



Do the Current American Society for Metabolic and Bariatric Surgery Best Practice Guidelines Sufficiently Account for Suicide Risk Factors in Adolescents Undergoing Bariatric Surgery?

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ABSTRACT:

Obesity has gained national and international attention due to its effect on the physical and psychosocial health of individuals affected. Information from the Centers for Disease Control and Prevention in the U.S. indicate that approximately 1 in 5 American adolescents have obesity (Hales, Carroll, Fryar, and Ogden, 2017). Similarly, several Canadian national health surveys suggest that approximately 1 in 7 Canadian youth have obesity (Rao, Kropac, Do, Roberts, & Jayaraman, 2016). Bariatric surgery has proven to be the most effective intervention option currently available for weight loss in adolescents with severe obesity (Daniels and Kelly, 2014; De Zwaan and Müller, 2014; Nobili et al., 2015). The American Society for Metabolic and Bariatric Surgery (ASMBS) is the largest national society specializing in metabolic and bariatric surgeries within the United States (Pratt et al., 2018). This society has created a standard set of cohesive guidelines for bariatric teams working with adolescents, which will guide practice standards for many bariatric teams (Pratt et al., 2018). Notably absent from these guidelines by the ASMBS are comprehensive plans for ensuring the safety of adolescent patients at risk for suicidal behaviours. This presentation offers a critique of these standards regarding the protections they offer to adolescents with obesity who may be at risk of suicidal behaviours before and after bariatric surgery. A review of available literature provides evidence to suggest that additional psychosocial screening recommendations should be outlined within these guidelines to clearly explore depressive symptomology, trauma history, and general history of psychopathology. Longer follow-up protocols for psychosocial screenings are also recommended for bariatric teams to ensure the safety of at-risk adolescent patients post-surgery.