The Association of Depressive Symptom Patterns Following Metabolic Bariatric Surgery With 5-Year Weight Regain

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While short-term improvements in depressive symptoms are observed following metabolic bariatric surgery (MBS), long-term symptom patterns and their impact on weight regain remain unclear. This study aimed to identify depressive symptom trajectories over five years post-MBS and examine their association with long-term weight regain (i.e., 5-year weight – nadir weight). Participants (n=375; 81% Female; Mage=45.9±11.4; M_{BMI}=48.3±8.0) who underwent primary MBS completed the Beck Depression Inventory-II (BDI-II) and anthropometric assessments presurgery, and 6-, 12-, and 60-months post-surgery. We used standard multiple imputation techniques to account for missing data. Latent Class Growth Analysis identified three distinct BDI-II trajectories: (1) stable low symptoms (BDI_{baseline}=12.5; BDI_{5Y}=11.6), 92% of participants (no depression); (2) initially high symptoms (BDI_{baseline}=29.3) that decreased over time (BDI₅y=14.5), 6% of participants (partial remission); and (3) initially moderate symptoms (BDI_{baseline}=23.7) that increased significantly over time (BDI_{5Y}=41.0), 2.2% of participants (severe worsening). ANCOVA analyses revealed no statistical difference in weight regain between trajectories; however, trajectory 3 was linked to the highest weight regain at 5-years (18.5 vs. 13.2 and 13.3 kg). While most participants experienced low to moderate depressive symptoms, a small subgroup exhibited a severe worsening of symptoms over time, which, in turn, seemed to be associated with greater weight regain five years post-surgery. These results highlight a depressive symptom pattern that may have a substantial impact on long-term weight outcomes and underscore the need for continued psychological monitoring and support beyond the first postoperative year. Further research is needed to clarify the directional relationship between these variables.

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