

Laparoscopic Obesity Surgery

The problem

Obesity is a common and increasing problem in many countries including the UK. As well as the obvious cosmetic problem patients carrying a large amount of excess weight are susceptible to a large number of disease processes including: hypertension (high blood pressure), diabetes, heart disease, hypercholesterolaemia (high blood cholesterol), sleep apnoea and arthritis as well as some cancers.

We use a measure known as the BMI to define how overweight a person is. This is defined from the formula (weight in kilograms) divided by (height in metres squared). Thus a patient who weighs 100 Kg and stands 1.5 metres tall would have a BMI of $100/1.5^2 = 44$. A person with a healthy weight would have a BMI in the range of 18-25. We can further define obesity as:

BM! > 30 Obese
BM! >40 Morbidly obese

Obesity occurs primarily because the number of calories taken in by eating exceeds the number of calories expended by exercise. The obvious answer to the problem is to eat less and exercise more. This however is for many easier said than done. Dieting can provide dramatic results but weight is often regained after a time. Medical treatment is available but only tends to produce modest weight loss and again many patients put the excess weight back on again once treatment is stopped.

Surgery for Obesity

Surgery can be an effective way of losing weight and maintaining weight loss. There are two main types of operation. The first type (restrictive surgery) has the effect of reducing the size of the stomach so that the patient feels full after a relatively small amount of food. The second type of surgery (malabsorption surgery) has the effect of bypassing part of the small bowel so that there is a reduction in the amount of food, and therefore calories, that is absorbed by the body. Some operations combine both types of surgery.

The most commonly performed operations are **gastric banding, gastric Bypass and Sleeve Gastrectomy**. These operations can all be performed using laparoscopic (keyhole) surgery.

Gastric banding

In this operation an adjustable silicone band is placed around the upper stomach to create a small stomach pouch. This fills rapidly during a meal and produces a feeling of fullness. The food passes slowly into the main part of the stomach and is then absorbed normally by the body. The operation is potentially reversible though the band would always be put in place with a view to it being there permanently. There are dietary restrictions after the operation and your surgeon and nutritionist will explain these to you. You will also be given written

information to help you in the post operative period and beyond. The gastric band will need to be adjusted once or twice in the months following surgery to achieve maximum weight loss. If you stick to the dietary measures you can expect to lose up to around 2/3rds of your excess pre-operative weight.

Gastric bypass and Sleeve Gastrectomy

In these operations the stomach is divided to make a small pouch (bypass) or a large portion is removed (sleeve). These are more major procedures than gastric banding but are equally effective at producing weight loss. They are not reversible in the future and they carry a higher complication and mortality rate.

Frequently asked questions

Am I suitable for obesity surgery?

Guidance from the National Institute for Clinical Excellence (NICE) is that the following patients can be considered for obesity surgery:

Age > 18 years and fit for an operation BMI > 40, or BMI >35 with co-morbidity (e.g. diabetes) Non surgical means of weight loss must have been tried and failed

Which operation is best for me?

This is a question best discussed with your surgeon. In general patients with lower BMIs are more suitable for gastric banding while those with BMIs of >50 may be more suitable for a gastric bypass or sleeve gastrectomy.

Are there any complications?

As with all operations things can go wrong. Your surgeon will discuss with you complications specific to the operation you are having prior to your surgery, and will give you written information.

Will my health insurance cover the cost?

It is very unlikely that your health insurer will agree to paying for the cost of your surgery and the vast majority of patients have to fund their own treatment. It may be possible to have the surgery under the NHS but this is not readily available in many areas at present.

What else do I need to know?

Obesity surgery is not to be undertaken lightly. It involves a major operation with detailed pre-operative work up and long term follow up after the surgery. If you want to have a successful result you will have to markedly alter your lifestyle and in particular your eating habits.

Where can I get more information?

You can get more information by visiting www.keyholesurgery.net