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Summary

Panel discussion: A 360° multidisciplinary approach to obesity and metabolic health

UEG Week Barcelona 2026 | Presentation

Surgery | Mechanisms & Personalised Medicine | Endoscopy

October 20, 2026

Panel discussion addressed practical management questions for obesity treatment, including the role of nutritional supplementation with GLP-1 agonists and endoscopic/surgical procedures, patient selection between medical and interventional approaches, and strategies to address weight regain in the context of obesity as a chronic disease.

KEY POINTS

- The speakers recommended vitamin and macronutrient supplementation with GLP-1 therapy, noting that patients often reduce food intake significantly, and emphasized including a dietitian or nutritionist in the care team with scheduled follow-up visits from treatment initiation.
- One speaker described ablate-blur-clamp fundus procedures as safe with total body weight loss around 8 to 10 percent when used alone, and stated that when combined with endoscopic sleeve gastroplasty the results approach those of surgery.
- The panel emphasized that obesity is a chronic incurable disease and weight regain occurs after surgery, endoscopy, drugs, or diet if patients are not compliant with long-term lifestyle changes including diet and physical activity.
- Speakers stated that treatment choice should be the patient's decision after being informed of all options, though one noted that patients basically refuse surgery and prefer to stay in their comfort zone.
- One speaker disclosed that in Germany combination therapy with medication plus endoscopy or surgery is not reimbursed by insurance, and another noted that GLP-1 drugs for obesity (not diabetes) are expensive and not reimbursed in many European settings, creating access problems for deprived populations.

– The panel framed obesity as a public health problem requiring social solutions beyond medical interventions, with one speaker stating that education must start in schools and that treating only individual patients cannot solve an epidemic affecting 30 percent of the population in some areas.

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