National Assembly for Wales Health and Social Care Committee

Inquiry into the availability of bariatric service

Evidence from the Royal College of Anaesthetists (RCoA) Advisory Board in Wales – ABS 04



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RESPONSE TO THE NATIONAL ASSEMBLY OF WALES` HEALTH & SOCIAL CARE COMMITTEE INTO AVALABILITY OF BARIATRIC SERVICES.

- The Royal College of Anaesthetists(RCoA) Advisory Board in Wales welcomes the opportunity to comment on this consultation.
- Advice has been sought widely from across the anaesthetists in Wales and our comments relate primarily to aspects of bariatric surgery and perioperative care (including critical care) in the obese patient and these patients undergoing other forms of surgery. The nature of our work is such that we are less involved in those aspects of care relating to primary care although it is well recognised by anaesthetists that weight loss prior to surgery is often beneficial and can reduce complication rates of surgery and anaesthesia. Obese patients may be referred for weight loss advice / management prior to elective surgery.
- We share the views expressed in the detailed joint response from the Royal College of Surgeons Professional Affairs Board in Wales and British Obesity & Metabolic Surgery Society.
- It is estimated that there are approximately 180,000 people in Wales (~6% of population) with a BMI of greater than 35. There also appears to be an increasing trend in obesity numbers.
- There is good evidence bariatric surgery makes economic sense as well as often being the most clinically effective treatment for the morbidly obese patient .
- Obesity has a major impact on many areas of health and complicates most areas of anaesthesia. While a number of obese patients undergo bariatric surgery far more obese patients undergo surgery for almost every other type of elective and emergency procedure. The obesity places a significant additional demand on services including critical care units where post operative admission is largely due to issues relating to obesity. Many common and routine interventions become increasingly more difficult in the obese and may be more time consuming and have

higher rates of complications, and therefore be more costly. In addition these anaesthetic interventions and procedures may require additional specialist equipment and more senior clinician input in these patients.

- As the only centre undertaking bariatric surgery in Wales is located in Swansea most anaesthetists in Wales are not involved in the provision of such surgery but do anaesthetise obese and morbidly obese patients on a daily basis.
- There is no NHS bariatric surgery unit in North Wales with patients having to travel to England to receive this service.
- The number of bariatric surgery cases being performed currently in Wales appears low given the prevalence of the problem. The use of DUBASCO scoring systems does however ensure the patients most likely to benefit are referred, but does not ensure all patients who may benefit are considered for surgery. The scoring systems may actually mean that patients who fall just short of "qualifying" actually have a perverse incentive to gain weight to "make the grade".
- The Welsh Government All Wales Obesity pathway outlines many of the elements of a comprehensive obesity prevention and treatment programme but does not appear to be fully implemented across Wales at present.
- Like many in Wales, we are concerned with the increasing obesity rates in children given the additional burden this is likely to place on anaesthetic and critical care resources in the coming years.

Dr Ian Johnson Chair RCOA Advisory Board in Wales / NSAG Anaesthesia January 2014