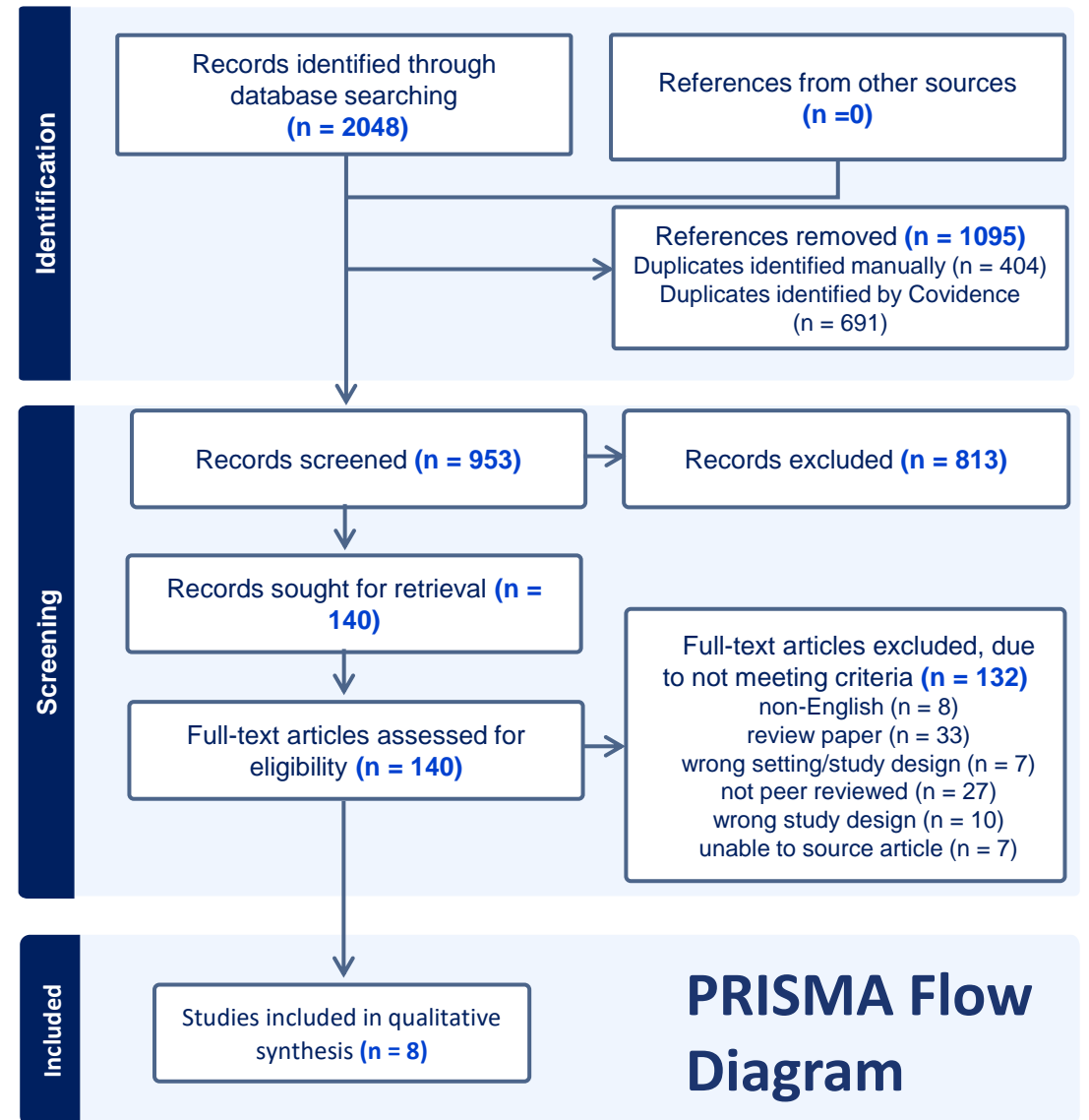
Data Extraction

- completed in Covidence
- results and quotes loaded onto Quirkos software



Quality appraisal

- Critical Appraisal Skills Program (CASP) checklist¹
- Using a three-point scoring system



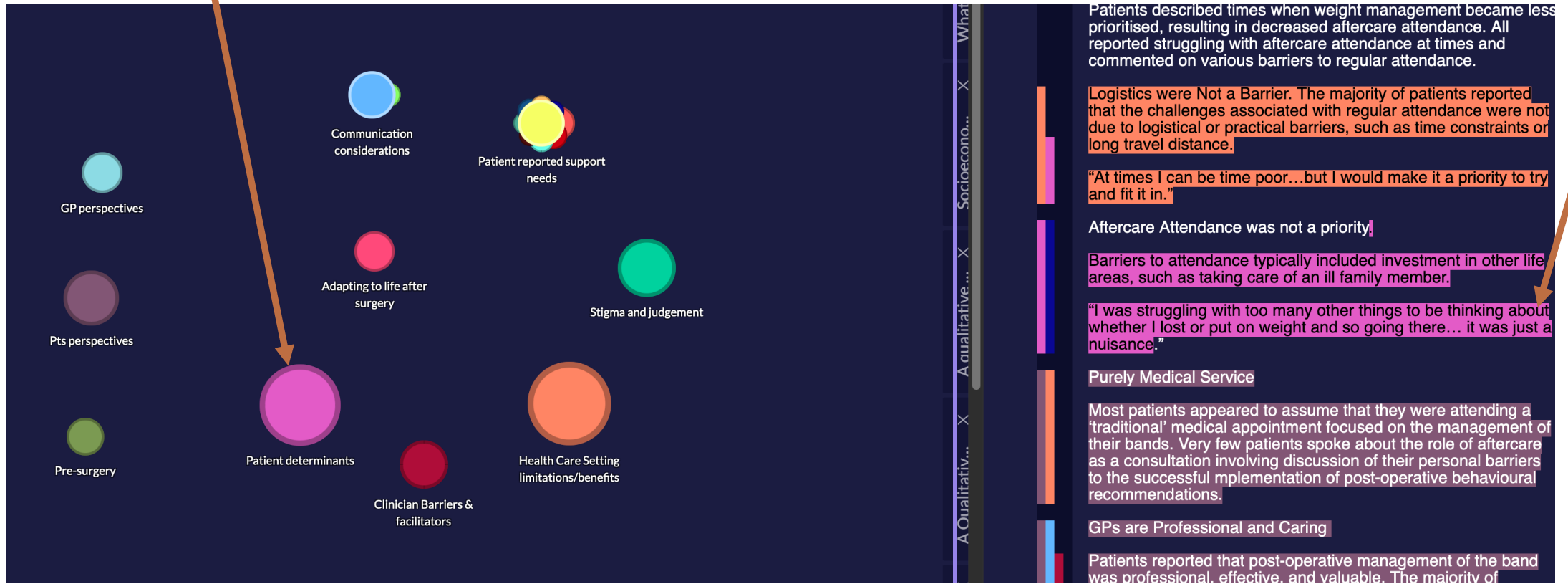
1. Programme CAS. CASP Checklists. CASP UK-OAP Ltd. <https://casp-uk.net/casp-tools-checklists/>. Published 2023. Accessed January 2023

Themes represented as coloured circles.

Bigger circles = greater number of quotes associated with the theme

Data synthesis

Data from papers including text, figures, tables and author interpretations were imported into Quirkos



Results

8 studies

- 3 Australian, 3 American, 1 Canadian, 1 UK
- 8 papers included patient perspectives
 - n= 299 patients
- 4 papers from primary care practitioner perspective
 - n= 42

7 themes

- communication issues
- clinician barriers and facilitators
- patient context/ determinants
- healthcare setting
- stigma and judgement
- adapting to life post-surgery
- patient-related support needs

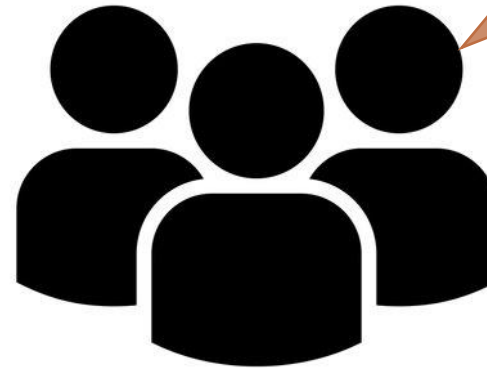
Quotes highlighting the themes

I was a little bit terrified because they just send them back to you who has no experience in post-op bariatric surgery care



“I think a program would be useful where the PCP is part of that program... and feeds back to them... There isn't anything like that ... where everyone's in the team...”

“I don't think PCPs really understand what people go through when they have surgery, they don't seem to know enough”



“be supportive... Let us talk... It's not always about the numbers...we are excited that we are losing weight, but it's not the numbers that are changing, it's our whole mentality, our whole person.”

“It's hard to admit I'm not doing what I'm supposed to. But because they listened and gave good feedback and advice. I never felt like I had to hide that.”

Conclusions

- Primary care is central to managing and supporting patients following bariatric surgery
- Patients want long-term support and care in the primary care setting
- Primary care practitioners need support to manage patients

MORE RESEARCH IS NEEDED

Actions

Recommendations for primary care practitioners

- avoid stigmatising language
- focus on overall health outcomes, not just weight
- customise appointments for individual needs
- offer diverse informational resources
- clarify healthcare roles to patients
- motivate patients to seek assistance whenever necessary
- provide flexible appointments, i.e. in-person and virtual
- access a comprehensive multidisciplinary healthcare team
- pursue bariatric care training and education

Recommendations for bariatric surgery centres

- provide primary care practitioners with a comprehensive care plan from referral to discharge
- integrate referring primary care practitioners into the bariatric team when feasible
- offer primary care practitioners' education or mentoring on bariatric care
- define roles of healthcare providers and patients to set expectations
- educate patients on support resources i.e. groups and helplines
- provide patients with resources to be shared with their primary care practitioner