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Gastric bypass surgery is normally believed to be used for overweight people but a new study has discovered that if a person has type 2 diabetes, regardless of their weight, it is important to use the gastric bypass surgery as one treatment option. This essay will briefly summarize key issues on this topic and whether it does in fact benefit the recipient of surgery to have the surgery or not. Some new terms that are discussed in this article include: bariatric surgery which is a type of surgery that morbidly obese patients have which results in major weight loss to improve their health and body mass index is the measure of a person's weight in relation to their height (multiply a person's weight in pounds and divide that by the person's height in inches to get a bmi - a bmi above 30 is for people who are obese). The New York Presbyterian hospital is the first hospital to test surgery that is designed only for type 2 diabetes. This study is designed to test if diabetes is better handled by surgery as opposed to the other medical treatment options that there are today. This is the first study available to those who are overweight or mildly obese and may open doors to new studies. Under guidelines that currently exist, bariatric surgery is used for the treatment of severe obesity or morbid obesity for people who have a body mass index of 35 or greater. Treatment is now available for patients with a body mass index as low as 26. The body mass index of a healthy person is 19 to 25 while those who are overweight have a body mass index of 26 to 29. Those who are obese have a body mass index that is above 30. Patients with a body mass index below 26 and above 35 are not permitted in the study because the health risks are too dangerous. Previous research has shown that gastric bypass surgery for those people with a body mass index of 35 or greater will benefit from the results to treat their type 2 diabetes. Blood glucose levels are more normalized, medication use is minimized, and the health risks are improved along with an improved chance of survival. Evidence is clear to prove that overweight or mildly obese patients benefit from the results of gastric bypass surgery. Surgery on people with type 2 diabetes that are below a body mass index of 35 is required in order for this study to measure new and important data. Surgery can be effective but it may not be the best option for every diabetic patient. According to Dr Rubino, rigorous, comparative clinical trials, such as this one, are needed in order to understand and treat patients who fit a new category of surgery. There is a new study which enrolls 50 patients with type 2 diabetes to have gastric bypass surgery or the traditional medical therapy with intensive lifestyle changes. Diet and exercise training will be given to both case groups. Both case groups are expected to benefit because intensive therapeutic treatment is provided to all recipients. The most up to date medication and diet and exercise routines will be incorporated in both scenarios. Surgery is free of charge after the study is complete. Dr Rubino wants to also create a better indicator than body mass index to identify who benefits the most from this type of surgery. The body mass index is practical however it does not define how severe the diabetes is or who would benefit the most from a surgery. Even insurers can benefit from getting a better formula to help determine who gets this type of surgery. Dr Rubino mentions that surgery is not always critical in determining whether people are better from the diabetes illustrating that weight loss is not the only treatment plan for diabetes. This current study would like to shed more light on the results from gastric bypass surgery on diabetes. This study uses gut hormone responses to meal stimulation when a person is treated through surgery and through conventional mechanisms. Understanding the functions of gastric bypass surgery may also help us determine how diabetes works. This in turn creates better medication and less invasive surgical procedures. A study like this one opens the doors for more studies and international studies so that more improvements in the surgical procedures and outcomes can result. Life expectancy can be properly measured and cardiovascular risk can also be determined. The number of people with type 2 diabetes is increasing dramatically so surgery improvements need to be made. Currently 285 million people in the world have diabetes. By 2030, it is expected that 438 million will have it. Diabetes is one of the greatest health risks in the 21st century. Type 2 diabetes is caused by inadequate insulin production and is associated with metabolic dysfunctions involving lipid metabolism and blood pressure regulation. In conclusion, I must mention that this study brings about many new unheard of research that is useful for many people, the above mentioned material describes what the article is about. Three things that are important to this article: is that there needs to be better indications to determine who can benefit from the surgery; that body mass index is the current indicator and surgery can benefit even those who are not obese; and that new research is going to be developed to enhance the treatment of type 2 diabetes. There is a bias of the fact that gastric bypass is the only mentioned treatments. No other treatment method and results are included, only a mention of the fact that other treatments may be better. The faulty reasoning is that they left out the scientific evidence that justifies these results. The article is good, however it is too brief and does not cover all aspects. It is revealed that body mass index can be lower now in terms of a patient being eligible to have surgery. It is recommended that treatment is not for those with a body mass index less than 26 and higher than 35 because these people are at a greater risk when having such a surgery. This study is just one new way doctors are making medical breakthroughs. My overall impression of the article is that it is interesting and creates ideas for future breakthroughs for overweight people with type 2 diabetes. Bibliography undefined. (2011). Clinical Trial will Test Whether Surgery is the Best Option for Type 2 Diabetes, even for Patients who aren't Obese Study Compares Gastric Bypass to Conventional Medical Treatments. Academic One File (Gale).