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## S.1 Pre-BMI

### 1.1 Meta-analysis summary

Meta-analysis summary  
Random-effects model  
Method: DerSimonian-Laird

Number of studies = 9

Heterogeneity:

tau2 = 9.7052

I2 (%) = 95.55

H2 = 22.48

Study	Mean Diff.	[95% Conf. Interval]		% Weight
Torres et al	3.800	2.249	5.351	11.71
Cottam et al	1.300	0.022	2.578	11.94
Sessa et al	6.500	0.790	12.210	6.65
Arrue del cid et al	1.210	-0.583	3.003	11.47
Enochs et al	1.200	-0.311	2.711	11.74
Surve et al	-0.300	-3.246	2.646	10.11
Verhoef et al	6.800	6.103	7.497	12.30
Clapp et al	0.000	-1.345	1.345	11.88
Hage et al	0.800	-0.082	1.682	12.21
theta	2.216	0.060	4.371	

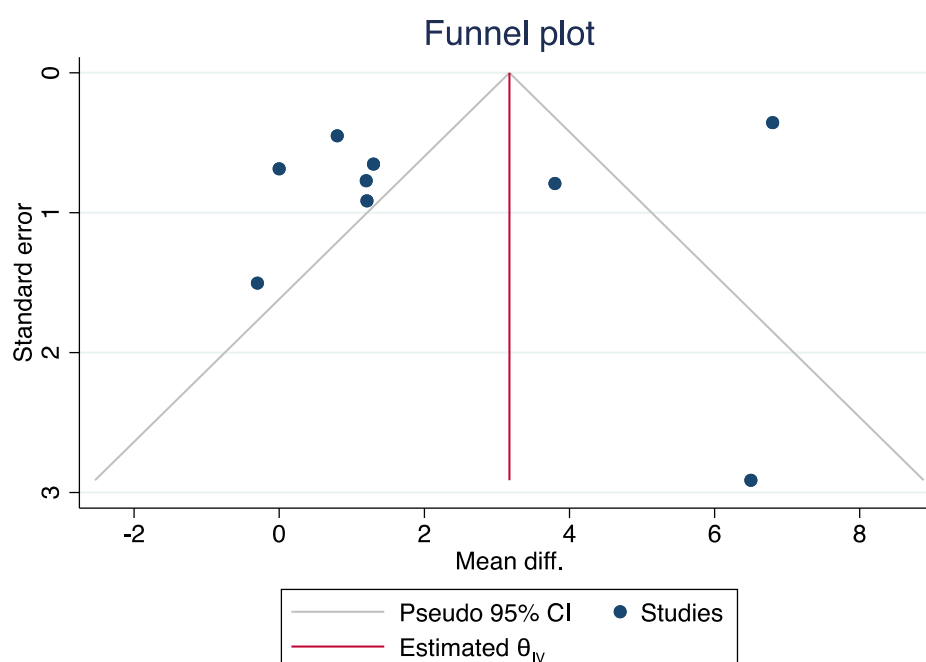
Test of theta = 0: z = 2.01

Prob > |z| = 0.0439

Test of homogeneity: Q = chi2(8) = 179.81

Prob > Q = 0.0000

### 1.2 Funnel plot and Egger's test showing publication bias; Mean difference pre-BMI (kg/m<sup>2</sup>) (X-axis) with it is standard error (Y-axis)



Egger's test for small-study effects:  
 Regress standard normal deviate of intervention  
 effect estimate against its standard error

Number of studies = 9

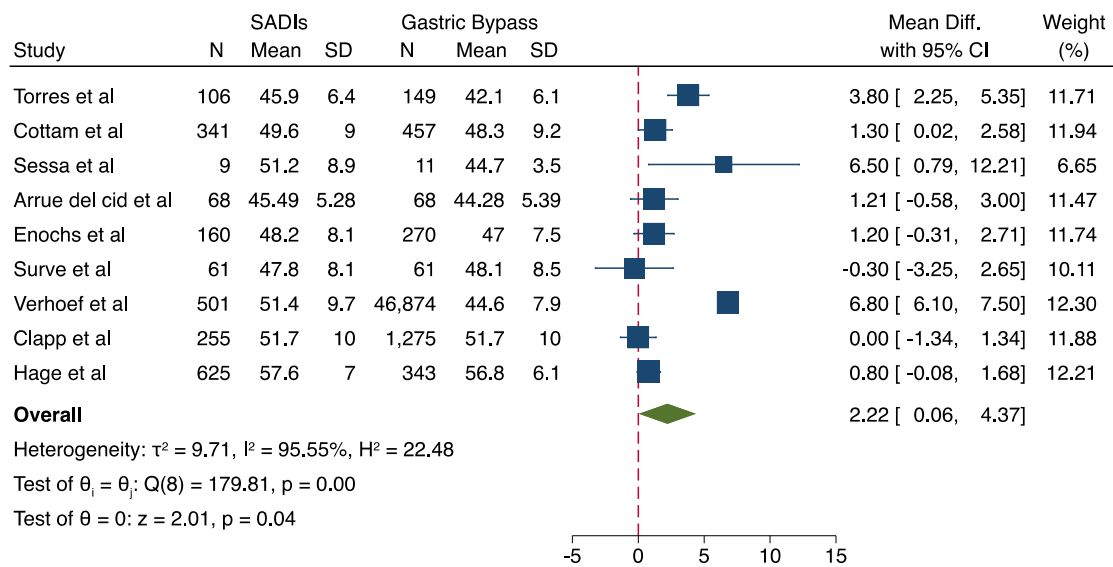
Root MSE = 4.383

Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	3.980251	2.345274	1.70	0.133	-1.565442	9.525944
bias	-2.181482	3.500971	-0.62	0.553	-10.45996	6.097

Test of H0: no small-study effects

P = 0.553

### 1.3 Forest plot showing results of pre-BMI (kg/m<sup>2</sup>) mean difference metanalysis



Random-effects DerSimonian-Laird model

## S.2 Post-BMI

### 2.1 Meta-analysis summary

Studies included: 5

Participants included: Unknown

Meta-analysis pooling of aggregate data  
using the random-effects inverse-variance model  
with DerSimonian-Laird estimate of  $\tau^2$

name	Effect	[95% Conf. Interval]		% Weight
Hage et al	-7.500	-8.588	-6.412	20.34
Surve et al	-5.000	-6.775	-3.225	18.86
Enochs et al	-2.400	-3.427	-1.373	20.45
Cottam et al	-2.300	-3.410	-1.190	20.30
Torres et al	-1.800	-3.044	-0.556	20.05
Overall, DL	-3.787	-6.039	-1.535	100.00

Test of overall effect = 0:  $z = -3.296$   $p = 0.001$

Heterogeneity measures, calculated from the data  
with Conf. Intervals based on Gamma (random-effects) distribution for Q

Measure	Value	df	p-value
Cochran's Q	70.17	4	0.000
	-[95% Conf. Interval]-		
H	4.188	1.368	7.094
I <sup>2</sup> (%)	94.3%	46.6%	98.0%

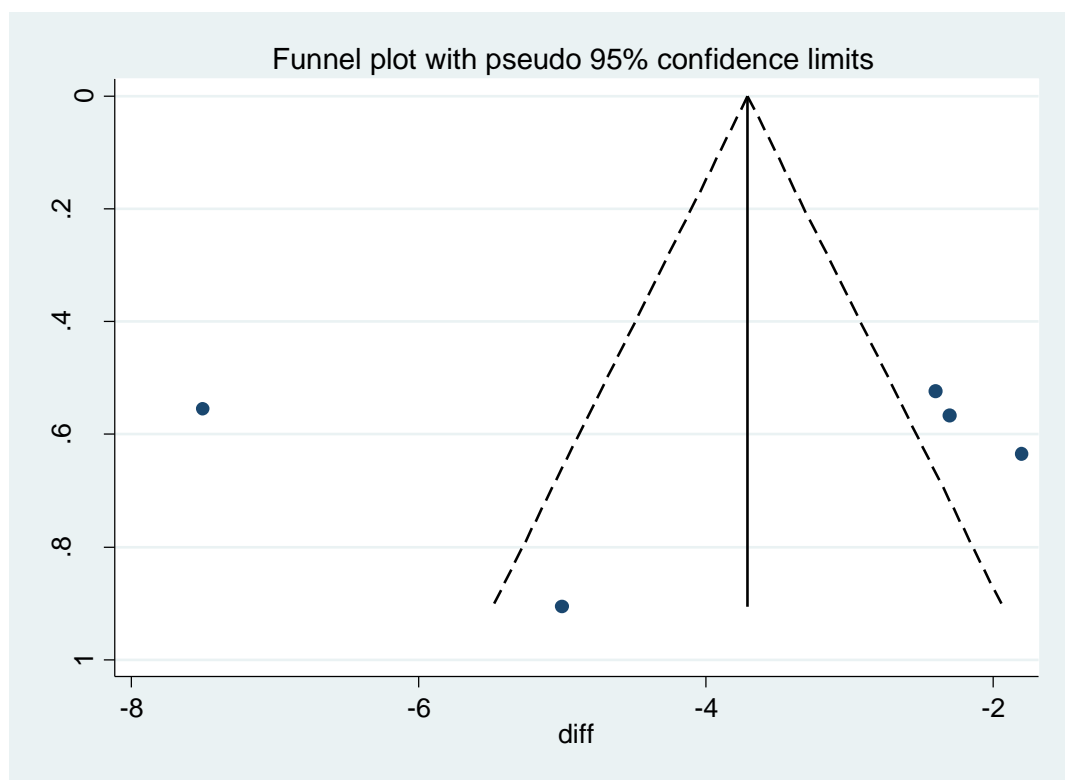
H = relative excess in Cochran's Q over its degrees-of-freedom

I<sup>2</sup> = proportion of total variation in effect estimate due to between-study heterogeneity (based on Q)

Heterogeneity variance estimates

Method	$\tau^2$
DL	6.1811

2.2 Funnel plot and Egger’s test showing publication bias; Mean difference post-BMI (kg/m²) (X-axis) with it is standard error (Y-axis)



Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

.

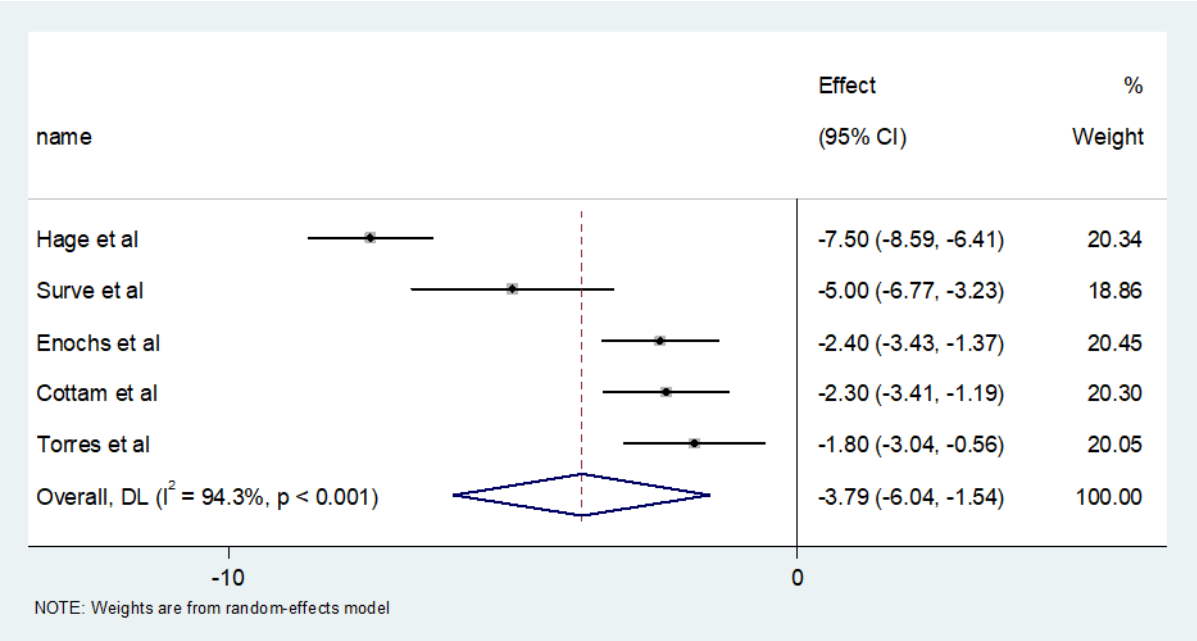
Number of studies = 5

Root MSE = 4.819

Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	-2.606134	7.576147	-0.34	0.754	-26.71681	21.50455
bias	-1.851368	12.54436	-0.15	0.892	-41.77312	38.07039

Test of H0: no small-study effects                      P = 0.892

2.3 Forest plot showing results of post-BMI (kg/m<sup>2</sup>) mean difference meta-analysis



### S.3 Total weight loss (TWL)

#### 3.1 Meta-analysis summary

Meta-analysis summary  
Random-effects model  
Method: DerSimonian-Laird

Number of studies = 3  
Heterogeneity:  
tau2 = 25.1945  
I2 (%) = 95.99  
H2 = 24.93

Study	Mean Diff.	[95% Conf. Interval]		% Weight
Torres et al	10.000	7.478	12.522	32.70
Surve et al	5.300	3.052	7.548	33.12
Hage et al	14.600	13.221	15.979	34.18
theta	10.016	4.208	15.823	

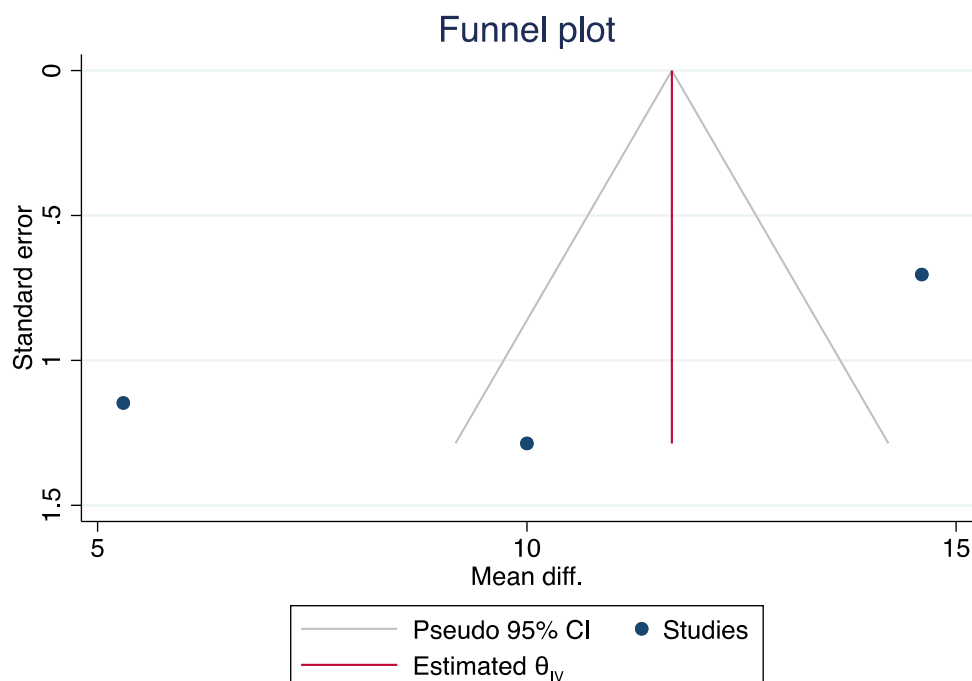
Test of theta = 0: z = 3.38

Prob > |z| = 0.0007

Test of homogeneity: Q = chi2(2) = 49.85

Prob > Q = 0.0000

#### 3.2 Funnel plot and Egger test showing publication bias; Mean difference TWL (X-axis) with it is standard error (Y-axis)



Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

.  
Number of studies = 3                      Root MSE        =     4.094

Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	24.75591	10.29694	2.40	0.251	-106.0792	155.591
bias	-13.80095	10.33799	-1.33	0.409	-145.1575	117.5556

Test of H0: no small-study effects P = 0.409

### 3.3 Forest plot showing results of TWL (kg/m<sup>2</sup>) mean difference metanalysis

Study	N	SADIs		Gastric Bypass			Mean Diff. with 95% CI	Weight (%)
		Mean	SD	N	Mean	SD		
Torres et al	106	38.7	10.7	149	28.7	9.7	10.00 [ 7.48, 12.52]	32.70
Surve et al	61	37.8	4.9	61	32.5	7.5	5.30 [ 3.05, 7.55]	33.12
Hage et al	625	40.4	9.1	343	25.8	12.6	14.60 [ 13.22, 15.98]	34.18
<b>Overall</b>							10.02 [ 4.21, 15.82]	

Heterogeneity:  $\tau^2 = 25.19$ ,  $I^2 = 95.99\%$ ,  $H^2 = 24.93$

Test of  $\theta_i = \theta_j$ :  $Q(2) = 49.85$ ,  $p = 0.00$

Test of  $\theta = 0$ :  $z = 3.38$ ,  $p = 0.00$

Random-effects DerSimonian-Laird model



## S.4 Excess weight loss

### 4.1. Meta-analysis summary

Meta-analysis pooling of aggregate data  
using the random-effects inverse-variance model  
with DerSimonian-Laird estimate of  $\tau^2$

name	Effect	[95% Conf. Interval]		% Weight
Surve et al.	11.100	7.169	15.031	27.03
Enochs et al.	10.300	6.193	14.407	26.16
Cottam et al.	6.200	2.483	9.917	28.11
Torres et al.	15.300	9.434	21.166	18.70
Overall, DL	10.299	6.907	13.691	100.00

Test of overall effect = 0:  $z = 5.951$   $p = 0.000$

Heterogeneity measures, calculated from the data  
with Conf. Intervals based on Gamma (random-effects) distribution for Q

Measure	Value	df	p-value
Cochran's Q	7.45	3	0.059
	-[95% Conf. Interval]-		
H	1.576	1.000	2.798
I <sup>2</sup> (%)	59.8%	0.0%	87.2%

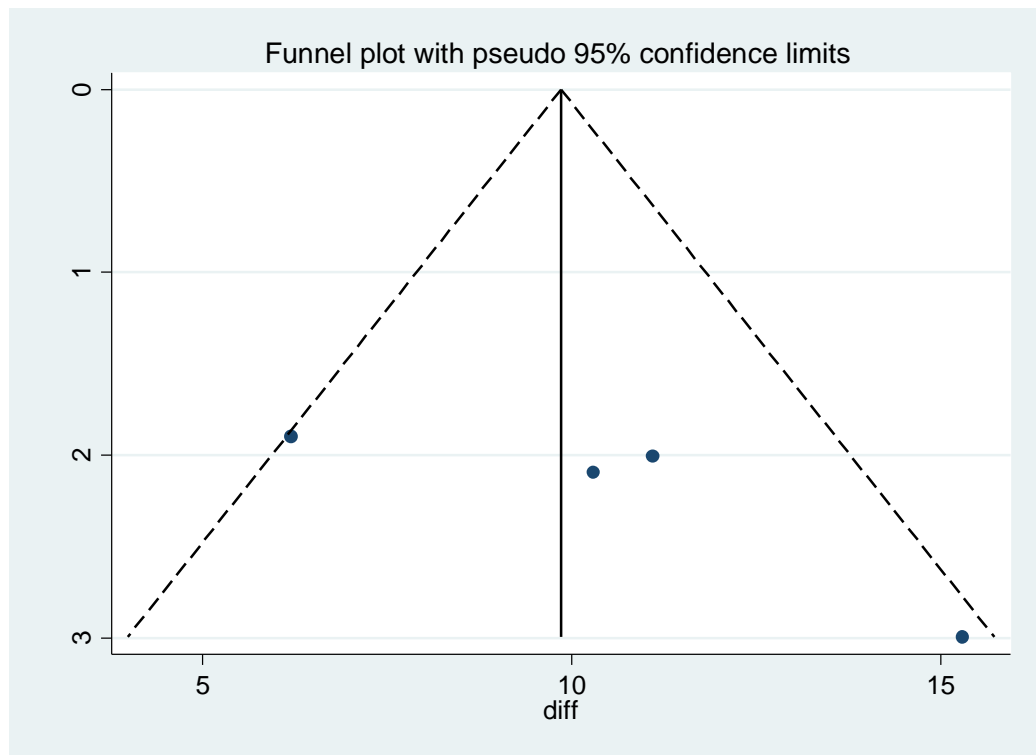
H = relative excess in Cochran's Q over its degrees-of-freedom

I<sup>2</sup> = proportion of total variation in effect estimate due to between-study heterogeneity (based on Q)

Heterogeneity variance estimates

Method	$\tau^2$
DL	7.0591

4.2. Funnel plot and Egger's test showing publication bias: Mean difference EWL (X-axis) with it is standard error (Y-axis)



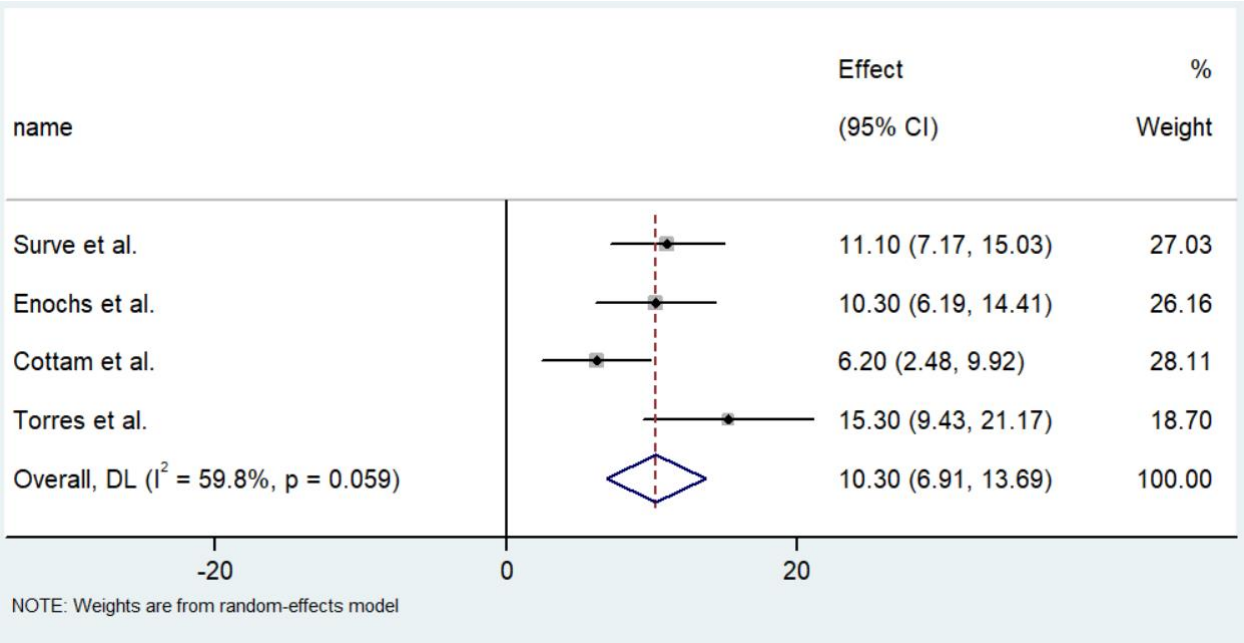
Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

.

Number of studies = 4				Root MSE	=	1.093
Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	-5.066326	7.343567	-0.69	0.562	-36.66315	26.53049
bias	7.034679	3.416924	2.06	0.176	-7.667157	21.73652

Test of H0: no small-study effects                      P = 0.176

4.3. Forest-plot showing results of excess weight loss meta-analysis



## S.5 Diabetes Mellitus remission

### 5.1. Meta-analysis summary

Meta-analysis pooling of Odds Ratios  
using the random-effects inverse-variance model  
with DerSimonian-Laird estimate of  $\tau^2$

name	Odds			
	Ratio	[95% Conf. Interval]		% Weight
Hage et al.	6.844	3.824	12.248	25.56
Enochs et al.	7.348	1.892	28.543	11.15
Cottam et al.	2.567	1.391	4.740	24.77
Torres et al.	2.562	1.384	4.743	24.70
Arrue del cid et al.	1.653	0.522	5.234	13.81
Overall, DL	3.488	2.022	6.018	100.00

Test of overall effect = 1:  $z = 4.491$   $p = 0.000$

Heterogeneity measures, calculated from the data  
with Conf. Intervals based on Gamma (random-effects) distribution for Q

Measure	Value	df	p-value
Cochran's Q	9.83	4	0.043
	-[95% Conf. Interval]-		
H	1.568	1.000	2.669
I <sup>2</sup> (%)	59.3%	0.0%	86.0%

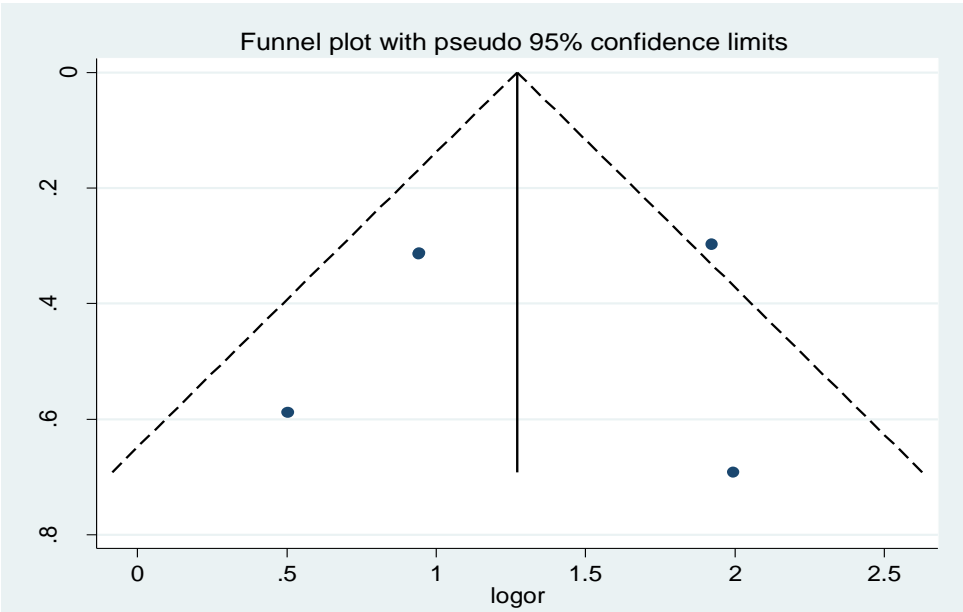
H = relative excess in Cochran's Q over its degrees-of-freedom

I<sup>2</sup> = proportion of total variation in effect estimate due to between-study heterogeneity (based on Q)

Heterogeneity variance estimates

Method	$\tau^2$
DL	0.2146

5.2. Funnel plot and Egger's test showing publication bias; diabetes mellitus remission (log OR)(X-axis) with it is standard error (Y-axis)



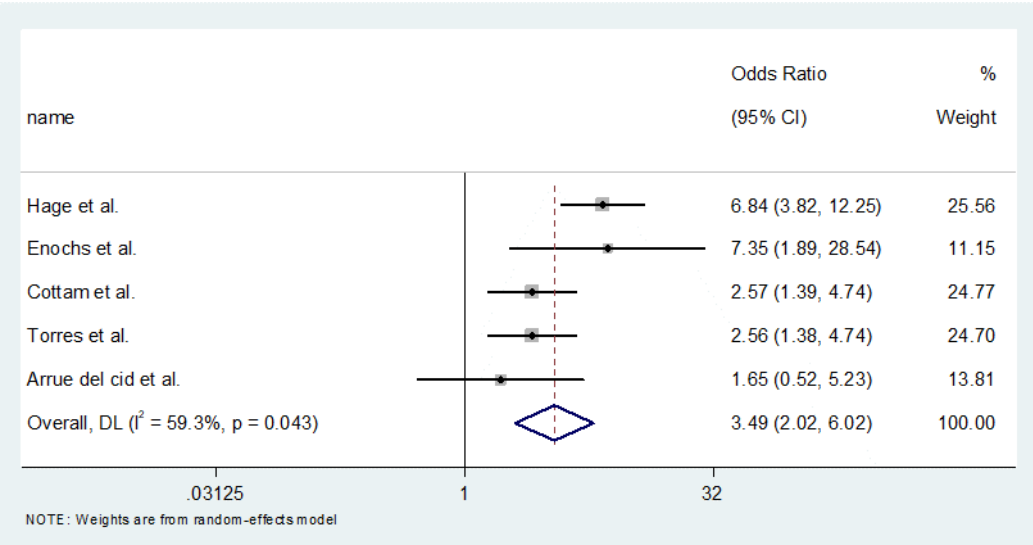
Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

.

Number of studies = 5			Root MSE		= 1.805	
Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	1.391467	.9751624	1.43	0.249	-1.711935	4.494869
bias	-.3435858	2.640478	-0.13	0.905	-8.746767	8.059595

Test of H0: no small-study effects                      P = 0.905

5.3. Forest plot showing results of diabetes mellitus remission meta-analysis



## S.6 Hypertension remission

### 6.1. Meta-analysis summary

Studies included: 2

Participants included: 512

Meta-analysis pooling of Odds Ratios  
using the random-effects inverse-variance model  
with DerSimonian-Laird estimate of  $\tau^2$

study	Odds Ratio	[95% Conf. Interval]		% Weight
Hage et al.	8.159	5.114	13.018	51.28
Arue del Cid et al.	1.703	0.864	3.357	48.72
Overall, DL	3.804	0.820	17.647	100.00

Test of overall effect = 1:  $z = 1.706$   $p = 0.088$

Heterogeneity measures, calculated from the data  
with Conf. Intervals based on Gamma (random-effects) distribution for Q

Measure	Value	df	p-value
Cochran's Q	13.90	1	0.000
	-[95% Conf. Interval]-		
H	3.728	1.000	8.355
I <sup>2</sup> (%)	92.8%	0.0%	98.6%

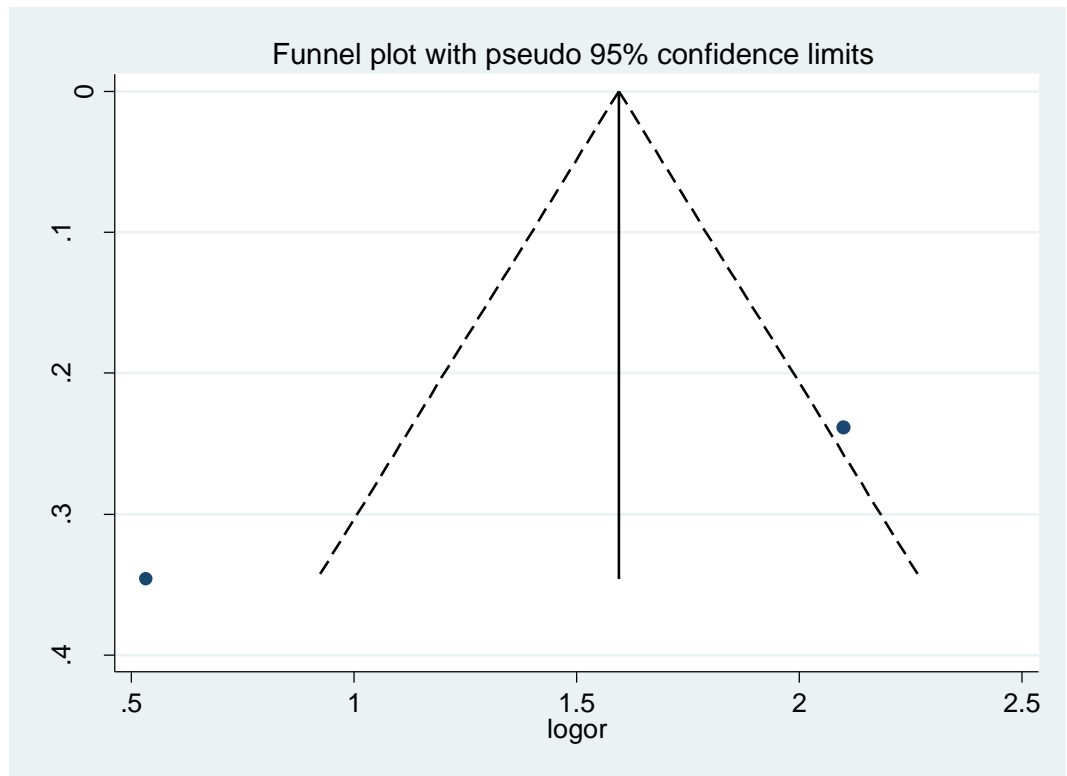
H = relative excess in Cochran's Q over its degrees-of-freedom

I<sup>2</sup> = proportion of total variation in effect estimate due to between-study heterogeneity (based on Q)

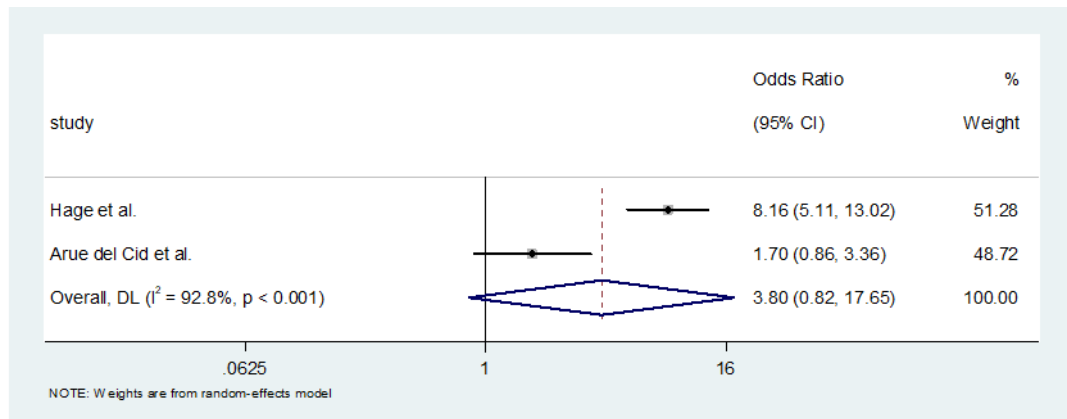
Heterogeneity variance estimates

Method	$\tau^2$
DL	1.1386

6.2. Funnel plot showing publication bias; Hypertension remission (log OR)(X-axis) with it is standard error (Y-axis)



6.3. Forest plot showing results of Hypertension remission metanalysis





## S.7 Short-term postoperative complications

### 7.1. Meta-analysis summary

Meta-analysis summary  
Random-effects model  
Method: DerSimonian-Laird

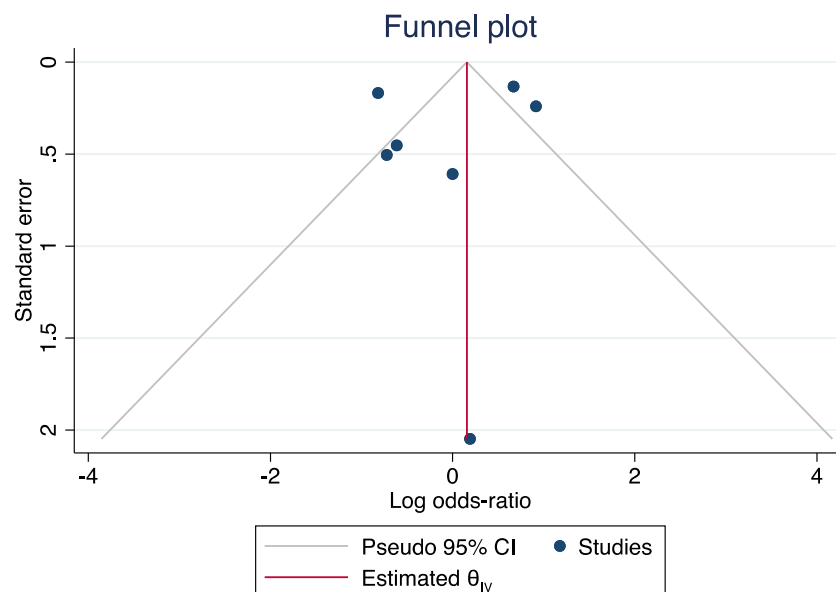
Number of studies = 7  
Heterogeneity:  
tau2 = 0.7198  
I2 (%) = 90.75  
H2 = 10.81

Study	Odds Ratio	[95% Conf. Interval]		% Weight
Cottam et al	0.441	0.318	0.613	18.55
Sessa et al	1.211	0.022	66.958	2.82
Arrue del cid et al	0.485	0.181	1.305	14.24
Surve et al	1.000	0.304	3.293	12.73
Verhoef et al	1.953	1.507	2.533	18.81
Clapp et al	2.498	1.560	3.998	17.84
Hage et al	0.541	0.223	1.314	15.00
exp(theta)	0.949	0.457	1.970	

Test of theta = 0: z = -0.14 Prob > |z| = 0.8888

Test of homogeneity: Q = chi2(6) = 64.83 Prob > Q = 0.0000

### 7.2. Funnel plot and Egger's test showing publication bias; short-term postoperative complications (log OR)(X-axis) with it is standard error (Y-axis)











Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

```
.
Number of studies =   7                                Root MSE      =    3.525
```

Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	.3735103	.5617702	0.66	0.536	-1.070566	1.817587
bias	-1.095809	2.342295	-0.47	0.660	-7.116871	4.925253

Test of H0: no small-study effects P = 0.660

### 7.3. Forest plot showing results of short-term postoperative complications metanalysis

Study	SADIs		Gastric Bypass			Odds Ratio with 95% CI	Weight (%)
	Yes	No	Yes	No			
Cottam et al	67	274	163	294		0.44 [ 0.32, 0.61]	18.55
Sessa et al	0	9	0	11		1.21 [ 0.02, 66.96]	2.82
Arrue del cid et al	7	61	13	55		0.49 [ 0.18, 1.30]	14.24
Surve et al	6	55	6	55		1.00 [ 0.30, 3.29]	12.73
Verhoef et al	67	434	3,433	43,441		1.95 [ 1.51, 2.53]	18.81
Clapp et al	28	227	60	1,215		2.50 [ 1.56, 4.00]	17.84
Hage et al	10	615	10	333		0.54 [ 0.22, 1.31]	15.00
<b>Overall</b>						0.95 [ 0.46, 1.97]	

Heterogeneity:  $\tau^2 = 0.72$ ,  $I^2 = 90.75\%$ ,  $H^2 = 10.81$

Test of  $\theta_i = \theta_j$ :  $Q(6) = 64.83$ ,  $p = 0.00$

Test of  $\theta = 0$ :  $z = -0.14$ ,  $p = 0.89$

A number line with tick marks at  $\frac{1}{32}$ ,  $\frac{1}{4}$ , 2, and 16. A red dot is placed on the line between  $\frac{1}{4}$  and 2.

Random-effects DerSimonian-Laird model

## S.8 Long-term postoperative complications

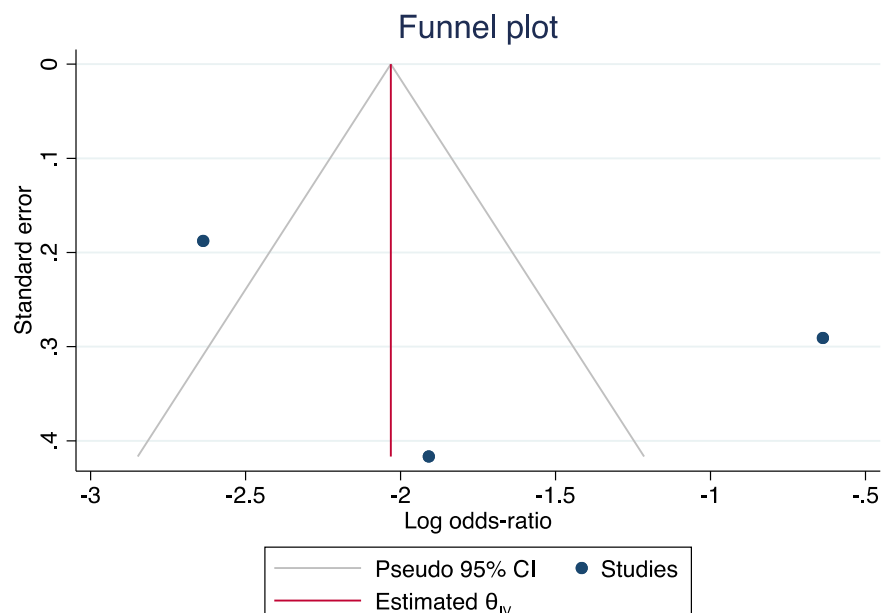
### 8.1. Meta-analysis summary

Meta-analysis summary	Number of studies =	3
Random-effects model	Heterogeneity:	
Method: DerSimonian-Laird	tau2 =	1.2746
	I2 (%) =	94.02
	H2 =	16.73

Study	Odds Ratio	[95% Conf. Interval]		% Weight
Cottam et al	0.072	0.050	0.103	34.86
Surve et al	0.148	0.066	0.335	31.54
Hage et al	0.529	0.299	0.934	33.60
exp(theta)	0.176	0.047	0.663	

Test of theta = 0: z = -2.57	Prob >  z  = 0.0102
Test of homogeneity: Q = chi2(2) = 33.46	Prob > Q = 0.0000

### 8.2. Funnel plot showing publication bias; long-term postoperative complications (log OR)(X-axis) with it is standard error (Y-axis)



Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

Number of studies = 3                      Root MSE                =     4.629

Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	-3.603422	2.205775	-1.63	0.350	-31.63045	24.42361
bias	6.472213	8.634635	0.75	0.591	-103.2412	116.1857

Test of H0: no small-study effects P = 0.591

### 8.3. Forest plot showing results of long-term postoperative complications metanalysis

Study	SADIs		Gastric Bypass		Odds Ratio with 95% CI	Weight (%)
	Yes	No	Yes	No		
Cottam et al	70	271	267	74	0.07 [ 0.05, 0.10]	34.86
Surve et al	12	49	38	23	0.15 [ 0.07, 0.34]	31.54
Hage et al	19	606	35	590	0.53 [ 0.30, 0.93]	33.60
<b>Overall</b>					0.18 [ 0.05, 0.66]	

Heterogeneity:  $\tau^2 = 1.27$ ,  $I^2 = 94.02\%$ ,  $H^2 = 16.73$

Test of  $\theta_i = \theta_j$ :  $Q(2) = 33.46$ ,  $p = 0.00$

Test of  $\theta = 0$ :  $z = -2.57$ ,  $p = 0.01$

Random-effects DerSimonian-Laird model

## S.9 Severe complications (Clavien-Dindo >3)

### 9.1. Meta-analysis summary

Studies included: 6

Participants included: 49982

Meta-analysis pooling of Odds Ratios  
using the random-effects inverse-variance model  
with DerSimonian-Laird estimate of  $\tau^2$

name	Odds			
	Ratio	[95% Conf. Interval]		% Weight
Surve et al.	0.040	0.014	0.117	17.87
Cottam et al.	0.397	0.252	0.625	20.82
Arrue del cid et al.	1.000	0.195	5.139	14.44
Sessa et al.	1.222	0.022	67.923	5.42
Verhoef et al.	1.302	0.977	1.734	21.29
Clapp et al.	3.797	2.040	7.070	20.17
Overall, DL	0.651	0.221	1.916	100.00

Test of overall effect = 1:  $z = -0.779$   $p = 0.436$

Heterogeneity measures, calculated from the data  
with Conf. Intervals based on Gamma (random-effects) distribution for Q

Measure	Value	df	p-value
Cochran's Q	71.81	5	0.000
	-[95% Conf. Interval]-		
H	3.790	1.000	6.982
I <sup>2</sup> (%)	93.0%	0.0%	97.9%

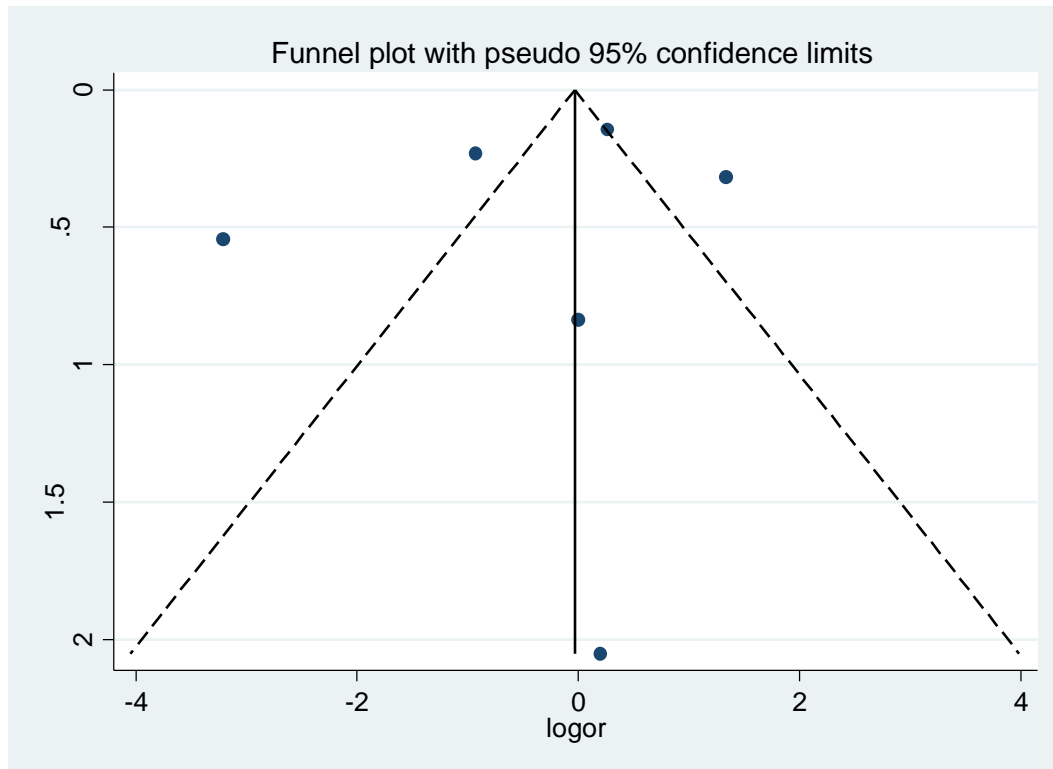
H = relative excess in Cochran's Q over its degrees-of-freedom

I<sup>2</sup> = proportion of total variation in effect estimate due to between-study heterogeneity (based on Q)

Heterogeneity variance estimates

Method	$\tau^2$
DL	1.4050

9.2. Funnel plot and Egger's test showing publication bias; severe postoperative complications (log OR)(X-axis) with it is standard error (Y-axis)



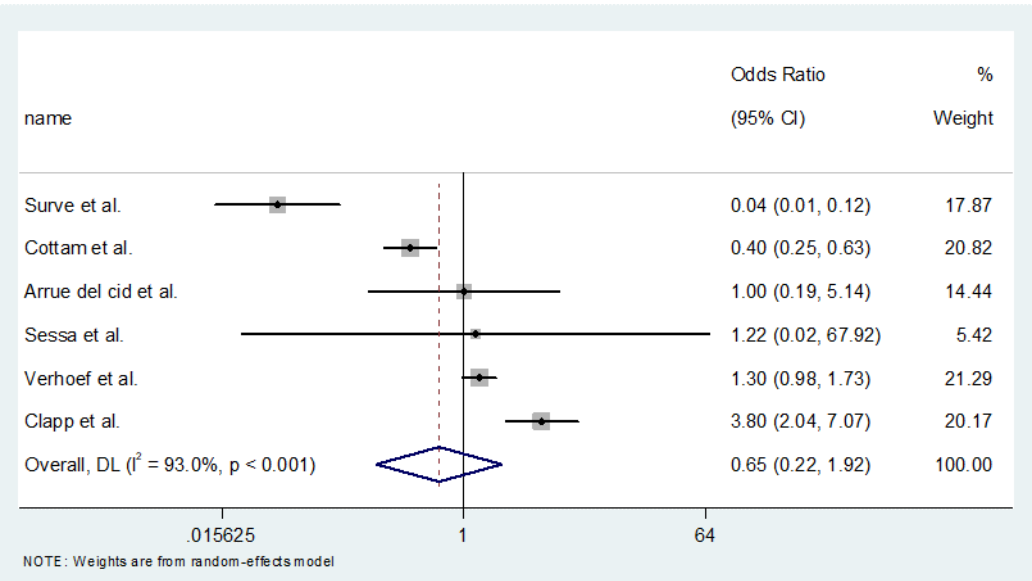
Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

.  
Number of studies = 5                      Root MSE        =     4.577

Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	.5484756	1.023577	0.54	0.629	-2.709002	3.805954
bias	-2.683182	4.100492	-0.65	0.560	-15.73278	10.36641

Test of H0: no small-study effects P = 0.560

9.3. Forest plot showing results of severe complications metanalysis



## S.10 Operative duration

### 10.1. Meta-analysis summary

Meta-analysis summary  
Random-effects model  
Method: DerSimonian-Laird

Number of studies = **4**  
Heterogeneity:  
tau2 = **1.3e+03**  
I2 (%) = **98.60**  
H2 = **71.61**

Study	Mean Diff.	[95% Conf. Interval]		% Weight
Sessa et al	<b>69.800</b>	<b>42.576</b>	<b>97.024</b>	<b>22.61</b>
Verhoef et al	<b>10.900</b>	<b>5.339</b>	<b>16.461</b>	<b>25.90</b>
Clapp et al	<b>15.100</b>	<b>7.698</b>	<b>22.502</b>	<b>25.77</b>
Hage et al	<b>-51.400</b>	<b>-59.383</b>	<b>-43.417</b>	<b>25.72</b>
theta	<b>9.276</b>	<b>-26.318</b>	<b>44.870</b>	

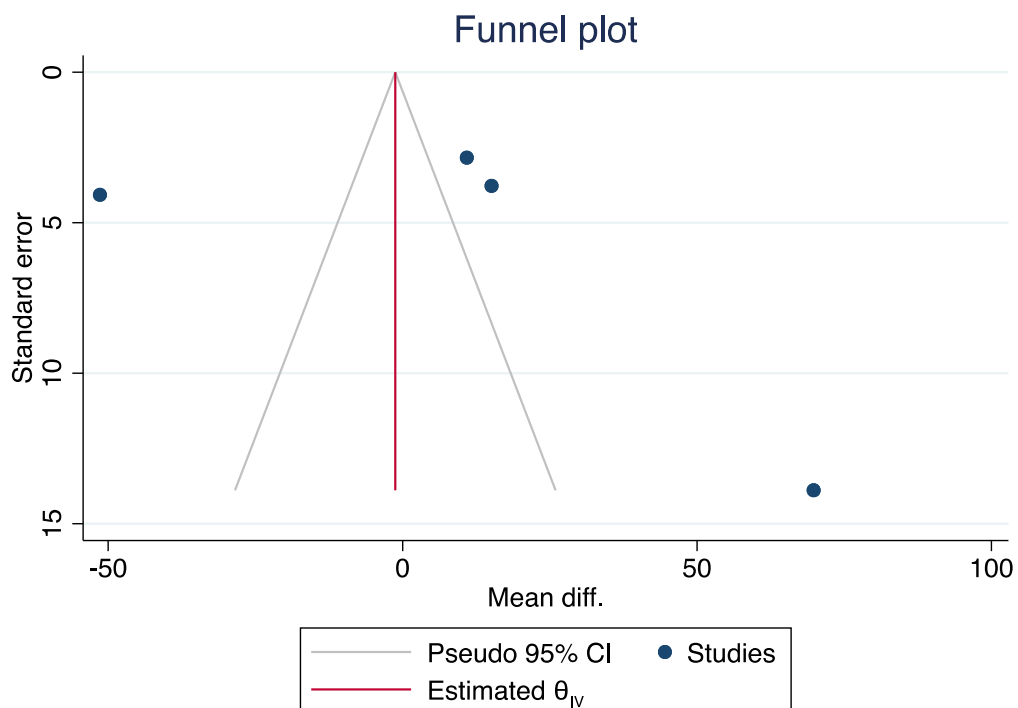
Test of theta = 0: z = **0.51**

Prob > |z| = **0.6095**

Test of homogeneity: Q = chi2(3) = **214.84**

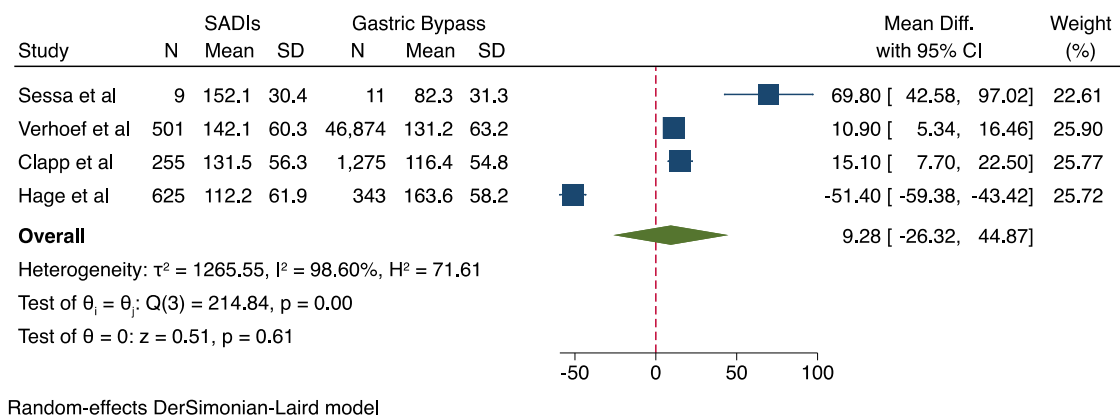
Prob > Q = **0.0000**

### 10.2 Funnel plot showing publication bias; mean difference operative duration (minutes) with it is standard error (Y-axis)





10.3. Forest plot showing results of mean difference operative duration (minutes)  
metanalysis



## S.11 Hospital stay

### 11.1. Meta-analysis summary

Meta-analysis summary  
Random-effects model  
Method: DerSimonian-Laird

Number of studies = 5  
Heterogeneity:  
tau2 = 0.5866  
I2 (%) = 93.61  
H2 = 15.64

Study	Mean Diff.	[95% Conf. Interval]		% Weight
Sessa et al	1.100	0.433	1.767	21.30
Arrue del cid et al	0.080	-2.914	3.074	5.12
Surve et al	-0.700	-1.038	-0.362	24.28
Clapp et al	0.570	0.330	0.810	24.87
Hage et al	-0.600	-0.915	-0.285	24.43
theta	0.064	-0.694	0.822	

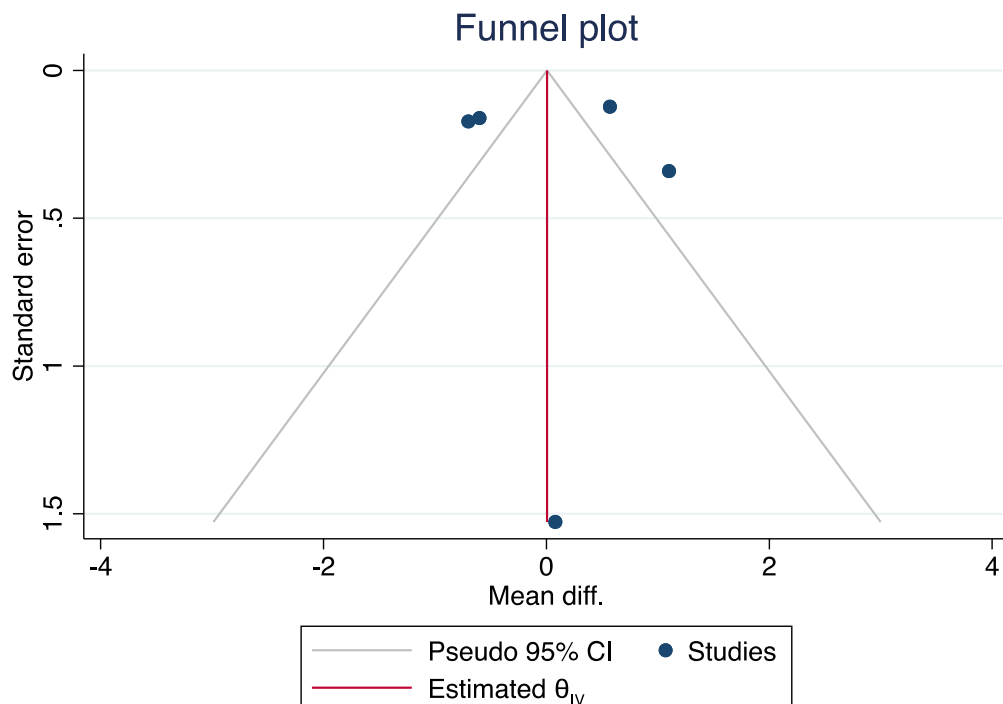
Test of theta = 0: z = 0.16

Prob > |z| = 0.8693

Test of homogeneity: Q = chi2(4) = 62.58

Prob > Q = 0.0000

### 11.2. Funnel plot showing publication bias; mean difference in hospital stay (days) with it is standard error (Y-axis)



Egger's test for small-study effects:  
Regress standard normal deviate of intervention  
effect estimate against its standard error

.

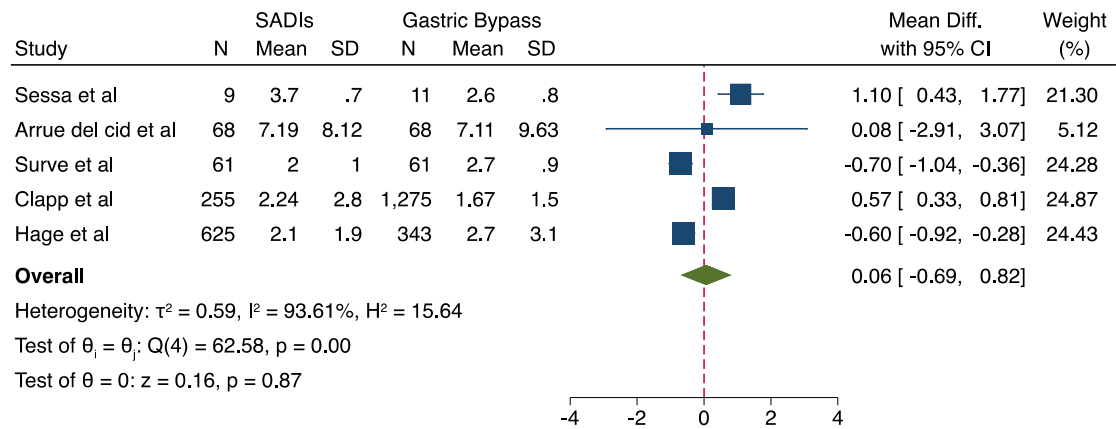
Number of studies = 5

Root MSE = 3.747

Std_Eff	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
slope	-.5319491	.8396643	-0.63	0.571	-3.204136	2.140237
bias	2.005846	3.817668	0.53	0.636	-10.14368	14.15537

Test of H0: no small-study effects                      P = 0.636

11.3. Forest plot showing results of hospital stay (days) metanalysis



Random-effects DerSimonian-Laird model



## S.12. Assessment of methodological quality

<b>Table 3. Newcastle-Ottawa score for the included studies</b>									
<b>First author, year</b>	<b>Representativeness of cohort</b>	<b>Selection of non-exposed cohort</b>	<b>Ascertainment of exposure</b>	<b>Demonstration that outcome of interest was not present at start of study</b>	<b>Comparability of cohorts on the basis of the design or analysis</b>	<b>Assessment of outcome</b>	<b>Was follow-up long enough for outcomes to occur</b>	<b>Adequacy of follow up of cohorts</b>	<b>Total score</b>
Hage et al (2024)	★	★	★	★	★	★	★	★	8
Surve et al (2020)	★	★	★	★	★	★	★	★	8
Enochs et al (2019)	★	★	★	★	★	★	★	★	8
Cottam et al (2018)	★	★	★	★	★	★	★	★	8
Torres et al (2017)	★	★	★	★	★	★	★	★	8
Arrue del Cid et al (2019)	★	★	★	★	★	★	★	★	8
Verhoef et al (2022)*	★	★	★	★	★	★	★	★	8
Clapp et al (2022)*	★	★	★	★	★	★	★	★	8
Sessa et al (2019)*	★	★	★	★	★	★	★	★	8

\*This studies were evaluated just for preoperative variables, short-term complications, operative duration and hospital stay.

### S.13. Studies excluded from the systematic review

<b>Table 4. Studies excluded from the systematic review</b>		
<b>Study</b>	<b>PMID/DOI</b>	<b>Cause of exclusion</b>
Prospective multicentre randomised trial comparing the efficacy and safety of single-anastomosis duodeno-ileal bypass with sleeve gastrectomy (SADI-S) versus Roux-en-Y gastric bypass (RYGB): SADISLEEVE study protocol	<b>35414539</b>	Only protocol
Comparison of Efficacy and Safety Between Roux-en-Y Gastric Bypass (RYGB) vs One Anastomosis Gastric Bypass (OAGB) vs Single Anastomosis Duodeno-ileal Bypass with Sleeve Gastrectomy (SADI-S): a Systematic Review of Bariatric and Metabolic Surgery	<b>34981238</b>	Review
[Comparative results of various methods of surgical treatment of severe forms of metabolic syndrome].	<b>22950270</b>	SADI-S not included
Evaluation of the Efficacy of Single Anastomosis Sleeve Ileal (SASI) Bypass for Patients with Morbid Obesity: a Multicenter Study	<b>31734889</b>	No comparison with RYGB
Comparison of short- and long-term outcomes of bariatric surgery methods: A retrospective study.	<b>36197162</b>	SADI-S not included
Bariatric surgery: effects on the metabolic complications of obesity.	<b>22287091</b>	SADI-S not included
Single anastomosis duodenal switch (SADI-S) versus Roux-en-y gastric bypass- defining a new gold standard in metabolic surgery	-	Only protocol
Outcomes of SADI and OAGB Compared to RYGB from the Metabolic and Bariatric Surgery Quality Improvement Program: The North American Experience	<b>10.1007/s11695-023-07019-x</b>	No data for metaanalysis
A Comparison of the Bariatric Procedures that Are Performed in the Treatment of Super Morbid Obesity.	<b>28451928</b>	SADI-S not included
Trends in Utilization and Relative Complication Rates of Bariatric Procedures.	<b>31012048</b>	SADI-S not included
Bariatric surgery and prevention of cardiovascular events and mortality in morbid obesity: mechanisms of action and choice of surgery.	<b>25770762</b>	SADI-S not included
Morbid obesity treatment by SADI-S: a multi-center randomized controlled clinical trial	<b>32873678</b>	Only protocol

Long-Term Outcomes of Bariatric and Metabolic Surgery in Japan: Results of a Multi-Institutional Survey.	<b>27631329</b>	SADI-S not included
[Analysis of the 1-year curative efficacy of sleeve gastrectomy, Roux-en-Y gastric bypass, single anastomosis duodenal-ileal bypass with sleeve gastrectomy and biliopancreatic diversion with duodenal switch in patients with super obesity].	<b>37709694</b>	Chinese language
Efficacy of Different Procedures of Metabolic Surgery for Type 2 Diabetes in Asia: a Multinational and Multicenter Exploratory Study.	<b>33523416</b>	SADI-S not included
Single-anastomosis Duodeno Ileal Bypass (SADI) Versus Roux-en-Y Gastric Bypass NCT03610256	-	Only protocol
Comparative Effectiveness and Safety of Bariatric Procedures for Weight Loss: A PCORnet Cohort Study.	<b>30383139</b>	SADI-S not included
Atherogenic Dyslipidemia Remission 1 Year After Bariatric Surgery	<b>27988827</b>	SADI-S not included
Comparative Effectiveness of Different Bariatric Procedures in Super Morbid Obesity.	<b>30251091</b>	SADI-S not included

