MALE BARIATRIC PATIENTS, SIX YEARS LATER: WHERE ARE THEY NOW?
Darren Moore¹; Felicia Jefferson²; 'Touro University Worldwide, COLUMBUS GA; ²Fort Valley State University, Fort Valley GA

Background: Researchers have suggested that while bariatric surgery is the most effective treatment for morbid obesity, patients still experience difficulties maintaining initial weight loss, the further removed they become from their original surgery date. The purpose of this study was to explore men’s experiences six years or more after weight-loss surgery.

Methods: Utilizing qualitative research, the authors conducted a six-year follow-up investigation to a previous study regarding life after bariatric surgery among male patients. In this study, authors completed 13 semi-structured interviews with male bariatric patients and explored their lived experiences as individuals and as partners within couple relationships.

Results: Authors found three emerging themes which included: 1) Weight loss as a struggle; 2) Fading support and feeling alone; and 3) Perceptions of Marriage and Family Therapists.

Conclusions: Authors discuss clinical implications and recommendations for Marriage and Family Therapists and other allied health professionals who may work with males transitioning beyond the initial phase of the weight-loss surgical process to include continued social support and utilizing a relational perspective for male patients.

BENEFITS OF SUTURE REINFORCEMENT IN LAPAROSCOPIC SLEEVE GASTRECTOMY
Burcin Batman¹; Hasan Altun¹; ¹Istinye University Medical School, Istanbul

Background: Obesity is an increasing problem worldwide. Laparoscopic sleeve gastrectomy is gaining popularity. Although it has
unique complications such as leakage, bleeding and stenosis, it is a reliable procedure. A total of 1200 consecutive patients who underwent sleeve gastrectomy and omentopexy between March 2013 and December 2018 were enrolled in this retrospective study. Body mass index, age, sex, and postoperative complications were recorded in all patients. Of 1200 patients, 864 (72%) were female and 336 (28%) were male. The median age was 38 years (13 to 69 years). Preoperative median body mass index was found as 40.87 kg/m² (18 to 88 kg/m²). Operative complications included strictures which occurred in 16 (1.33%) patients, bleeding in 7 (0.58%), staple line leaks in 3 (0.25%), wound infection in one (0.08%), fat necrosis in one (0.08%), splenic arterial injury in one (0.08%) and intraabdominal abscess in one (0.08%) patient. There was no mortality. Sleeve gastrectomy and omentopexy is a safe procedure with low complication rates.

**MOTIVATION FOR BARIATRIC SURGERY AMONG AFRICAN AMERICAN PATIENTS IN AN INTEGRATED HEALTHCARE SYSTEM.**

*Darren Moore*1; Kristina Lewis2; Jason Beckstead1; Ming Ji3; Yun Bai4; David Arterburn5; Bhumi Bhakta6; Deborah Young7; Karen Coleman11; Melissa Cornejo7; Cecelia Crawford8; Adam Drewnowski9; Sameer Murali7; Silvia Paz7; Brianna Taylor11; Tae Yoon7; Deborah Young7; Karen Coleman11;jarash;4Jordan Uni of Science and Technology, Irbid; 2Jordan Uni of Science and Technology, Irbis; 3Jordan Uni of Science and Technology, Irbid; 4University of South Florida, Tampa FL; 5Kaiser Washington Health Research Instit, Tampa FL; 6Kaiser Permanente Seattle Washington, Seattle WA; 7Kaiser Permanente Seattle, Washington, Pasadena CA; 8Kaiser Permanente Southern California, Yorba Linda CA; 9Kaiser Permanente Southern California, Pasadena CA; 10University of Washington, Seattle, WA; 11Kaiser Permanente Southern California, Pasadena CA

**Background:** Very little is known about motivations for bariatric surgery among African American Males [AAM], a group that rarely undergoes this treatment for obesity.

**Methods:** In 2016-17 patients affiliated with a large integrated healthcare system completed several baseline surveys via internet or phone. Surveys included a modified version of the Goals and Relative Weight Questionnaire (GRWQ), which examined 13 motivators/goals for surgery. Patients were instructed to rate each factor, using a Likert scale. We calculated descriptive statistics as well as Chi Square.

**Results:** Survey respondents included 319 males, of which were 135 White Males [WM] (42%), 131 Hispanic Males [HM] (41%), 45 African American Males [AAM] (14%), and 10 “Other” Males [OM] (3%). For AAM, the most important factors that impacted the decision to have surgery included: 1) “Improvement or resolution of health conditions” (97.3%), 2) “To Feel Better about myself” (88.3%), and 3) “Being able to do the things I want to do” (83.7%). When analyzing the data using Chi square: the following items were significant 13i, (to be able to play with children/grandchildren), 13k, (to do the things that the person wants to do), 13L (to feel better about myself), 13m (to improve relationship with partner/spouse), and 13O, (for others (they want to do)),

**Conclusions:** Improvement of health, was the most important factor. Other factors specific to AAM should be considered when coordinating care for this treatment population.

**ALTERATIONS OF URIC ACID FEATURES IN POSTOPERATIVE SHORT-TERM FOLLOWING BARIATRIC SURGERY IN CHINESE PATIENTS WITH OBESITY: A SELF-CONTROLLED OBSERVATIONAL STUDY**

*Yang Liu 1; Mengyi Li 1;* Beijing Friendship Hospital, Beijing; 2Capital Medical University, Beijing

**Background:** Obesity is one of the most common risk factors for gout, while bariatric surgery is associated with a lower gout incidence. But few studies have been fully elucidated bariatric surgery effects on serum uric acid (UA) levels in postoperative short-term.

**Purpose:** To investigate the UA levels within 3-month postoperatively, the differences between normal UA group and hyperuricemia group, alongside determining predictive factors of peak levels of UA following surgery.

**Methods:** 34 patients were recruited in this study. The pre- and postoperative variables were collected at baseline, follow-up. One-way ANOVA and a general linear model with repeated measures were applied to investigate the alterations in major parameters. Independent-samples t-test was performed to evaluate the factors predicting peak levels of UA after surgery.

**Result:** Increased UA levels were detected in all patients following surgery. The peak levels of UA were appeared at one-week follow-up (P<0.05), then declined significantly at one-month, and with no statistical differences at 3-month compared with baseline levels. No significant difference was found regarding the shape of UA curves over follow-up time between normal UA group and hyperuricemia group. It revealed a lower levels of UA, creatinine and LDL-C to be independently association with peak levels of UA at one-week following surgery.

**Conclusions:** Transient elevation of UA levels occurs within 3 months after surgery and decreases to preoperative levels at 3-month. The shape of UA level curve over follow-up was not associated with preoperative variables. UA level monitoring approach is suggested in postoperative short-term following surg

**A DOSE-DEPENDENT EFFECT OF AQUEOUS LEAF EXTRACT OF ANNONA SQUAMOSAL (L.) LEAVES ON BODY WEIGHT GAIN, FOOD INTAKE AND INSULIN SENSITIVITY IN HIGH-FAT DIET-INDUCED OBESITY.**

*Hana Alkhalidy 1; Anas Al-Nabulsi 1; Reham Mhawesh 1; Rawan Aljamal 2; Jordan University of Science and Technology, Irbid; 3Jordan Uni of Science and Technology, Irbis; 4Jordan Uni of Science and Technology, Jarash; 5Jordan Uni of Science and Technology, Irbid

**Background:** Obesity is a risk factor for various conditions and diseases including insulin resistance (IR), and type 2 diabetes.