



Blackrock Clinic

PATIENT INFORMATION

BARIATRIC SURGERY

Roux En Y Gastric Bypass Sleeve Gastrectomy



Welcome to Blackrock Clinic

This brochure will explain

- Surgical treatment options for severe obesity.
- How laparoscopic obesity surgery is performed
- Expected outcomes of the procedure
- What can be expected after laparoscopic obesity surgery

What is Laparoscopic Surgery?

Laparoscopy involves using a specialised telescope (laparoscope) to view the stomach, which typically allows smaller abdominal incisions, ie keyhole surgery.

Advantages of the laparoscopic approach include:

- Reduced post-operative pain
- Shorter hospital stay
- Fewer wound complications
- Faster return to work

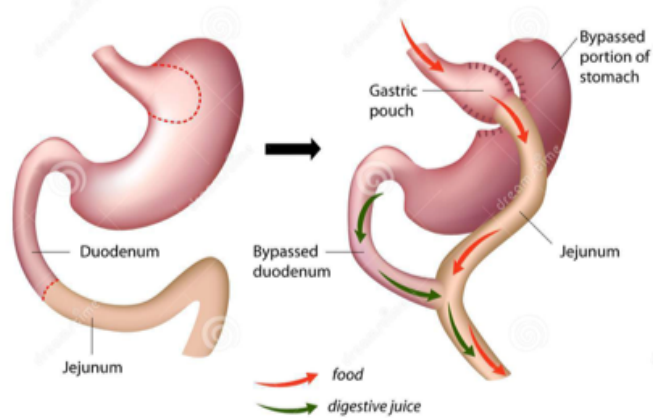


Surgical Treatment

A number of weight loss operations have been devised over the last 40-50 years. The operations recognised by most surgeons include: Roux-en-Y gastric bypass, gastric banding (adjustable or non-adjustable), sleeve gastrectomy.

The **gastric bypass** procedure involves dividing the stomach and forming a small gastric pouch. The new gastric pouch is connected to varying lengths of your own small intestine constructed into a Y-shaped limb (Roux-en-Y gastric bypass) (Fig. 1). This procedure thus acts by both reducing portion size, as well as gently limiting calorie absorption, to allow for enhanced weight loss.

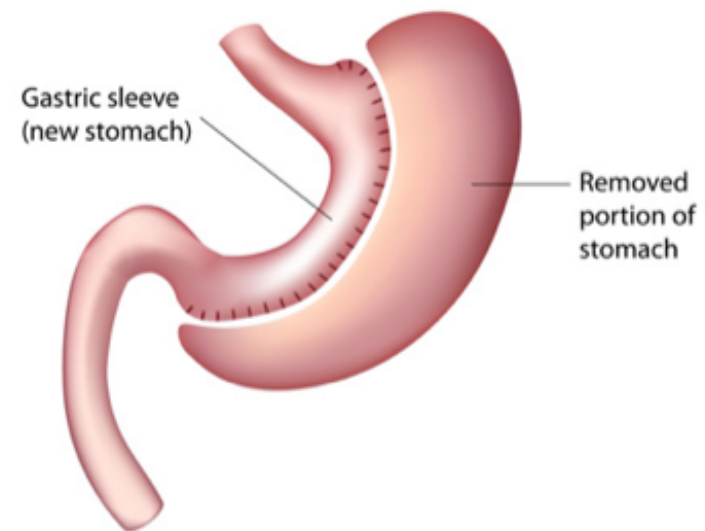
Figure 1. Laparoscopic Gastric Bypass



- 70-75% average estimated excess body weight loss
- 3 day hospital stay
- 2-3 week return to work
- Approximately 70% reversal of diabetes
- 60% resolution of sleep apnoea
- Improved mobility
- Resolution of acid reflux
- Improved fertility in females

Figure 2. Laparoscopic Sleeve Gastrectomy

The **sleeve gastrectomy** involves removal of at least 75% of the stomach. This reduces the volume capacity of the stomach. It allows for smaller portions and reduced absorption of nutrients to facilitate weight loss. (Fig 2).



- 60-70% average estimated excess body weight loss
- 2-3 day hospital stay
- Return to work 2-3 weeks
- Similar health benefits to gastric bypass

Do I Qualify?

Under current Irish insurance rules, to be eligible for bariatric surgery you should have a BMI over 45 or over 40 with weight related medical conditions.

Current international guidelines stipulate a BMI of over 40 or over 35 with weight related medical conditions.

If you are self paying, the International guidelines will apply.

Surgical, medical, psychological and dietary evaluations are all usually required **prior** to deciding if you are eligible.

What Preparation is Required?

A **thorough multidisciplinary evaluation** to determine if you are a candidate for surgery.

A **nutritional evaluation** with a dietician.

A **psychological evaluation** may be required to determine the patient's ability to adjust to changes after the operation.

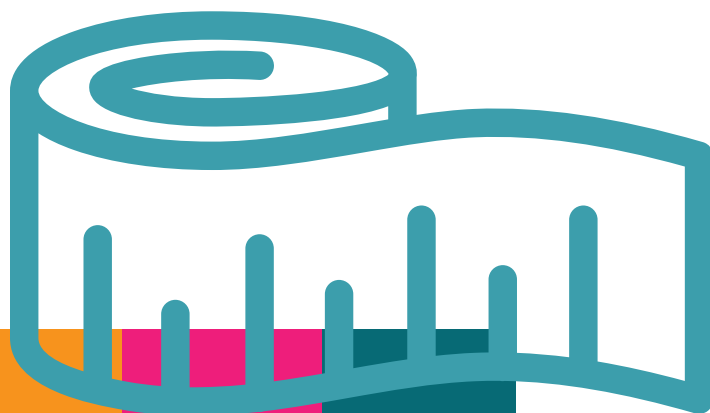
Consultation from other specialists, such as a cardiologist, respiratory physician or endocrinologist may be needed depending on your own specific medical condition.

After midnight the night before the operation, you should not eat or drink anything except medications that your surgeon has told you are permissible to take with a sip of water the morning of surgery. Drugs such as blood thinners, anti-inflammatory medication (arthritis medications), may be stopped temporarily prior to surgery. The oral contraception pill would need to be discontinued for 6 weeks prior to surgery.

It is required that you **quit smoking** prior to surgery.

Arrange for any help you may need at home. If you have sleep apnea and use a CPAP machine at home, you should bring it with you to the hospital on the day of surgery.

Patients will need to start on a pre operative diet 2 weeks prior to surgery to help shrink their liver. This facilitates a safer operation.



What Happens if the Operation cannot be performed by the Laparoscopic Method?

In a small number of patients the laparoscopic method cannot be performed. Factors that may increase the possibility of choosing or converting to the “open” procedure may include a history of prior abdominal surgery causing dense scar tissue, inability to visualise organs or bleeding problems during the operation.

When the surgeon feels that it is safest to convert the laparoscopic procedure to an open one, this is not a complication, but rather sound surgical judgment. The decision to convert to an open procedure is strictly based on patient safety.

What Should I Expect on the Day of Surgery?

- You will arrive at the hospital the morning of the operation.
- Preparation before surgery often includes changing into a hospital gown.
- Pre-operative medications may be necessary, including a blood thinning injection to reduce the risk of clots.
- You will meet the anaesthetist.
- Most patients stay in the hospital for 2-4 nights after surgery.

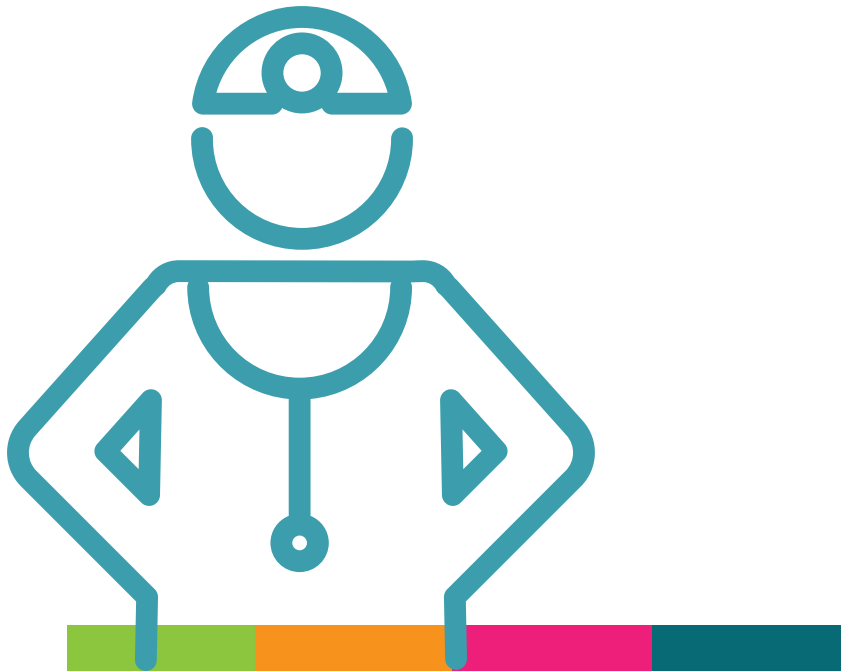
What are the Expected Results after Laparoscopic Obesity Surgery?

Weight loss

The success rate for weight loss is reported as being slightly higher with the gastric bypass operation than sleeve gastrectomy, but both techniques have shown excellent results. Most reports show a 50% or greater excess weight loss after one year. Weight loss generally continues for all the procedures for 18-24 months after surgery. Some weight gain is common about two to five years after surgery.

Associated medical conditions

Weight reduction surgery has been reported to improve conditions such as sleep apnea, diabetes, high blood pressure and high cholesterol. Many patients report an improvement in mood and many other aspects of psychosocial functioning after surgery.



What Complications Can Occur?

Although the operation is very safe, complications may occur. The immediate death rate for any of the laparoscopic weight loss procedures is low in reported case series (<1%).

Other complications include, but are not limited to, wound infections, wound breakdown, abscess, leaks from staple-line breakdown, perforation of the bowel, bowel obstruction, marginal ulcers, pulmonary embolism, and blood clots in the legs. In the post-operative period other problems may arise that may require more surgery.

Longer term problems can include strictures, vomiting, heartburn or failure to lose weight.

Gallstones are a common finding in overweight patients. Symptoms from these gallstones can occur with weight loss. Special treatment may be required.

Nutritional Deficiencies and Side Effects

After gastric bypass, nutritional deficiencies such as Vitamin B-12, Vitamin D, folate, and iron may occur. Taking necessary vitamin and nutrient supplements can generally prevent them. Another potential result of gastric bypass is “Dumping Syndrome”. Abdominal pain, cramping, sweating, and diarrhea characterise Dumping Syndrome after eating drinks and foods that are high in sugar. Avoiding high sugar foods can prevent these symptoms.

Pregnancy After Bariatric Surgery?

Bariatric surgery can produce a sudden positive change in your fertility. Women who become pregnant after any of these surgical procedures need special attention from their doctors and clinical care team.

To protect women and their babies from potential malnutrition, doctors recommend that women not get pregnant until 18 MONTHS AFTER surgery.



What to Expect after Surgery

You will usually be in the hospital 2-4 days after a laparoscopic procedure. You may have a tube in your nose on the first day, out of bed sitting in a chair the night of surgery, and walking by the following day. You will need to participate in breathing exercises and chest physio. You will receive pain medication when you need it.

Prior to going home you will begin a three week course of subcutaneous injections of a blood thinner to protect you from clots.

The volume of liquid you drink will be gradually increased. Patients are encouraged to walk and engage in light activity. You will receive a comprehensive diet plan for the weeks after your operation.

It is important to continue the breathing exercises while at home after surgery. Pain after laparoscopic surgery is generally mild although some patients may require pain medication. At the first follow-up visit the surgeon will discuss with you any dietary changes.

After the operation, it is important to follow your doctor's instructions. Although many people feel better in just a few days, remember that your body needs time to heal. You will probably be able to get back to most of your normal activities in one to two weeks time. These activities include showering, driving, walking up stairs, work and light exercise. A follow up appointment will be scheduled on discharge.

When to Seek Medical Help after Discharge

Be sure to call your doctor if you develop any of the following:

- **Persistent fever**
- **Bleeding**
- **Increased abdominal swelling or pain**
- **Persistent nausea or vomiting**
- **Chills**
- **Persistent cough and shortness of breath**
- **Discharge from any incision**
- **Calf swelling or leg tenderness**

This brochure is not intended to take the place of your discussion with your surgeon about aspects of your medical care.

ADDITIONAL INFORMATION

BOMMS – British Obesity and Metabolic Surgery Society
www.bomss.org.uk

American Society for Metabolic & Bariatric Surgery
www.asmb.org

*Peace of mind is an important
component of healing*



Blackrock Clinic

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S U R G E R Y
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