

# Bariatric Surgery Information Sheet

## NHS weight loss surgery

Weight loss surgery is available on the NHS for people who meet certain criteria. These include:

- You have a body mass index (BMI) of 40 or more, or a BMI between 35 and 40 and an obesity-related condition that might improve if you lost weight (such as type 2 diabetes or high blood pressure)
- You've tried all other weight loss methods, such as dieting and exercise, but have struggled to lose a clinically significant amount of weight or keep it off
- You agree to long-term follow-up after surgery – such as making healthy lifestyle changes, attending regular check-ups, regular blood tests and lifelong multivitamins.

## Types of weight loss surgery

There are several types of weight loss surgery. In brief the most common types are:

- Gastric band – a band is placed around the stomach, so you don't need to eat as much to feel full. (This type of surgery is rarely used with our patients as the weight lost is not usually enough)
- Gastric bypass – The stomach size is reduced to around the size of an egg, part of the intestine is then cut and re-joined to this pouch. You feel fuller much sooner and don't absorb as many calories from food
- 'Mini' Bypass – As above, however the intestines are not cut completely before they are joined to the stomach pouch
- Sleeve gastrectomy – Around 2/3 of the stomach is removed, so you can't eat as much as you could before meaning you feel full, sooner.

All these operations can lead to significant weight loss within a few years, but each has advantages and disadvantages. If you're considering weight loss surgery, the surgeon will advise about the different types available and decide which is best for you.

## Life after weight loss surgery

Weight loss surgery can achieve dramatic weight loss, but it's not a cure for obesity on its own. You'll need to commit to making permanent lifestyle changes after surgery to avoid putting weight back on.

You'll need to:

- Change your diet – you'll be on a liquid or soft food diet in the weeks after surgery, but will gradually move onto a normal balanced diet that you need to stay on for life
- Exercise regularly – once you've recovered from surgery, you'll be advised to start a regular exercise plan and continue it for life (this can also help to reduce loose skin)
- Attend regular follow-up appointments to check how things are going after surgery and get advice or support if you need it

Women who have weight loss surgery will also usually need to avoid becoming pregnant during the first 12 to 18 months after surgery. Fertility can improve with significant weight loss and therefore contraception is important in preventing un-planned pregnancies.

## Risks of weight loss surgery

Weight loss surgery carries a risk of complications, some of which can be serious.

Before having surgery, speak to your surgeon about the possible benefits and risks of the procedure.

**Blood clots** - You'll have treatment to reduce your risk of blood clots after surgery, such as special leg stockings or blood-thinning medicine, but they can sometimes still occur. Common places for clots to develop are in the lower leg (deep vein thrombosis) or lungs (pulmonary embolism).

**Wound infection**- Sometimes the wounds from your surgery can become infected while they're healing.

**Gastric band slipping out of place** - If you have gastric band surgery there's a risk that the band could move out of position, this would then require revisional surgery or removal.

**Leak in the gut** - In the days or weeks after a gastric bypass or sleeve gastrectomy, there's a small chance that food could leak out into your tummy. This can cause a serious infection inside your tummy.

**Blocked gut** - Sometimes the stomach or small intestine can become narrower or blocked after weight loss surgery. This can have a number of causes, including food getting stuck, scar tissue in your gut and your gut becoming kinked or twisted.

**Malnutrition** - Weight loss surgery can make it harder for your gut to absorb vitamins and minerals from food, so there's a risk you could become malnourished.

**Gallstones** - It's common to develop gallstones in the first year or two after weight loss surgery. These are small, hard stones in the gallbladder that can form if you lose weight quickly.

**Excess skin** - As you lose weight after surgery, you may be left with excess folds and rolls of skin, particularly around your breasts, tummy, hips and limbs. Surgery, such as a tummy tuck, can be carried out to remove the excess skin; however, this is generally considered cosmetic surgery so isn't available on the NHS.

**Risk of dying** - Weight loss surgery is a major operation and there is a chance of dying during the procedure or as a result of a serious complication afterwards. But this is very rare. Recent statistics suggest that only around 1 in 1,400 people who have weight loss surgery in the UK die within a month of the operation.

## How Should I prepare for Surgery

- Stop Smoking
- Eat well education course
- Inside Out course
- 1 to 1 dietetic reviews
- Surgical orientation
- Psychological review
- Multi-disciplinary discussion
- 12 months minimum engagement
- Lifestyle changes – NOW
- Portion control
- Mindful eating
- Eating regular meals
- Avoid drinking with meals
- Avoid weight gain

## External Links

Weight Loss Surgery Information: <http://www.wlsinfo.org.uk/>

British Obesity Surgery Patient Association <http://www.bospa.org/Default.html>