

ERRATUM

12th European Congress on Obesity Supplement, 29 May–1 June 2003 in Helsinki, Finland

International Journal of Obesity (2004) **28**, 349. doi:10.1038/sj.ijo.0802590

Abstract T1:P1-027 was incorrectly published in *IJO* 2003; **27** (Suppl 1): S49. The correct abstract is reproduced below.

Plasma ghrelin concentrations following bariatric surgery depend on the functional integrity of the fundus

Frühbeck G, Diez-Caballero A, Gil MJ, Montero I, Gómez-Ambrosi J, Salvador J, Cienfuegos JA. Clínica Universitaria de Navarra, University of Navarra, Pamplona, Spain.

Aims: Gastric bypass surgery (BYP) has been shown to markedly suppress circulating ghrelin concentrations. Since bypassing the ghrelin-producing cell population may be relevant to the disruption of fundic-derived signals, the effect of comparable weight loss induced by either BYP, adjustable gastric banding (AGB) or biliopancreatic diversion (BPD) was studied.

Methods: A total of 16 matched obese patients [35.0 ± 2.4 y; 124.8 ± 5.7 kg initial body weight; 47.1 ± 2.2 kg/m²/BMI] in whom weight loss had been achieved by either AGB ($n=7$), BYP ($n=6$) or BPD ($n=3$) were studied.

Results: Comparable weight loss (AGB: 26.1 ± 5.1 kg; BYP: 32.1 ± 5.0 ; BPD: 31.7 ± 6.1 ; $P=0.4520$) and decrease in per cent body fat (AGB: $10.0 \pm 1.5\%$; BYP: 14.2 ± 2.8 ; BPD: 10.3 ± 1.0 ; $P=0.4233$) induced by bariatric surgery exerted significantly different ($P=0.0041$) effects on plasma ghrelin concentrations depending on the surgical procedure applied (AGB: 480 ± 78 pg/ml; BYP: 117 ± 34 ; BPD: 406 ± 86). Without significant differences in body weight loss, BMI and body fat, patients who had undergone the BYP procedure exhibited statistically significant diminished circulating fasting plasma ghrelin concentrations compared to the other two bariatric techniques preserving the fundus ($P=0.0027$ vs AGB and $P=0.02$ vs BPD).

Conclusions: The reduction in circulating ghrelin concentrations in patients undergoing diverse bariatric procedures depends on the degree of dysfunctionality of the fundus.