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Commentary on "The Short-Term Effect of Sleeve Gastrectomy on Blood Lipid Parameters and Emotional Appetite in Morbidly Obese Individuals"

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ABSTRACT

I was highly intrigued by the article by Onay and Tokay, "The Short-Term Effect of Sleeve Gastrectomy on Blood Lipid Parameters and Emotional Appetite in Morbidly Obese Individuals," in Volume 5, Issue 1 of the Bingöl University Health Journal, 2024. This letter aims to discuss the benefits of bariatric surgery on lipid profiles, as supported by numerous studies, and to address a key methodological concern: the omission of information regarding the exclusion of patients using lipid-altering medications. Addressing this issue could further enhance the study's scientific rigor. I extend my gratitude to the authors for their valuable contribution and look forward to future advancements in this field.

"Morbid Obez Bireylerde Tüp Mide Ameliyatının Kan Lipid Parametreleri ve Duygusal İştah Üzerine Kısa Dönem Etkisi" Üzerine Yorumlar

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ÖZ

Bingöl Üniversitesi Sağlık Dergisi'nin 2024 yılı 5. cilt 1. sayısında yer alan Onay ve Tokay'ın "Morbid Obez Bireylerde Sleeve Gastrektominin Kan Lipid Parametreleri ve Duygusal İştah Üzerindeki Kısa Dönem Etkisi" başlıklı makalesini ilgiyle okudum. Bu mektupta, bariyatrik cerrahinin lipid profilleri üzerindeki faydalarını, çeşitli çalışmalarla desteklenen yönleriyle ele almayı ve lipid düzeylerini etkileyen ilaçları kullanan hastaların dışlanıp dışlanmadığına dair metodolojik bir kaygıyı vurgulamayı amaçlıyorum. Bu konunun ele alınması, çalışmanın bilimsel titizliğini daha da artırabilir. Yazarlara değerli katkıları için teşekkür eder, bu alandaki gelecekteki gelişmeleri sabırsızlıkla beklerim.

BİNGÖL ÜNİVERSİTESİ

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Dear Editor,

I was highly intrigued by the research article by Onay and Tokay, titled “The Short-Term Effect of Sleeve Gastrectomy on Blood Lipid Parameters and Emotional Appetite in Morbidly Obese Individuals,” featured in Volume 5, Issue 1 of the “Bingöl University Health Journal” in 2024 (1). I would like to extend my gratitude to both the authors and the editorial board for their valuable and insightful work. In this letter, I intend to discuss specific aspects that I believe could further enhance the article's discourse.

Bariatric surgery is emerging as an increasingly utilized and effective intervention in the management of obesity. In addition to promoting weight loss, it offers significant advantages in managing obesity-related comorbidities.These include hypertension, diabetes mellitus, coronary artery disease, and hyperlipidemia among the primary examples.The alterations in blood lipid parameters following bariatric surgery have been evaluated in numerous studies. In the review by Piche and colleagues, studies were meticulously examined, revealing that hyperlipidemia is a prevalent medical condition among obese patients. Consistent with Onay's study, it was noted that bariatric surgery has markedly positive effects on the lipid profile, with these benefits manifesting as early as the immediate postoperative period (2). In a meta-analysis encompassing 22 studies with 4160 patients, a 67% reduction in the prevalence of dyslipidemia was reported 2 to 5 years following the surgical procedure (3). Additionally, another study conducted by Pawłuszewicz reported significant reductions in LDL and total cholesterol levels in patients who underwent sleeve gastrectomy, while HDL levels were observed to increase, contrary to the findings of Onay (4).

The underlying mechanisms include the amelioration of insulin resistance, reduction in hepatic lipid accumulation, decreased inflammation due to changes in adipokine levels, and a reduced hepatic VLDL-TG secretion rate (2).

In addition, there is a crucial point we would like to address. The study's methodology does not specify whether patients were using medications that affect lipid levels, nor does it mention if such patients were excluded. Medications like statins, fenofibrate, and others can alter patients' lipid profiles, potentially influencing the study's results and the observed effects of bariatric surgery on lipid profiles (5). This omission could impact the scientific rigor of the study. Given that hyperlipidemia is common among obese patients, it is expected that some of these patients may have used or be using such medications. The study does not include any statements addressing this condition.

In summary, while recognizing the strengths of Onay's study, addressing the highlighted issues concerning the exclusion criteria and methodology would improve the scientific robustness and clinical significance of the results. I am grateful for the opportunity to offer feedback and look forward to future developments in this field. Additionally, I sincerely thank the authors once again for their significant contribution to this area of research.

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