

# TOS 2022 Webinar on Medical Management of the Metabolic-Bariatric Surgery Patient Continuing Medical Education Information for Learners

Credit for this course may not exceed 6.25 credits when both the live and enduring material activity format credits are combined.

### Live Course Accreditation and Credit for Physicians

The Obesity Society is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Obesity Society designates this **live activity** for a maximum of 6.25 *AMA PRA Category 1 Credits*<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ACCME Activity ID 201829492

### **On-Demand Course Accreditation and Credit for Physicians**

The Obesity Society is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Obesity Society designates enduring material for a maximum of 6.25 AMA PRA Category 1 Credits<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ACCME Activity ID 201829497

## **Important Dates for On-Demand Course (Enduring Material)**

Date of Release: February 16, 2022 Date of Termination: February 1, 2025

# **Learning Objectives**

1. Participants will gain an understanding of the best nutritional approaches pre- and post-surgery based on evidence and expert opinion.

2. Participants will understand how metabolic-bariatric surgeries such as Roux-en-Y gastric bypass and sleeve gastrectomy impact glucose absorption and metabolism, including implications for diabetes remission/recurrence and risk for hypoglycemia. Participants will learn approaches to managing hypoglycemia symptoms.

3. Participants will be able to advise patients regarding individual variations in weight loss and obesity-related outcomes following surgery and be able to formulate appropriate treatment plans for poor-responding patients based on evidence and expert opinion.

4. Participants will learn indications, outcomes, and management approaches to metabolic-bariatric procedures in pediatric patients.

# **Commercial Support**

No commercial support was received for this activity.

# **Faculty and Planning Committee Disclosure Information**

The Obesity Society adheres to the ACCME's Standards for Integrity and Independence in Accredited Continuing Education. Any individuals in a position to control the content of a CE activity, including faculty, planners, reviewers or others are required to disclose all relevant financial relationships with ineligible entities<sup>1</sup> (commercial interests). All relevant conflicts of interest have been mitigated prior to the commencement of the activity.

The Obesity Society asks all individuals involved in the development and presentation of Continuing Medical Education (CME) activities to disclose all relevant relationships with ineligible companies. This information is disclosed to CME activity participants. The Obesity Society has procedures to mitigate all conflicts of interest. In addition, faculty members are asked to disclose when any unapproved use of pharmaceuticals or devices is being discussed. TOS requires additional disclosures beyond the ACCME definition of an ineligible company. These include food, weight loss, and

<sup>&</sup>lt;sup>1</sup> An ineligible company as defined by the ACCME is one that is not eligible for ACCME accreditation, in other words those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. Examples of such organizations include: 1) Advertising, marketing, or communication firms whose clients are ineligible companies, 2) Bio-medical startups that have begun a governmental regulatory approval process, 3) Compounding pharmacies that manufacture proprietary compound, 4) Device manufacturers or distributors, 5) Diagnostic labs that sell proprietary products, 6) Growers, distributors, manufacturers or sellers of medical foods and dietary supplements, 7) Manufacturers of health-related wearable products, 8) Pharmaceutical companies or distributors, 9) Pharmacy benefit managers, 10) Reagent manufacturers or sellers. Reference: <a href="https://accme.org/faq/what-accmes-definition-ineligible-company">https://accme.org/faq/what-accmes-definition-ineligible-company</a>

supplement industry disclosures. In the list below, the nature of the relationship and company are followed by the industry of that company.

#### **Chairs:**

At TOS activities, course/session chairs are responsible for timekeeping, introductions, housekeeping announcements, and presenting audience questions to speakers. TOS has determined that chairs do not have the ability to influence content. Accordingly, TOS does not collect, mitigate, or disclose relevant financial relationships of chairs (unless they have a dual role as a planner or speaker). In the case of this webinar, the chairs were also the planners, so disclosures have been included in this document.

#### Panelists:

Panelists are speakers who speak without presenting slides in a portion of a session or course. As speakers, they are required to disclose, and their relevant financial relationships are listed below. All speakers - with or without relevant financial relationships, with or without slides - are advised, and subsequently attest that "The content and/or presentation of the information with which I am involved will promote quality or improvements in health care and will not promote a specific proprietary business interest or a commercial interest (including ACCME-defined ineligible companies). Content for this activity, including any presentation of therapeutic options, will be balanced, evidence-based and commercially unbiased."

#### **Speaker Disclosures:**

| Camila Dara MD          | No volument financial volutionaliza   |
|-------------------------|---|
| Camilo Boza, MD         | No relevant financial relationships   |
| Ricardo Cohen, MD       | Advisory Board relationship with Baritek (Medical Device) and Keyron (Medical Device).  |
|                         | Consulting Fee relationship with Abbot (Pharmaceuticals), NovoNordisk                   |
|                         | (Pharmaceuticals), and GI Dynamics (Medical Device).                                    |
|                         | Speakers Bureau relationship with Johnson & Johnson Brasil (Medical Device), Medtronic  |
|                         | (Medical Device), and Janssen (Pharmaceuticals).  |
| Farah A. Husain, MD,    | Consulting Fee relationship with Medtronic (Medical Device), Gore (Medical Device), and |
| FACS, FASMBS            | Intuitive (Medical Device).   |
| Lee M. Kaplan, MD, PhD, | Consulting Fee relationship with Amgen (Pharmaceuticals), Eli Lilly & Co.               |
| FTOS                    | (Pharmaceuticals), Gelesis (Medical Device), Gilead (Pharmaceuticals), Novo Nordisk     |
|                         | (Pharmaceuticals), Pfizer (Pharmaceuticals), and Xeno Biosciences (Biomedical).         |
| Judith Korner, MD, PhD  | Corporate Advisory Board relationship with GI Dynamics (Medical Device), Found          |
|                         | (Weight Management), and Gila Therapeutics (Weight Management Telemedicine - this       |
|                         | is a TOS conflict, not an ACCME conflict).  |
|                         | Stock Options relationship with Found (Weight Management Telemedicine - this is a TOS   |
|                         | conflict, not an ACCME conflict) and Digma Medical (Medical Device).                    |
| Torsten Olbers, MD      | Advisory Board/Education relationship with Johnson & Johnson/Ethicon EndoSurgery        |
|                         | (Medical Device) and NovoNordisk (Pharmaceuticals).                                     |
| Philip R. Schauer, MD   | Consulting Fees relationship with BD Surgical/Becton, Dickinson and Company (Medical    |
| -                       | Device); GI Dynamics (Medical Device); Keyron (Medical Device); Medtronic/Covidien      |
|                         | (Medical Device); Persona Nutrition/Vitaminpacks, Inc a Subsidiary of Nestle (Medical   |
|                         | Supplements); and WL Gore and Associates, Inc. (Medical Device).                        |
|                         | Honoraria relationship with Ethicon a Subsidiary of Johnson & Johnson (Medical Device). |
|                         | Research grant support NCT02969187 relationship with Pacira Biosciences                 |
|                         | (Pharmaceuticals).  |
|                         |   |

#### **Planner Disclosures:**

| Jonathan Q. Purnell, MD, | Consulting Fee relationship with Novo Nordisk (Pharmaceuticals)                   |
|--------------------------|---|
| FTOS                     |   |
| Carel W. Le Roux, MD,    | Consulting Fee relationship with NovoNordisk (Pharmaceuticals), Johnson & Johnson |
| PhD                      | (Medical Device), GI Dynamics (Medical Device), and Boehringer Ingelheim          |
|                          | (Pharmaceuticals).  |
|                          | Corporate Advisory Board relationship with Keyron (Medical Device) and Herbalife  |
|                          | (Medical Food).   |

**Reviewer Disclosures:** No members of the TOS CME Oversight Committee, charged with the resolution of all relevant conflicts of interest, had any relevant financial relationships while serving on the committee.

### **Bibliography**

- Mechanick JI, Apovian C, Brethauer S, Timothy Garvey W, Joffe AM, Kim J, Kushner RF, Lindquist R, Pessah-Pollack R, Seger J, Urman RD, Adams S, Cleek JB, Correa R, Figaro MK, Flanders K, Grams J, Hurley DL, Kothari S, Seger MV, Still CD. Clinical Practice Guidelines for the Perioperative Nutrition, Metabolic, and Nonsurgical Support of Patients Undergoing Bariatric Procedures - 2019 Update: Cosponsored by American Association of Clinical Endocrinologists/American College of Endocrinology, The Obesity Society, American Society for Metabolic and Bariatric Surgery, Obesity Medicine Association, and American Society of Anesthesiologists. Obesity (Silver Spring). 2020;28(4):01-058.
- Kim TY, Kim S, Schafer AL. Medical Management of the Postoperative Bariatric Surgery Patient. In: Feingold KR, Anawalt B, Boyce A, Chrousos G, Dungan K, Grossman A, Hershman JM, Kaltsas G, Koch C, Kopp P, Korbonits M, McLachlan R, Morley JE, New M, Perreault L, Purnell J, Rebar R, Singer F, Trence DL, Vinik A, Wilson DP, eds. Endotext. South Dartmouth (MA). 2018.
- 3. Rubino F, Nathan DM, Eckel RH, Schauer PR, Alberti KG, Zimmet PZ, Del Prato S, Ji L, Sadikot SM, Herman WH, Amiel SA, Kaplan LM, Taroncher-Oldenburg G, Cummings DE, Delegates of the 2nd Diabetes Surgery S. Metabolic Surgery in the Treatment Algorithm for Type 2 Diabetes: A Joint Statement by International Diabetes Organizations. Diabetes Care. 2016;39(6):861-877.
- 4. Salehi M, Vella A, McLaughlin T, Patti ME. Hypoglycemia After Gastric Bypass Surgery: Current Concepts and Controversies. J Clin Endocrinol Metab. 2018;103(8):2815-2826.
- Inge TH, Courcoulas AP, Jenkins TM, Michalsky MP, Brandt ML, Xanthakos SA, Dixon JB, Harmon CM, Chen MK, Xie C, Evans ME, Helmrath MA, Teen LC. Five-Year Outcomes of Gastric Bypass in Adolescents as Compared with Adults. N Engl J Med. 2019;380(22):2136-2145.
- 6. Courcoulas AP, King WC, Belle SH, Berk P, Flum DR, Garcia L, Gourash W, Horlick M, Mitchell JE, Pomp A, Pories WJ, Purnell JQ, Singh A, Spaniolas K, Thirlby R, Wolfe BM, Yanovski SZ. Seven-Year Weight Trajectories and Health Outcomes in the Longitudinal Assessment of Bariatric Surgery (LABS) Study. JAMA surgery. 2018;153(5):427-434.

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