

Title:  
Obesity, Bariatric Surgery and You

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Abstract:  
Bariatric surgery is a group of surgeries that are meant to achieve weight loss. These surgeries can further broken down by how they cause weight loss: “restrictive,” “malabsorptive,” and both “restrictive” and “malabsorptive.” The two most common types of bariatric surgeries performed in the US are the Roux-en-Y Gastric Bypass (RYGB) and Laproscopic Adjustable Gastric Banding (LAGB). The benefits of Bariatric surgery include major weight loss, reduction or resolution of obesity related disease, and decreased mortality related to obesity. Risks to bariatric surgery include a small risk of death, re-operation, infection, weight regain, and specific risks depending on the type of procedure or surgical method. Indications for bariatric surgery include a BMI > 40, or BMI > 35 with other co-morbidities, failed several previous attempts at non-surgical weight loss. Contraindications to bariatric surgery include: mental health issues, binge eating disorders, current substance abuse, and an inability to make life like habit changes. Treatment of individuals less than 18 or greater than 65 is controversial.

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# Obesity, Bariatric Surgery and You

## What Is Bariatric Surgery?

Bariatric surgery refers to a group of surgeries that are meant to achieve weight loss. These weight loss or “bariatric” surgeries can then be further broken down by how they cause weight loss. One class of bariatric surgeries is referred to as “restrictive” procedures because they cause weight loss by restricting caloric intake by decreasing the size of the stomach’s holding capacity. A second class of bariatric surgeries is referred to as “malabsorptive” procedures because they cause weight loss by preventing absorption of nutrients in the small intestine by shortening the length of the small intestine. Finally, there is a third class of bariatric surgeries that are both “restrictive” and “malabsorptive” because they work by both of the methods discussed above.

## What Bariatric Surgeries Are Common?

The two most common types of bariatric surgeries performed in the US are the Roux-en-Y Gastric Bypass (RYGB) which works by both “restrictive” and “malabsorptive” methods, while Laproscopic Adjustable Gastric Banding (LAGB) works only by “restrictive” methods.

## What are the Benefits of Bariatric Surgery?

- Major Weight Loss
  - o With certain procedures a person on average may lose up to 61% of their excessive body weight (the weight that a person is considered above normal for their height)
- Reduction or Resolution in Obesity Related Disease
  - o Diabetes
  - o Hyperlipidemia
  - o Hypertension
  - o Obstructive Sleep Apnea
- Decrease in Obesity Related Mortality

## What are the Risks of Bariatric Surgery?

- Small risk of death, about 1%.
- Re-operation in up to 6-9% of cases
- Wound Infection at Surgical Sites
- Weight Regain in up to 20% of cases
- Risks of RYGB
  - o Bowel Obstruction
  - o Band Slippage/Prolapse
  - o Dilation of the Esophagus
- Risk RYGB
  - o Leg Clots with Pulmonary Embolism in up to 3% of cases
  - o Leaking from GI Tract
  - o Bowel Stenosis
  - o Gallstones
  - o Nutritional Deficiencies

## What are Indications for Bariatric Surgery?

- Have a Body Mass Index (BMI) greater than 40 (morbidly obese).
- Have acceptable surgical risks
- Have failed several previous attempts at non-surgical weight loss
- Have a BMI > 35 in people with
  - o Diabetes
  - o Sleep Apnea
  - o Obesity Related Heart Disease
  - o Severe Joint Problems

## Who Should Not Get Bariatric Surgery?

- Patients with untreated or unstable mental health issues, such as depression or psychosis
- Individuals with binge eating disorders
- Current alcohol or drug abuse
- Inability to follow life long eating habit changes, including nutritional supplementation for life
- Bariatric surgery in individuals younger than 18 years of age and older than 65 years of age is controversial. Bariatric surgery in individuals over 65 is associated with significantly increased risk of mortality.