

# **ARMMS-T2D**

**CLINICAL TRIAL SUMMARY**

**Presenters**

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**Objectives**

To assess the efficacy of bariatric surgery compared to medical/lifestyle management of type 2 diabetes

<https://clinicaltrials.gov/study/NCT02328599>

**TRIAL  
DESIGN**

Randomized, Prospective Cohort Study

**SAMPLE  
SIZE**

228 individuals with type 2 diabetes and obesity

**INCLUSION CRITERIA**

- Age between 20 and 65 years
- BMI over 27 and up to 45 kg/m<sup>2</sup>
- Diagnosed with type 2 diabetes based on ADA criteria (elevated HbA1c, fasting glucose, OGTT, or diabetes medication use)
- Negative pregnancy test before surgery for women who can become pregnant

## METHODOLOGY

- Researchers evaluated 228 adults with type 2 diabetes and obesity from the ARMMS-T2D study, randomly assigned to metabolic bariatric surgery (Roux-en-Y gastric bypass, sleeve gastrectomy, or gastric band; n = 152) or medical/lifestyle intervention (n = 76).
- Health-related quality of life (SF-36: Physical and Mental Component Scores) and health utility (SF-6D) were assessed annually for up to 12 years.

## RESULTS

At baseline, participants had a mean age of  $49.2 \pm 8.0$  years; 68.4% were female, with a BMI of  $36.3 \pm 3.4$  kg/m<sup>2</sup> and HbA1c of  $8.7 \pm 1.6\%$ .

Over 12 years, physical health (PCS) improved significantly more in the metabolic bariatric surgery (MBS) group than in the medical/lifestyle intervention (MLI) group ( $+2.37 \pm 0.53$  vs.  $-0.95 \pm 0.73$ ; difference  $3.32 \pm 0.85$ ;  $P < 0.001$ ).

MBS led to greater gains in general health ( $P < 0.001$ ), physical functioning ( $P = 0.001$ ), and vitality ( $P = 0.003$ ). BMI reduction was more substantial in the MBS group ( $P < 0.001$ ) and was moderately associated with PCS improvement ( $r = -0.43$ ;  $P < 0.001$ ), while changes in HbA1c showed no such association.

Mental health scores (MCS) changed minimally and were similar between groups ( $-0.21 \pm 0.61$  vs.  $-0.89 \pm 0.84$ ; difference  $0.68 \pm 0.97$ ;  $P = 0.48$ ). Health utility (HU) also improved more in the MBS group ( $+0.02 \pm 0.01$  vs.  $-0.01 \pm 0.01$ ; difference  $0.03 \pm 0.01$ ;  $P = 0.003$ ).

## CONCLUSION

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Metabolic surgery leads to long-term weight loss and greater improvements in physical health, general well-being, physical functioning, vitality, and health utility compared to medical therapy in people with type 2 diabetes and obesity, lasting up to 12 years post-intervention.

Simonson DC, Gourash WF, Arterburn DE, et al, Courcoulas AP, Vernon AH, Jakicic JM, Kirschling S, Aminian A, Schauer PR, Kirwan JP. Health-Related Quality of Life and Health Utility After Metabolic/Bariatric Surgery Versus Medical/Lifestyle Intervention in Individuals With Type 2 Diabetes and Obesity: The ARMMS-T2D Study. *Diabetes Care*. 2025 Apr 1;48(4):537-545. doi: 10.2337/dc24-2046. PMID: 39903478; PMCID: PMC11932816.