

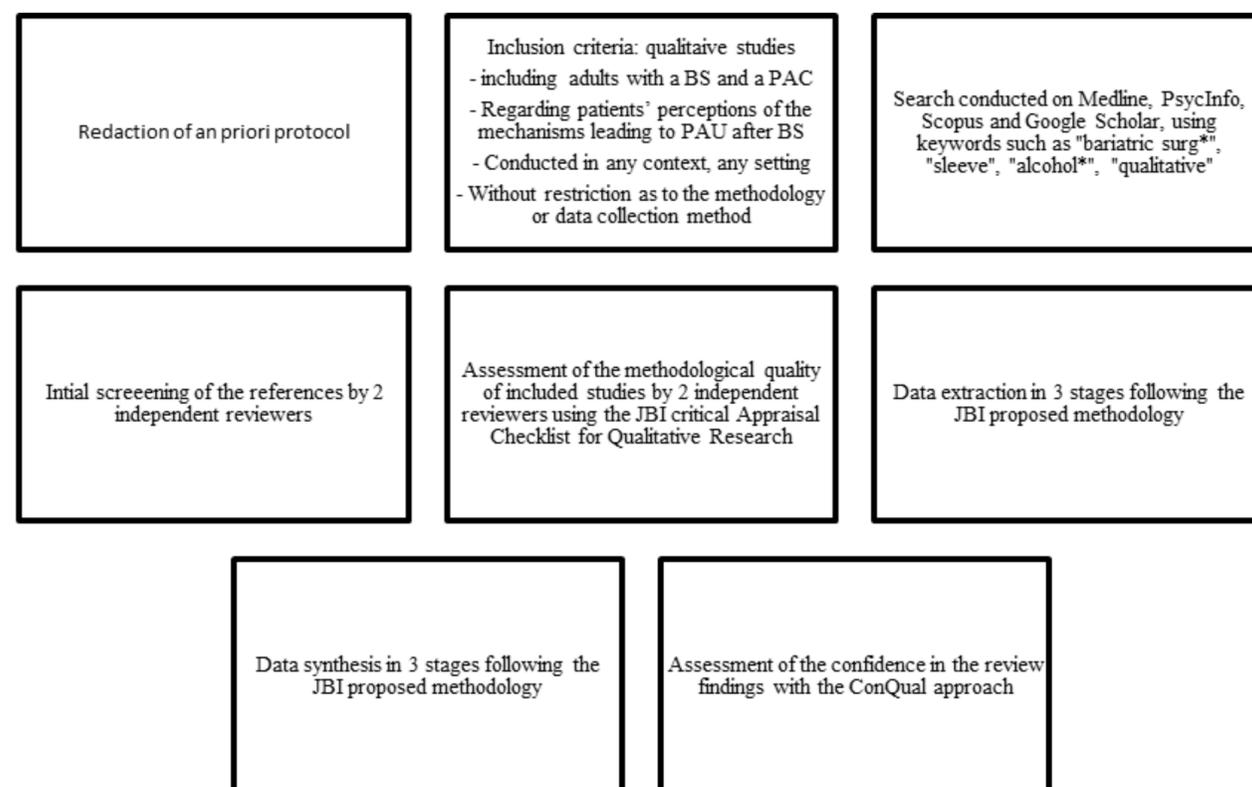
PROBLEMATIC ALCOHOL CONSUMPTION AFTER BARIATRIC SURGERY : WHAT ABOUT QUALITATIVE EVIDENCE ?

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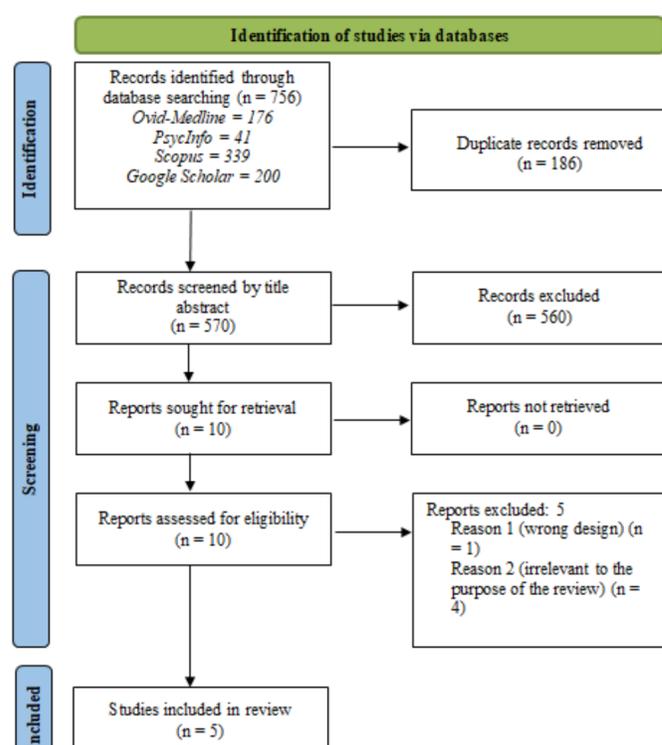
INTRODUCTION

During the last two decades, several studies have shown an increase in regular alcohol consumption and alcohol use disorder (AUD) rates after bariatric surgery (BS). Known risk factors for postoperative AUD are: male gender, younger age, regular alcohol consumption and preoperative AUD, smoking, less social support, ADHD symptoms, and recreational drug use. These are mainly sociodemographic or poorly modifiable factors and they do not inform about the mechanisms leading to AUD after BS. Qualitative research can deepen our knowledge of complex phenomena about which little information exists. Consequently, this review's aim was to synthesize qualitative evidence on bariatric patients' perceptions of the mechanisms leading to problematic alcohol use (PAU) after bariatric surgery.

METHODS



RESULTS



Used methodology : grounded theory, thematic analysis and a two-cycle coding process

8 to 24 participants

Mainly patients who had undergone a RYGB

Methodological quality of the included studies ranged from 4 to 8 out of 10

Extraction of 35 findings

Development of four synthesized results based on 26 unequivocal and 6 equivocal findings

Confidence level for each synthesized finding ranged from moderate to low

SYNTHESIZED RESULT 1: PERSISTENCE OR REAPPEARANCE OF PSYCHOLOGICAL PROBLEMS AFTER BARIATRIC SURGERY

- Antecedents of difficult life events (losses, trauma, etc.) and psychological problems before surgery
- Maintenance of psychological problems after the operation or recurrence after an initial period of improvement

SYNTHESIZED RESULT 2: USING ALCOHOL AS A COPING STRATEGY, SOMETIMES AS A REPLACEMENT FOR FOOD

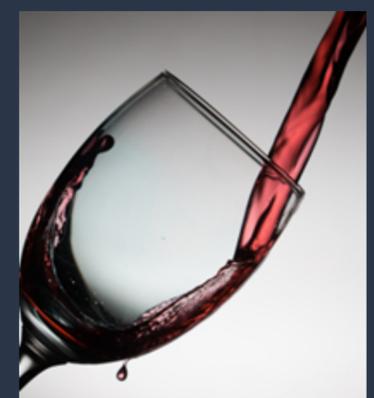
- Alcohol use as a coping strategy
- Replacement of food with alcohol among some, but not all the participants as a strategy to manage unpleasant emotions and situations
- New behavior or already existing problematic behavior before surgery

SYNTHESIZED RESULT 3: CHANGES IN THE PHYSIOLOGICAL RESPONSE TO ALCOHOL

- Perception of an increased sensitivity to alcohol
- Reported by individuals who had undergone a by-pass AND those who had undergone a sleeve

SYNTHESIZED RESULT 4: IMPORTANCE OF INCREASED INFORMATION ABOUT ALCOHOL-RELATED RISKS AND LONG-TERM COUNSELLING

- Perceived lack of information regarding alcohol-related problems before undergoing surgery
- Need for longer-term follow-up postsurgery



REFERENCES

1. Er, E., Durieux, N., Vander Haegen, M., Flahault, C., & Etienne, A. M. (2023). Patients' perceptions of the mechanisms underlying alcohol use problems after bariatric surgery: A qualitative systematic review. *Clinical obesity*, 13(1), e12551. <https://doi.org/10.1111/cob.12551>
2. Ivezaj, V., Benoit, S. C., Davis, J., Engel, S., Lloret-Linares, C., Mitchell, J. E., Pepino, M. Y., Rogers, A. M., Steffen, K., & Sogg, S. (2019). Changes in Alcohol Use after Metabolic and Bariatric Surgery: Predictors and Mechanisms. *Current psychiatry reports*, 21(9), 85. <https://doi.org/10.1007/s11920-019-1070-8>