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**EVALUATION OF EARLY POSTOPERATIVE PREGNANCY AFTER BARIATRIC SURGERY AND EFFECTS ON LONG-TERM WEIGHT LOSS**

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**Background:** The American College of Metabolic and Bariatric Surgery (ASMBS) and the American College of Obstetrics and Gynecologists (ACOG) recommend delaying pregnancy for 12-24 months after bariatric surgery. However, weight loss is known to augment fertility and patients may pursue bariatric surgery for this benefit. Despite studies evaluating maternofetal outcomes after bariatric surgery, long-term weight loss has rarely been evaluated in patients becoming pregnant before the current guideline recommendations. We sought to determine patient adherence to these recommendations and the effect of early postoperative pregnancy (PoP) on long-term weight loss.

**Methods:** A retrospective review of female patients undergoing initial bariatric surgery from 2008-2017 at a military bariatric center was performed. Cohorts were separated by presence and timing of PoP (not pregnant, <12 months, 12-24 months, and >24 months). BMI and percent excess weight lost (%EWL) were collected at 6 months and yearly for 5 years. Patient characteristics and comorbidities were evaluated.

**Results:** Four hundred fifty-one patients were evaluated. Fifteen percent became pregnant (n=67). Thirty-seven percent of PoP occurred within 12 months; 35% occurred at 12-24 months; 27% occurred after 24 months. PoP did not negate weight loss, as all patients achieved similar %EWL. No difference in %EWL was seen between pregnant and non-pregnant patients when followed for 5 years (p=0.29).

**Conclusions:** Current guidelines recommend delaying pregnancy for at least 12 months after bariatric surgery. Many patients may not adhere to these guidelines. However, postoperative pregnancy before 12 months does not affect initial or overall weight loss.

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**MORE THAN 5 YEARS EFFECTS OF ROUX-EN-Y GASTRIC BYPASS VERSUS SLEEVE GASTRECTOMY ON CHINESE T2DM PATIENTS WITH BMI < 35**

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**Background:** There were rare data about long term results for comparison of Roux-en-Y gastric bypass (RYGB) versus sleeve gastrectomy (SG) in Chinese lower BMI diabetic patients. Objectives: To investigate long term (more than 5 years follow up) results compared RYGB to SG in Chinese diabetic patients with BMI 27.5-35 kg/m².

**Methods:** Retrospectively analysed the patients underwent bariatric surgery from 2009 to 2014. All the patients met the criteria of BMI 27.5-35 kg/m², aged 16-65 years, and with type 2 diabetes mellitus. All surgery were performed by one surgical team in two hospitals affiliated to Jinan University, Guangzhou, China.

**Results:** Seventy cases in RYGB group and 29 in SG group were included analysis. Mean follow up time for 6.7 years. All the characteristics at baseline were comparable. From 3 to 8 years follow up, RYGB gained significant excess weight loss percentage than SG(91.2 vs.73.6, 85.4 vs. 50.6, 69.5 vs.43.1, 67.5 vs.42.0, and 70.4 vs.42.7 respectively). From 5 years after surgery, RYGB achieved lower HbA1c and fasting blood glucose (FBG) level than SG (6.35 vs. 6.64, 6.25 vs.7.13, 6.13 vs.7.15, 6.56 vs. 7.20 for HbA1c, and 6.13 vs.6.21 vs.6.9 for HbA1c, and 6.25 vs.7.13 vs.7.22 and 6.58 vs.7.1 for FBG respectively.) At five-year follow up, RYGB gained 48.6% complete and 42.9% partial remission rate, and SG gained 24.1% complete and 31.0% partial remission rate(P<0.01). Both groups achieved similar improvement of hyperlipidemia and hypertension.

**Conclusion** For more than 5 years follow up, RYGB seemed more effective for weight loss and remission of T2DM than Sleeve gastrectomy.

### A296

**THE ASSOCIATION BETWEEN BODY COMPOSITION, 25(OH)D, PTH, SYSTEMIC INFLAMMATION AND BONE MINERAL DENSITY IN CHINESE BARIATRIC SURGERY CANDIDATES**

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**Background:** There are few data on the contribution of body composition and other factors to bone mineral density (BMD) in Chinese obese populations.

**Objectives:** To investigate the association between body composition, 25(OH)D, Parathyroid hormone (PTH), systemic inflammation and bone mineral density in Chinese Bariatric surgery candidates.

**Methods:** 764 patients were studied. Aged 18-68 yrs. BMD and body composition were measured using dual x-ray absorptiometry. 25(OH)D, PTH and c-Reaction Protein (CRP) were measured.

**Results:** BMD at all sites were significantly higher in male than in female (P<0.01). Femoral neck BMD in hypertension group was lower than in non hypertension candidates (P=0.025). Diabetes, smoking, and Helicobacter Pylori infection conditions had no...