

A Narrative Review on Bariatric ERAS

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Abstract

Introduction: Bariatric/metabolic surgery (BMS) is the most effective treatment of morbid obesity, while Enhanced Recovery After Surgery (ERAS) after BMS represents a multimodal perioperative protocol designed to achieve early recovery for patients with peculiar characteristics. The aim of the current narrative review is to summarize and discuss the current role, the application, and the future developments of ERAS protocols in the field of BMS.

Methods: A literature search for studies published up to June 30, 2022, with no restrictions on language or publication period, was performed on Medline and Embase, using the keywords “ERAS” OR “enhanced recovery after surgery” AND “bariatric surgery” OR “metabolic surgery”. Postoperative length of hospital stay LOS, overall and major morbidity and mortality, readmission rates, postoperative nausea or vomit PONV, opioids and antiemetics use, hospital costs, ERAS in specific health care settings, barriers to ERAS and further developments were analyzed.

Results/Conclusions: The results were presented with a narrative review, using tabulation to summarize the results of meta-analyses and RCTs: 6 articles reporting guidelines, 5 meta-analyses, 9 randomized controlled trials, and 48 observational studies. ERAS protocols are feasible and safe in the setting of BMS, and associated to reduced LOS, PONV and postoperative pain, reduced opioid and antiemetic use and reduced costs. Postoperative mortality and readmission rates are similar between patients receiving standard care and those with ERAS protocols. Furthermore, increase of ERAS application may be useful in health care systems dealing with epidemic infectious diseases and implemented by technological advancements.

Key words: ERAS, bariatric surgery, metabolic surgery, guidelines, narrative review