

# SHORT-TERM RESULTS OF THE PILOT PROJECT AIMED AT OPTIMIZING THE CARE OF BARIATRIC PATIENTS IN THE PERIOPERATIVE PERIOD.

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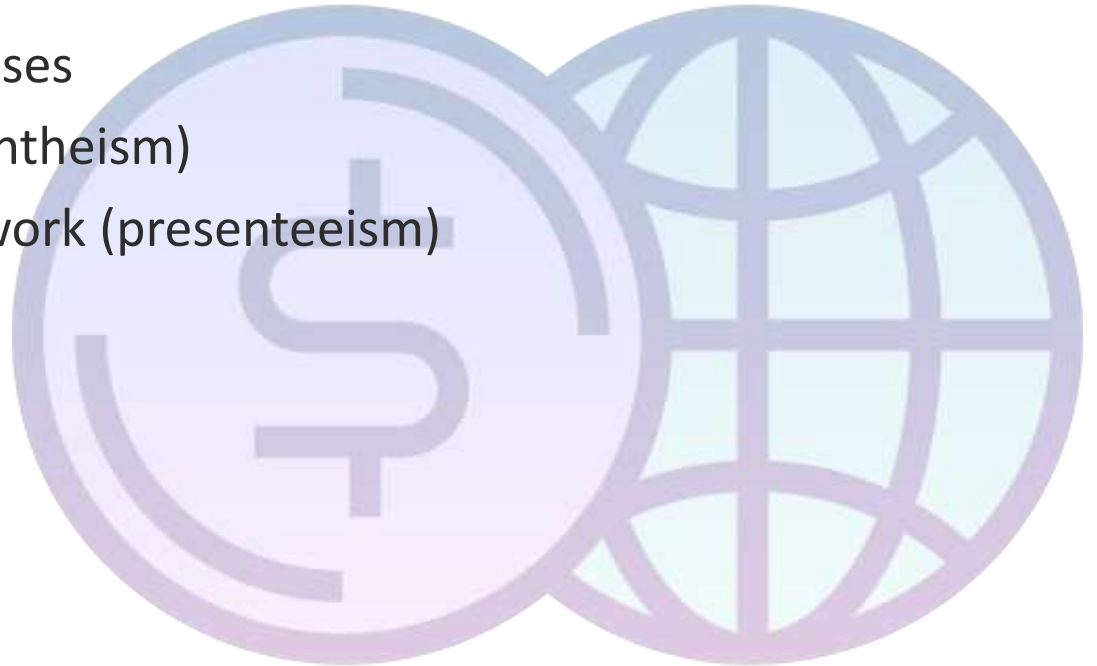
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Authors have no conflict of interest to declare.



# IMPACT OF OBESITY ON THE NATIONAL ECONOMY

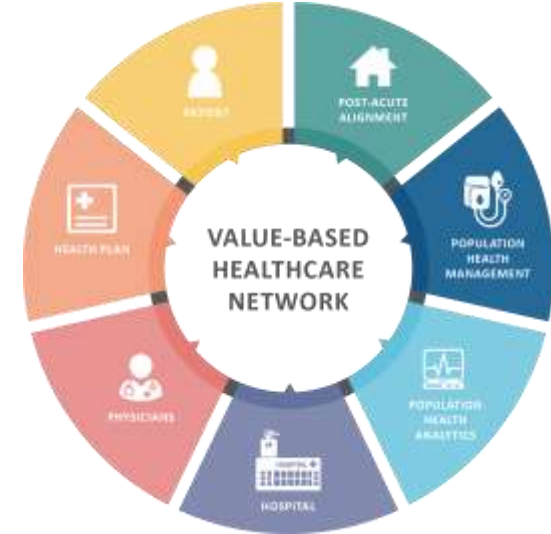
- high health care expenses
- lost productivity (absenteeism)
- lower productivity at work (presenteeism)
- premature mortality
- permanent disability





# VALUE-BASED HEALTHCARE

$$\text{VALUE} = \frac{\text{treatment outcomes relevant to patients}}{\text{the cost of obtaining results}}$$





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VALUE =  $\frac{\text{treatment outcomes relevant to patients}}{\text{the cost of obtaining results}}$

↑ VALUE =  $\frac{\text{treatment outcomes relevant to patients}}{\text{the cost of obtaining results}}$  ↓





# THE MAIN ASSUMPTIONS OF THE PILOT PROJECT



Integrated Practice  
Units



outcomes and costs  
should be measured  
for each patient



single service  
payment



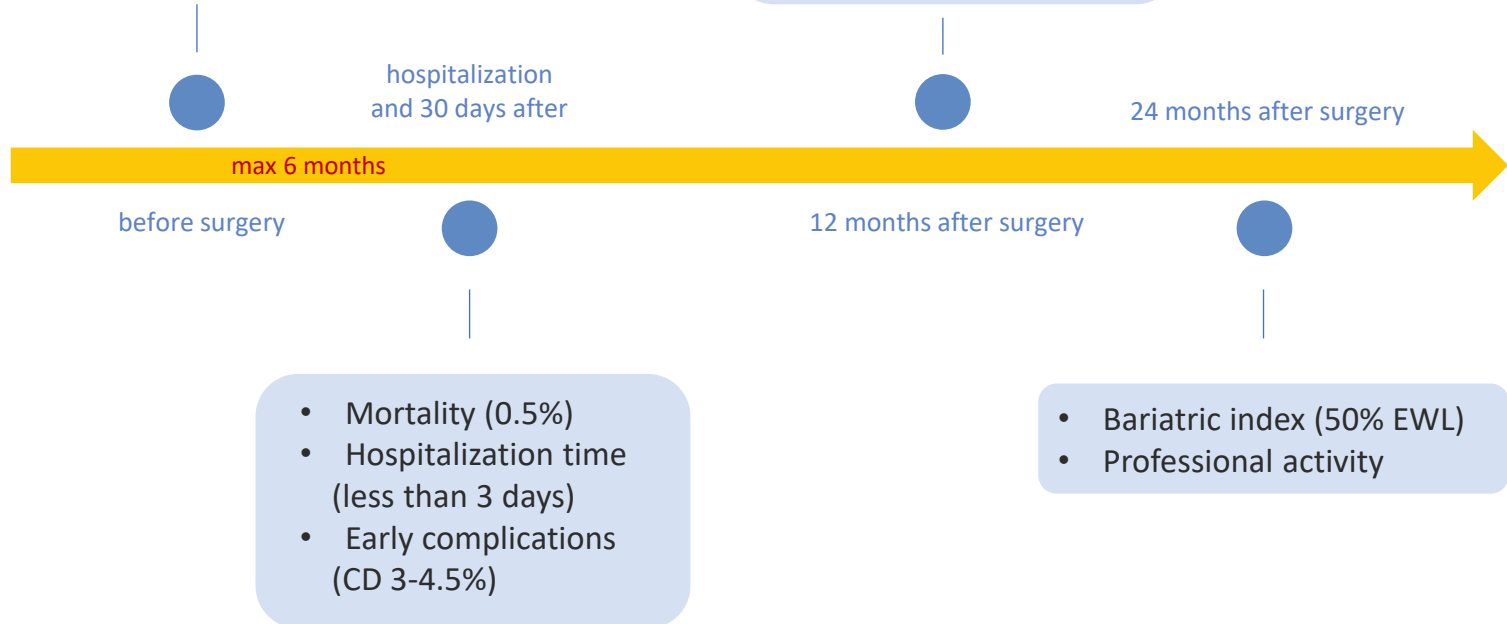
payment for the  
entire treatment  
period



# PROJECT CHECKPOINTS AND MEASURES OF VALUE

- Weight loss (at least 8%)
- % of patients qualified for surgery (90%)

- Bariatric index (60% EWL)
- Late complications
- Apnea remission
- Diabetes remission
- Asthma, COPD remission



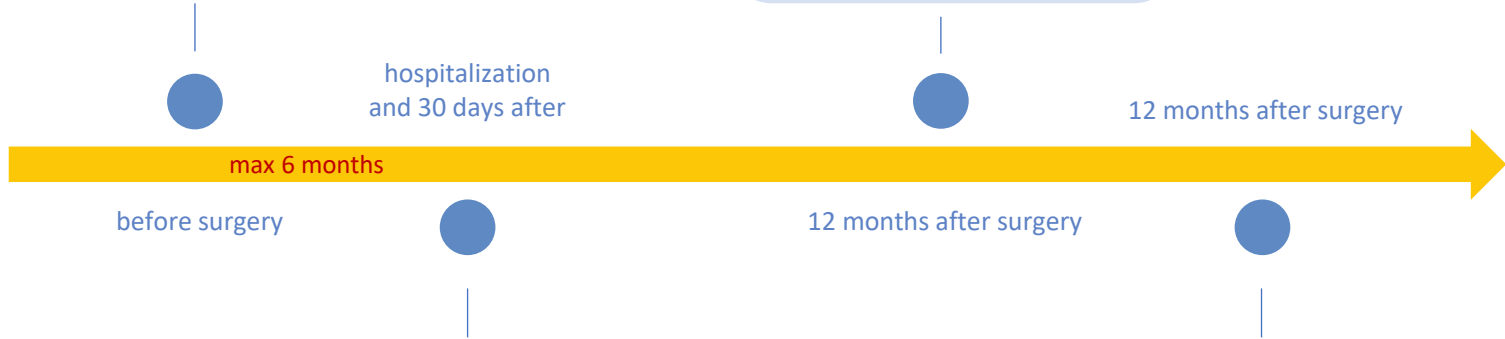


# PROJECT CHECKPOINTS AND MEASURES OF VALUE

- Weight loss (at least 8%)
- % of patients qualified for surgery (90%)

→ **29%**

- Bariatric index (60% EWL)
- Late complications
- Apnea remission
- Diabetes remission
- Asthma, COPD remission



- Mortality (0.5%)
- Hospitalization time (less than 3 days)
- Early complications (CD 3-4.5%)

→ **0%**  
→ **90%**

- Bariatric index (50% EWL)
- Professional activity





# REQUIREMENTS MET BY THE PARTICIPATING HOSPITAL

## HOSPITAL WARDS AND DIAGNOSTIC UNIT

- a general surgery ward
- an endoscopy unit
- a radiology unit

## MEDICAL STAFF

- a general surgeon, with competence and experience in surgical treatment of obesity
- an internist/diabetologist
- an anesthesiologist
- a doctor specializing in medical rehabilitation
- a psychologist
- a physiotherapist
- dietitian
- a person with higher medical education - pilot project coordinator



# AIM OF THE STUDY

- The aim of the study was to show short-term results of our pilot project such as hospitalization time, surgical procedure duration and the percentage of pre-surgery weight loss.



January 2020

December 2021

March 2023



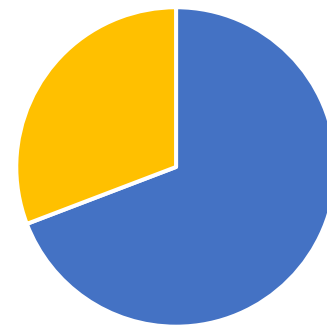
1st group

before the pilot project  
implementation



2nd group

after the pilot project  
implementation



■ females ■ males



## INCLUSION CRITERIA



- patients with BMI  $\geq 40$  kg/m<sup>2</sup>
- 18 years or older
- patients diagnosed with ICD-10: E66.0 Obesity due to excess calories
- patients with BMI 35–40 kg/m<sup>2</sup> who may benefit from surgically induced weight loss potential improvement in obesity-related diseases



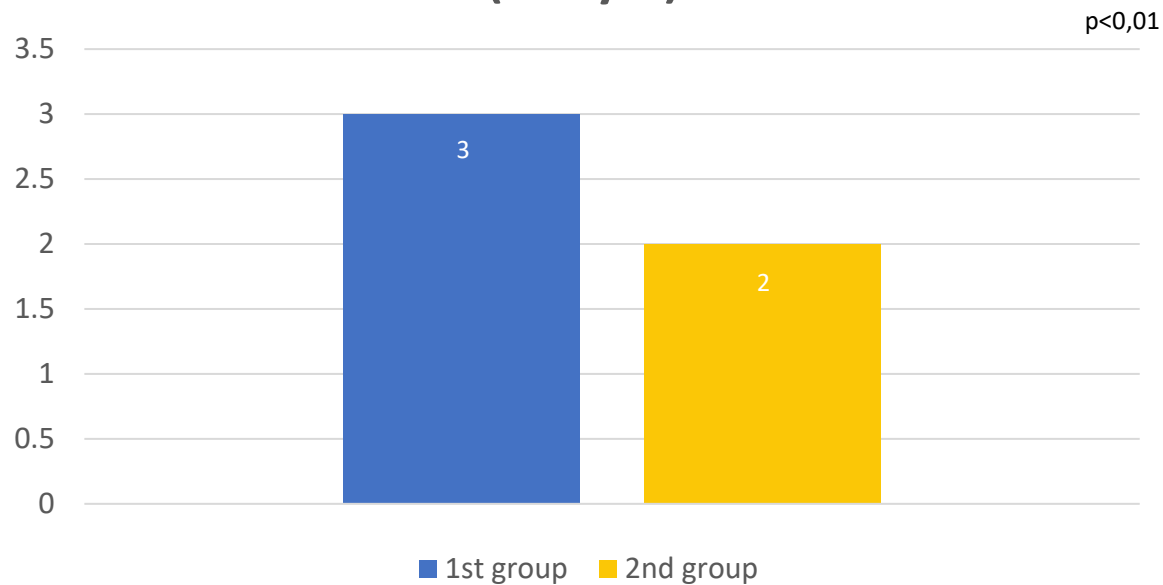
## EXCLUSION CRITERIA



- incurable diseases leading to cachexia
- life-threatening diseases
- endocrine diseases causing obesity
- severe blood coagulation disorders
- active addiction to alcohol or drugs
- mental illnesses that cannot be controlled despite treatment and pharmacotherapy
- severe mental retardation
- inability to participate in long-term post-surgical follow-up treatment
- the period of 12 months preceding the planned pregnancy and the period of pregnancy and breastfeeding
- lack of full conviction as to the rightness of the choice of surgical treatment
- a condition preventing independent living in a situation where the family or organizational unit of social welfare isn't able to ensure adequate long-term supervision

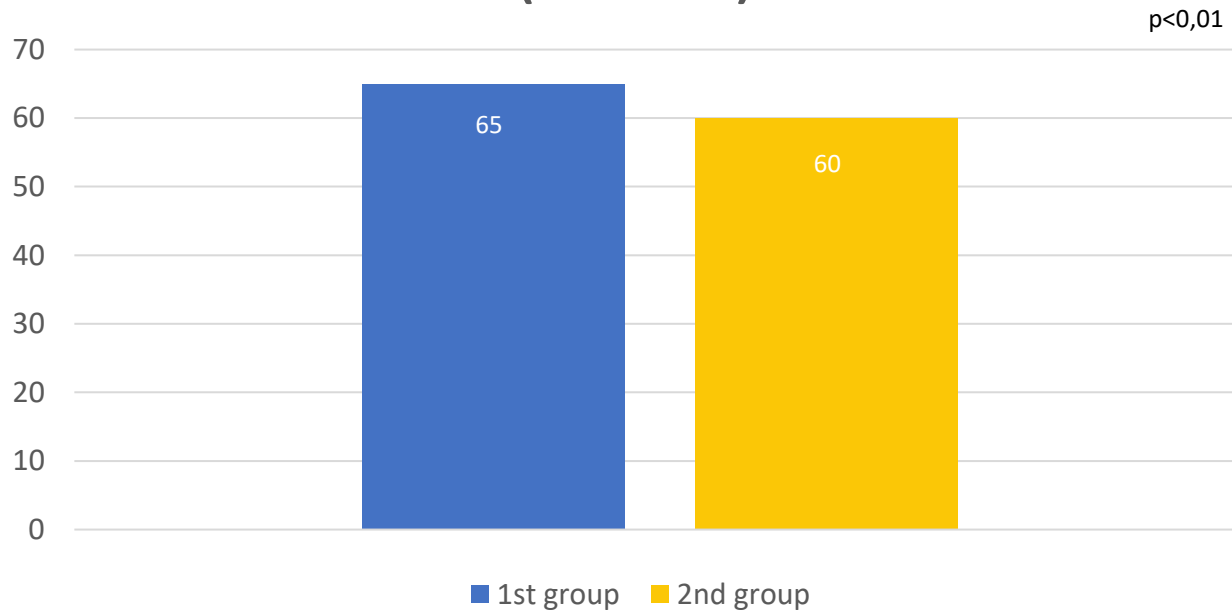


# the time of hospitalization (days)



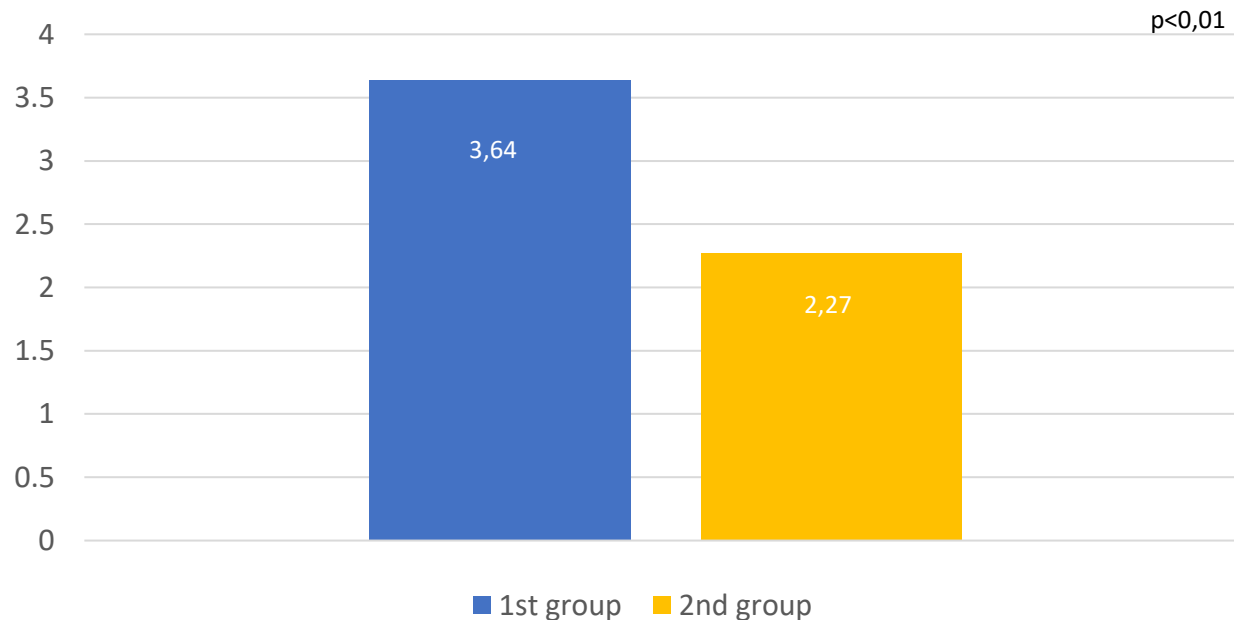


# the time of operation (hours)





## the percentage of weight loss before surgery (kilograms)







# SUMMARY

- Shifting from individual service payments to payments covering the entire treatment period has the potential to lead to an overall reduction in treatment costs.
- Additional financial benefits for individual checkpoints can further enhance healthcare quality.
- Our study shows that an appropriate preparation of a bariatric patient for surgery can affect many factors, such as the time of hospitalization or the time needed for performing a surgery.

THANK YOU FOR YOUR  
ATTENTION