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EDITORIAL

Early Exercise Boosts Visceral Fat Loss Post-Bariatric Surgery in the First Month

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Dear Editors:

We sincerely appreciate the comments made by Liu and Bai [1] regarding our study, *"Adherence to an early exercise plan promotes visceral fat loss in the first month following bariatric surgery."* In response, we would like to clarify some points that we believe are relevant for a better understanding of the approach and contributions of our work.

First, there is limited evidence on changes in body composition—especially with regard to visceral fat mass—within the first month after bariatric surgery, associated with physical exercise interventions. This, in itself, represents a significant contribution of our study. In clinical practice, exercise options for post-bariatric patients include supervised programs, online modalities, or counseling-based interventions to support exercise self-management in their everyday environment.

Our team has previously worked with structured interventions [2], telerehabilitation [3], and in this study, we explored the counseling-based approach [4]. While we acknowledge—as stated in the manuscript—that the lack of direct supervision is a limitation, we believe the main strength of our approach lies in its applicability to real-world settings.

Patients began exercising early (between postoperative days 5 and 7), received in-hospital familiarization with individually tailored elastic band exercises, and were provided with audiovisual materials to ensure proper execution. This modality represents a realistic alternative for most patients, who often lack access to supervised exercise programs during the immediate postoperative period.

No adverse events related to the intervention were reported in our sample, which reinforces the safety of this strategy. We consider it particularly relevant that this counseling-based approach led to a significant reduction in visceral fat, a clinical marker closely associated with improvements in metabolic health. Therefore, our work highlights the importance of promoting not only total weight loss but also early qualitative improvements in body composition during the postoperative course.

Regarding the use of the Borg scale to assess exercise intensity, the authors express a critical view due to its subjective nature. However, in real-world contexts where patients may lack objective tools such as heart rate monitors or accelerometers, perceived exertion scales represent a valid and globally recommended method for assessing exercise intensity.

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Looking ahead, future research on this type of intervention should focus on identifying the main factors associated with adherence or non-adherence to exercise recommendations provided by physiotherapists. Such information will contribute to improved clinical practice and the development of more effective post-bariatric exercise programs.

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Data Availability No datasets were generated or analysed during the current study.

Declarations

Competing interests The authors declare no competing interests.

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