Bariatric (Weight Loss) and Metabolic Surgery

VA Palo Alto Bariatric Surgery Center
Looks can be deceiving...

Weight Loss Surgery (Bariatric Surgery) can produce dramatic results, but requires a lot of work and a strong commitment.
Obesity is a growing epidemic

United States Obesity Statistics (% obese by state)

[65% of American adults are overweight or obese]
Obesity is a serious healthcare concern

- Obesity is associated with high blood pressure, diabetes, sleep apnea, heart disease, stroke, joint disease, liver disease.

- Obesity-related deaths are second only to tobacco-related diseases as a cause of preventable and premature death.
Who is obese? Who is overweight?

Body Mass Index = \( \frac{\text{Weight}}{\text{Height}^2} \)

Overweight  
BMI more than 25 kg/m\(^2\)

Obese  
BMI 30 to 34.9 kg/m\(^2\)

Severely Obese  
BMI 35 to 39.9 kg/m\(^2\)

Morbidly Obese  
BMI more than 40 kg/m\(^2\)
Why Undergo Surgery for Weight Loss?

- It helps attain significant and long-lasting weight loss
- Leads to improvement or remission of co-morbid conditions
- Increases life expectancy
- Improves quality of life
- Often, it is the best option: There is no reliable, durable medical treatment of morbid obesity
  - Most patients regain most or all of the weight that was lost within 2-5 years following diet or drug treatment
Who Qualifies for Weight Loss Surgery?

• Patients with a BMI of 40 kg/m² or greater (approximately 100 pounds overweight)

• Patients with BMI > 35 kg/m² who also suffer from medical conditions related to obesity:
  • Sleep Apnea
  • Diabetes
  • High Blood Pressure
  • Joint Disease
Who Is Not Eligible for Surgery?

• Patients with an on-going substance abuse, eating disorder, or major psychiatric problem which is untreated and/or unresolved.

• Patients who are too ill or too high risk for surgery
  • For example: significant heart, lung, kidney disease.
Bariatric Surgery is now commonly performed

Bariatric operations performed in the North America (1992-2007)
Surgical Options at the Palo Alto VA

1. Gastric Bypass

2. Sleeve Gastrectomy
1. Gastric Bypass

1) Create a small stomach pouch by dividing the stomach
2) Pouch fills with small amount of food
3) Rearrange intestines to allow path for food to flow
4) Re-routed intestine bypasses the stomach and leads to a mild degree of malabsorption of fats and other nutrients.
1. Gastric Bypass

- Esophagus (food comes down from mouth)
- Small Stomach Pouch (food enters here, fills pouch, and follows path of purple arrow)
- Divided Stomach
- Rearranged Intestine
- Bypassed Stomach (no food will pass through here)

http://www.harleystreetbariatrics.com/wp-content/uploads/2013/02/Gastric-Bypass.jpg
Benefits of Gastric Bypass

• Very effective in obtaining and maintaining long-term weight loss:
  >20% total weight loss after 10 years

• Improvement or remission of obesity-related medical conditions:
  • Improved or resolved diabetes in >80% of patients

• Improved quality of life
Potential Complications of Gastric Bypass

- Anastomotic leak (0.3-2%) – (Leakage from one of the new connections)
- Staple-line leak (0-3%)
- Nutritional deficiency (6.2%) – (ex. Calcium, Folate, Vitamin B12, Iron)
- Gastrogastric fistula (0.25%)
- Marginal ulcers (4.1%)
- Internal hernia (0.2-4%)
- Wound Infection: Laparoscopic (3%) Open (10%)
- Deep Vein Thrombosis (0.05%) - (Blood clot in vein of the leg)
- Pulmonary embolism (0.21%) – (Blood clot in heart and lungs)
- Respiratory complications (0.39%) – (for example, pneumonia)
2. Sleeve Gastrectomy

1) Divide the stomach to create a long, sleeve-like pouch that fills quickly with food.
2) Remove the excess stomach from the body.
3) Food enters and exits stomach as it did before (intestines not rearranged).
2. Sleeve Gastrectomy

Long, thin Gastric “Sleeve” fills quickly with food.

Food enters and exits stomach as before.

Divided Stomach

This portion of the stomach is removed.
Benefits of Sleeve Gastrectomy

• Effective in obtaining and maintaining long-term weight loss:
  • Up to 20% total weight loss after 5 years

• Improvement or remission of obesity-related medical conditions:
  • Improved or resolved diabetes in >80% of patient
Potential Complications of Sleeve Gastrectomy

- Staple-line leak (1-5%)
- Wound Infection: Laparoscopic (3%) Open (10%)
- Deep Vein Thrombosis (0.05%) - (Blood clot in vein of the leg)
- Pulmonary embolism (0.21%) – (Blood clot in heart and lungs)
- Respiratory complications (0.39%) — (for example, pneumonia)
Weight loss surgery

All these operations are preferentially performed “laparoscopically”

- Smaller Incisions, Less Pain
- Quicker recovery period
- Earlier return to normal activities
- Better cosmetic outcome
“Open” or Traditional Surgery

A 10- to 15-inch incision is made so that the surgeon can place his/her hands and instruments into the abdomen to complete the surgery.
“Laparoscopic” Surgery

5 to 6 0.25-0.5 inch incisions are made to allow the surgeon to place a camera and instruments into the abdomen to perform the surgical procedure.
What you can expect...

• Preoperative Evaluation:
  Medical
  • Medical readiness for surgery needs

Behavioral Medicine
  • Certain behavioral/lifestyle/psychological perceptions and practices are not conducive to a good outcome with surgery.
    – Psychological evaluation

Surgical
  • Attain clear understanding of risks and benefits of the procedure
Initial Post-Surgery Diet

• If you are recovering well after surgery, you will start liquids by mouth on the first or second day after surgery.

Start with 1 oz. of water every hour

(If nausea, hold for one hour, then try again)
Initial Post-Surgery Diet

If water is tolerated well...

• Meals = 2 oz. of nutritional supplement at each meal
  – High protein Jello for snacks

• Supplement with plenty of fluids.

• Chewable multivitamin
2 Weeks After Surgery

• You will see us in Surgery Clinic to ensure that you are doing well
• You will start new solid food diet

• We will reinforce health dietary habits and encourage a regular exercise routine.... for the rest of your life!
2 Months After Surgery

See the entire Team at the MOVE TIME clinic
Take Home Message...

• Surgery is the most successful method for significant, long-lasting weight loss, and improvement of associated medical conditions.

• Surgery is a tool and to be used as an initial step for life-long change.
Bariatric Surgery at the Palo Alto VA

We look forward to meeting you and discussing weight loss surgery further!