



Systematic Review of Ethnic Differences in Pre-Operative Micronutrient Deficiencies in Bariatric Patients

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Introduction

- Bariatric surgery -> nutritional deficiencies
- B12, folate, iron deficiencies -> anaemia
- Vitamin D deficiency
 - Impair calcium, phosphate and bone metabolism
 - -> decreased bone mineral density
 - -> osteoporosis, osteopenia, increased risk of fracture
- Important to correct deficiencies to prevent worsening deficiency postoperatively

Introduction

- High prevalence of micronutrient deficiencies in bariatric patients pre operatively
- British Obesity and Metabolic Surgery Society
 - Recommend pre op testing of Hb, ferritin, folate, vitamin B12, vitamin D

Introduction

- Ethnic differences in micronutrient deficiency in the general population
- May be a need to risk profile bariatric patients by ethnicity

- To review the literature to determine if, in patients presenting for bariatric surgery, patients of different ethnicities have different micronutrient deficiencies preoperatively

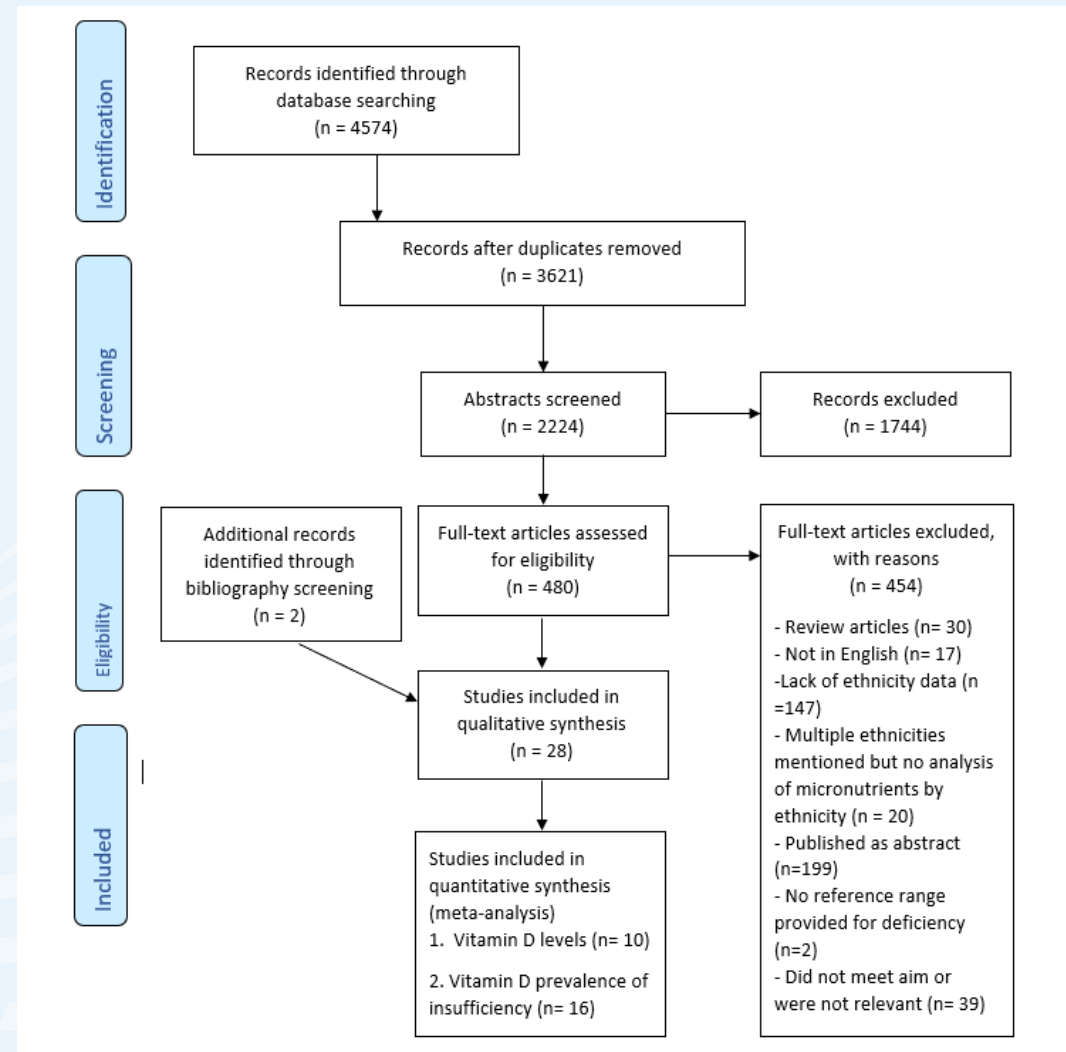
- Systematic review - PRISMA guidelines
- Inclusion criteria
 - Assessment of micronutrient levels or prevalence of deficiency in preoperative bariatric patients
 - Age > 16
 - Ethnicity data
 - Cut offs for definition of deficiency

Methods

- 2 independent reviewers
- Electronic searches
 - Medline, Embase, Cochrane Library, Pubmed
- Search strategy: keywords and MeSH terms
 - “micronutrients”
 - “bariatric surgery”
 - “preoperative”

- Statistical analyses
 - Meta analyses - vitamin D
 - random effects model
- Quality Assessment
 - Newcastle-Ottawa Scale
- Heterogeneity testing
 - I squared statistic

Results – literature search



Results – overview of studies

- 7 articles – multi ethnic population
- 21 articles – single ethnic group
- 9 articles – single micronutrient
- 19 articles – multiple micronutrients
- 14 cross sectional studies, 14 cohort studies, 1 case control

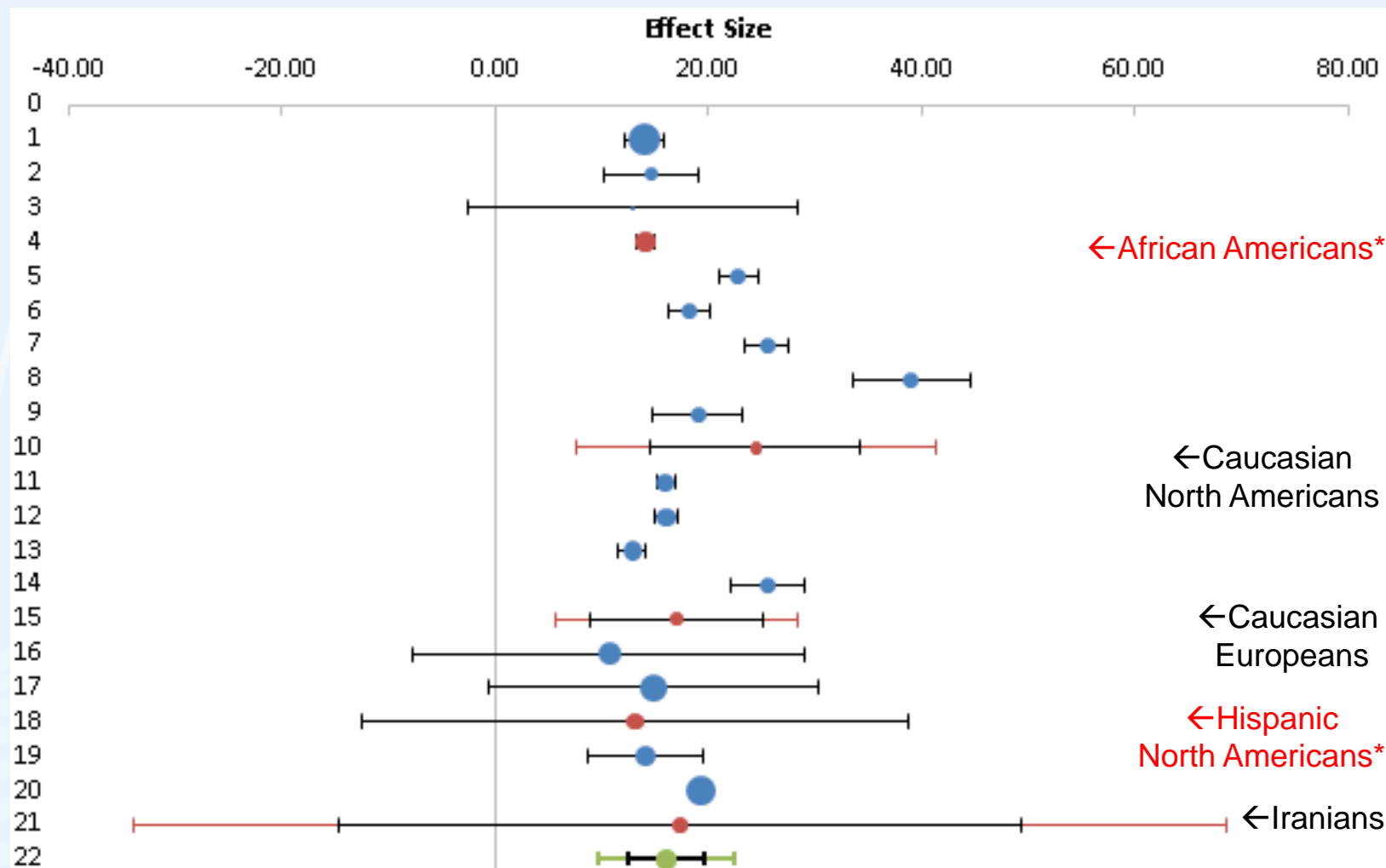
- Ethnicity breakdown

- 3977 Caucasian Europeans (**12 studies**)
- 2224 Iranians (3 studies)
- 1522 North American Caucasians (**7 studies**)
- 664 Chinese from China (3 studies)
- 282 Chinese from Singapore (2 studies)
- 252 South American Caucasians (1 study)
- 37 South American Non Caucasians (1 study)
- 202 Malays from Singapore (2 studies)
- 187 African Americans (4 studies)
- 168 Indians from Singapore (2 studies)
- 103 Chilean South Americans (1 study)
- 19 North American Hispanics (3 studies)
- 2 North American Asians (1 study)
- 1 Native American (1 study)

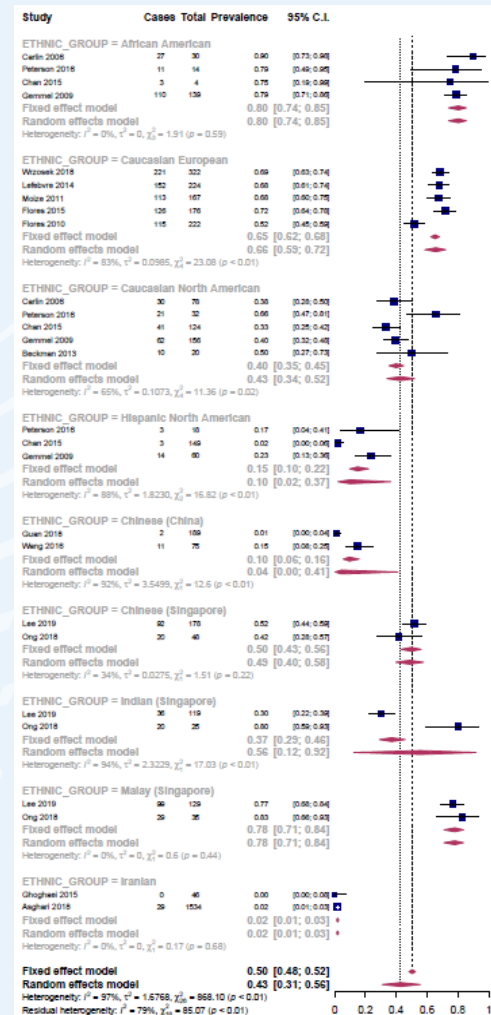
Meta-analysis of mean levels of vitamin D (ng/mL) across ethnic groups

Study name / Subgroup name	Mean	95% Confidence Interval		Weight	Q	pQ	I ²	T ²	T	PI LL	PI UL
1. Carlin 2006 [20]	14.000	12.139	15.861	0.815							
2. Peterson 2016 [21]	14.600	10.106	19.094	0.156							
3. Chan 2015 [22]	12.900	-2.535	28.335	0.029							
4. African American	14.062	13.164	14.960	0.343	0.129	0.938	0.000	0.000	0.000	13.164	14.960
5. Carlin 2006 [20]	22.800	20.988	24.612	0.214							
6. Peterson 2016 [21]	18.200	16.181	20.219	0.213							
7. Chan 2015 [22]	25.500	23.461	27.539	0.212							
8. Grethen 2011 [31]	39.000	33.488	44.512	0.169							
9. Beckman 2013 [32]	19.000	14.814	23.186	0.190							
10. Caucasian North American	24.415	14.532	34.298	0.112	66.779	0.000	0.940	24.354	4.935	7.521	41.309
11. Wrzosek 2018 [23]	16.000	15.174	16.826	0.273							
12. Flores 2015 study 1 [28]	16.030	15.023	17.037	0.270							
13. Flores 2015 study 2 [28]	12.820	11.595	14.045	0.265							
14. Guglielmi 2018 [46]	25.600	22.126	29.074	0.192							
15. Caucasian European	17.012	8.921	25.104	0.168	56.187	0.000	0.947	6.477	2.545	5.564	28.461
16. Peterson 2016 [21]	10.700	-7.672	29.072	0.413							
17. Chan 2015 [22]	14.800	-0.603	30.203	0.587							
18. Hispanic North American	13.108	-12.541	38.756	0.207	0.541	0.462	0.000	0.000	0.000	-12.541	38.756
19. Ghoghaei 2015 [26]	14.100	8.642	19.558	0.372							
20. Asghari 2018 [27]	19.300	18.653	19.947	0.628							
21. Iranian	17.365	-14.573	49.303	0.170	3.792	0.052	0.736	9.954	3.155	-33.891	68.620
22. Combined effect size	16.083	12.476	19.691		310.44	0.000	0.952	13.602	3.688	9.698	22.469

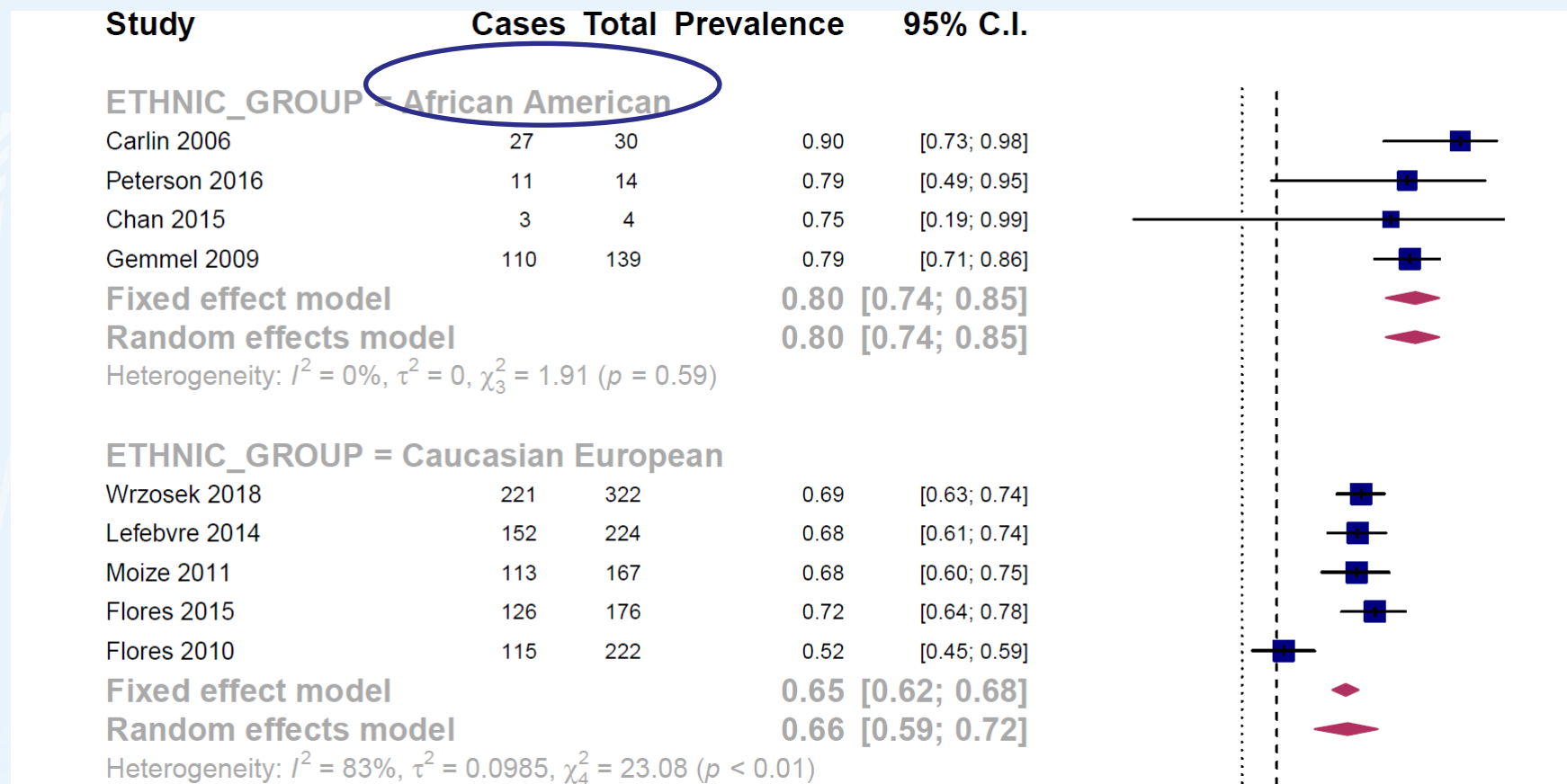
Results – vitamin D mean meta analysis



Vitamin D prevalence of insufficiency meta analysis



Vitamin D prevalence of insufficiency meta analysis



Vitamin D prevalence of insufficiency meta analysis

ETHNIC_GROUP = Malay (Singapore)

Lee 2019	99	129	0.77	[0.68; 0.84]
Ong 2018	29	35	0.83	[0.66; 0.93]

Fixed effect model

0.78 [0.71; 0.84]

Random effects model

0.78 [0.71; 0.84]

Heterogeneity: $I^2 = 0\%$, $\tau^2 = 0$, $\chi^2_1 = 0.6$ ($p = 0.44$)

ETHNIC_GROUP = Iranian

Ghoghaei 2015	0	46	0.00	[0.00; 0.08]
Asghari 2018	29	1534	0.02	[0.01; 0.03]

Fixed effect model

0.02 [0.01; 0.03]

Random effects model

0.02 [0.01; 0.03]

Heterogeneity: $I^2 = 0\%$, $\tau^2 = 0$, $\chi^2_1 = 0.17$ ($p = 0.68$)

Fixed effect model

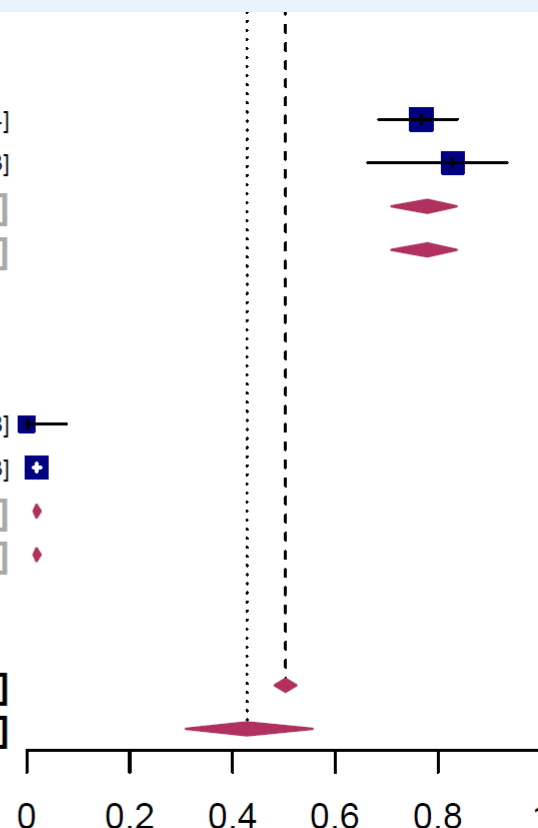
0.50 [0.48; 0.52]

Random effects model

0.43 [0.31; 0.56]

Heterogeneity: $I^2 = 97\%$, $\tau^2 = 1.6768$, $\chi^2_{26} = 868.10$ ($p < 0.01$)

Residual heterogeneity: $I^2 = 79\%$, $\chi^2_{18} = 85.07$ ($p < 0.01$)



Vitamin D prevalence of insufficiency meta analysis

ETHNIC_GROUP = Caucasian North American

Carlin 2006	30	78	0.38	[0.28; 0.50]
Peterson 2016	21	32	0.66	[0.47; 0.81]
Chan 2015	41	124	0.33	[0.25; 0.42]
Gemmel 2009	62	156	0.40	[0.32; 0.48]
Beckman 2013	10	20	0.50	[0.27; 0.73]

Fixed effect model

0.40 [0.35; 0.45]

Random effects model

0.43 [0.34; 0.52]

Heterogeneity: $I^2 = 65\%$, $\tau^2 = 0.1073$, $\chi^2_4 = 11.36$ ($p = 0.02$)

ETHNIC_GROUP = Hispanic North American

Peterson 2016	3	18	0.17	[0.04; 0.41]
Chan 2015	3	149	0.02	[0.00; 0.06]
Gemmel 2009	14	60	0.23	[0.13; 0.36]

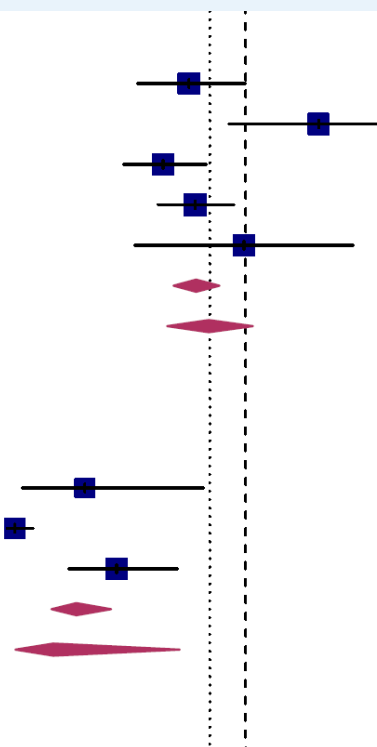
Fixed effect model

0.15 [0.10; 0.22]

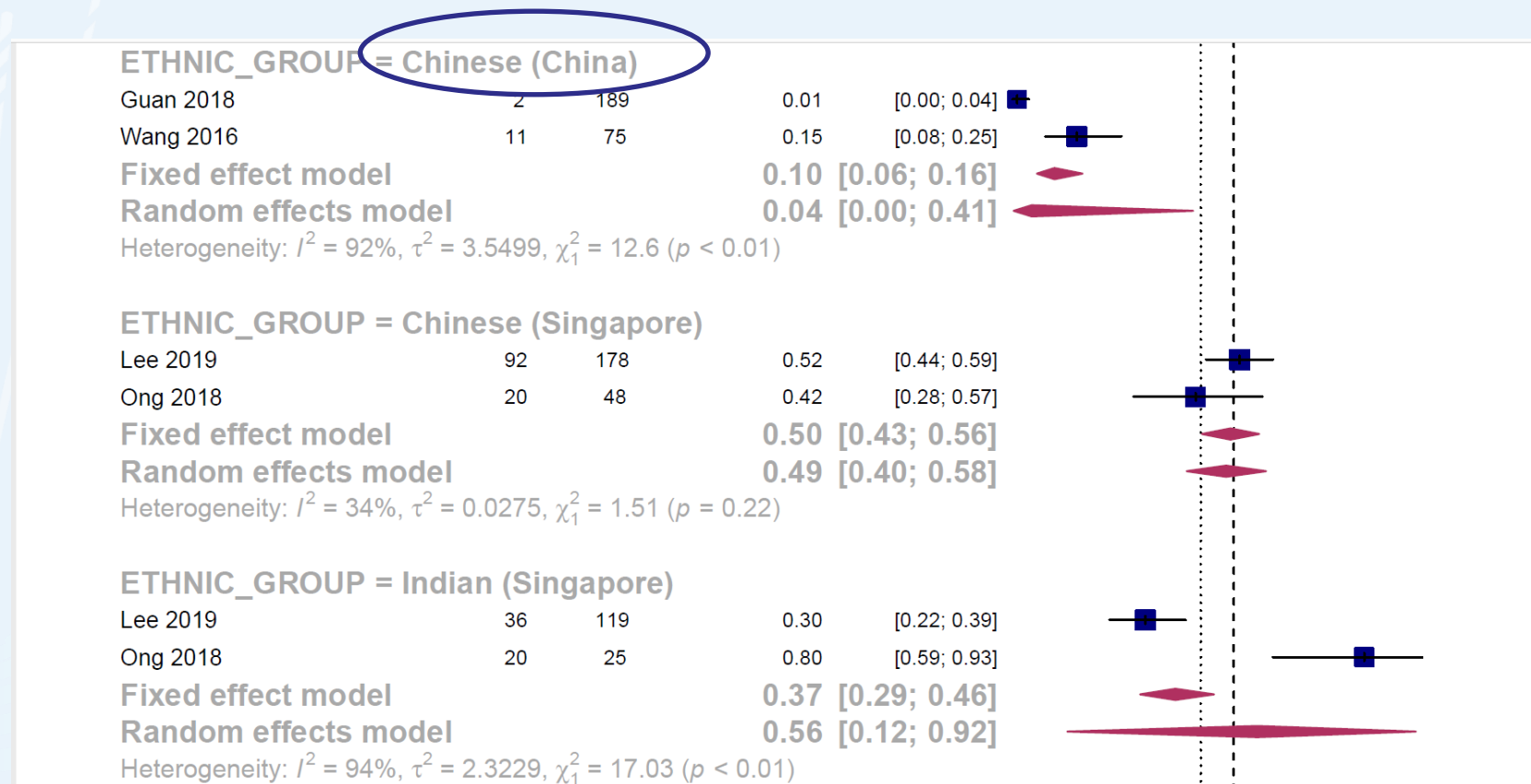
Random effects model

0.10 [0.02; 0.37]

Heterogeneity: $I^2 = 88\%$, $\tau^2 = 1.8230$, $\chi^2_2 = 16.82$ ($p < 0.01$)



Vitamin D prevalence of insufficiency meta analysis



Other micronutrients

- Small number of studies
- Differences in cut offs used to define deficiency

Discussion – limitations

- Poor quality studies
- Heterogeneity of studies
- Factors impacting vitamin D
 - Latitude, temporal zones, skin colour, seasonal variation, sun exposure, supplementation

Discussion - implications

- Highest prevalence of vitamin D deficiency in African Americans
- Consider empiric treatment
 - Cost of testing
- High index of suspicion for vitamin D deficiency in patients with darker skin

Conclusions

- Vitamin D is the most commonly assessed micronutrient in pre op bariatric patients
- African Americans have a high burden of vitamin D insufficiency
- Most articles studied a Caucasian population
- Need for further assessment in bariatric patients from ethnic minority groups + multi-ethnic populations

Questions

