



The College of Graduate Studies and the College of Medicine and Health Sciences Cordially Invite
You to a

Master Thesis Defense

Entitled

BARRIERS AND ENABLERS OF WEIGHT LOSS MAINTENANCE AFTER BARIATRIC SURGERY

by

Shukri Farah Mohamed

Faculty Advisor

Prof. Habiba I. Ali, Department of Nutrition and Health

College of Medicine and Health Sciences

Date & Venue

Thursday, 09 November 2023

(6:00 PM-8:00 PM)

F3;134 - Lecture Hall 106

Abstract

Introduction: Weight loss maintenance following bariatric surgery is still a challenging task, with a great probability of failure and weight regain. *Aims:* This qualitative study aimed to use the social-ecological model to better understand barriers and facilitators of weight loss maintenance in adult Emiratis who have undergone bariatric surgery. *Methods:* This qualitative research involved in-depth individual interviews of 35 adults who performed bariatric surgery at Altaie Center in Abu Dhabi, United Arab Emirates between January 2018, and December 2019 (40 % male) with a mean age of 36.3 ± 8.6 years. The only two surgeries included in this study were sleeve gastrectomy (SG) and Roux-en-Y Gastric Bypass (RYGB). The questionnaire included different sections based on the Social Ecological Model (SEM). To assess patient experiences, thematic analysis was used. Qualitative data analysis software, NVIVO 12 was used to facilitate text-based analysis. *Results:* Participants ($n = 35$) were mostly female (60 %), had pre-surgery body mass index (BMI) ($42.8 \pm 4.9 \text{ kg/m}^2$), and had gastric sleeve surgery (65.7%). Five main themes emerged from the analysis: Motivators for bariatric surgery, Challenges after bariatric surgery, Enablers for maintaining weight loss two years after the surgery, Strategies and Suggestions. Participants mentioned that resolving comorbidities, particularly type 2 diabetes, and having low self-esteem encouraged them to get bariatric surgery. Participants experienced nausea/vomiting after overeating, heartburn, time constraints, and social eating problems. Enablers for maintaining weight loss included avoiding sagging skin and avoiding gastrointestinal discomfort. Family members and medical team support encouraged the participants to maintain their weight post-surgery. Participants used injections, pills, and weight loss surgeries to lose weight before deciding on bariatric surgery, but post-surgery some avoided fast foods, and fatty foods and some craved chocolates and fried potato chips more. The majority of participants reported that the food served at workplaces and schools is unhealthy. *Conclusions:* This is the first study to describe the enablers and barriers of weight loss maintenance two years after bariatric surgery among the adult Emirati population. These findings could help improve the long-term success and well-being of individuals who underwent bariatric surgeries. Moreover, the results will contribute to our understanding of the various challenges and enablers of weight loss maintenance following bariatric surgery in societal and cultural contexts.

Keywords: Weight loss maintenance, Bariatric surgery, Social Ecological Model, Enablers, Barriers, Dietary habits, United Arab Emirates.