

Ventilatory anaerobic threshold six months after RYGB

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OBJECTIVES

Obesity is associated with high risk for coronary artery disease, high blood pressure, elevated serum cholesterol level, malignancy and Type 2 diabetes mellitus.

After weight loss, especially after bariatric surgery there is improvement in blood pressure, metabolic parameters and ventilatory anaerobic threshold.

METHODS

Ergospirometry (Shiller CS-200, Bruce protocol) was performed in 50 obese patients before and six months after R en Y gastric bypass. Baseline characteristics were: BMI 43.8kg/m², females n=37, males n=13.

Changes in pulse rate, systolic blood pressure (SBP) in rest and maximal SBP, diastolic blood pressure in rest (DBP) and maximal DBP, ventilatory anaerobic threshold (VAT/VO₂) and peak in oxygen consumption (VO₂) were analyzed.

Baseline VO₂ less than 14ml/kg/min was exclusion criteria for bariatric surgery

BP and pulse rate before and 6 months after RYGB

Graphs and tables

Parameter	Before	After	p
P in rest /min	98,7 12,2	88,01 13,46	<0,0001
Max P /min	179 8	160 17	NS
SBP in rest (mmHg)	135 14	131 13	0,017
Max SBP (mmHg)	181 26	162 22	<0,0001
DBP in rest (mmHg)	85 8	80 9	<0,0001
Max DBP (mmHg)	98 12	92 10	0.002

P=pulse rate, SBP= systolic blood pressure, DBP=diastolic blood pressure

RESULTS

Change in pulse rate (98,7±12,2 vs. 88,01±13,46/min;) was significant (p<0,0001).

SBP in rest decreased (135±14 vs. 131±13mmHg) with significance p=0,017. Max SBP decreased with high significance (181±26 vs. 162±22mmHg; p<0,0001). DBP in rest also decreased (85±8 vs. 80±9mmHg; p<0,0001) and max DBP decreased from 98±12 to 92±10mmHg (p=0.002).

There was improvement in VAT/VO₂ (17,8±3,44 vs. 20,86±4,70ml/kg/min; p<0.0001) and in peak of oxygen consumption, VO₂ (20,79±3,63 vs. 4,97±4,37ml/kg/min; p<0,0001).

CONCLUSIONS

Our results suggest that bariatric surgery could improve cardiorespiratory fitness. Ventilatory anaerobic threshold, oxygen consumption, pulse rate, maximal systolic and diastolic blood pressure as well as systolic and diastolic blood pressure in rest were improved six months after RYGB.

References

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