

ABOUT OBESITY

Obesity is an excess of total body fat. Medically speaking, a person is morbidly obese when he or she is so heavy that their fat tissue load creates damage to their health. The excess fat creating the health problem results from an intake of calories that exceeds the number of calories their body needs for the amount of physical activity they undertake. For more detailed information on the causes of obesity please refer to our website. www.southernobesitysurgery.co.nz

Obesity is emerging as a health epidemic around the world and is particularly a problem in western countries. Obesity affects people across all demographic groups and has significant health and social implications. Obesity brings with it very serious health issues that lower life expectancy. Morbidly obese men between the ages of 25-35, for example, have a 12 fold greater risk of dying prematurely compared to their normal weight counterparts. As an obese individual you can expect to experience an increased risk of diabetes, cardiac disease, high blood pressure, stroke, depression, joint problems and joint disease, cancer, asthma and breathing difficulties, and reduced life expectancy. For more information on the risks associated with obesity see [Obesity Consequences](#) on our website.

Weight loss Surgery (WLS) as a treatment for obesity is usually considered appropriate if the risk of the excess weight is greater than the risk of surgery.

For patients with a BMI > 35, it is usually fair to think of the excess weight as the actual underlying cause for most of the medical conditions outlined above. Surgical treatment of the obesity in such cases goes after the root of the problem.

AM I OVERWEIGHT?

Your bathroom scale may give you a measure of your weight and help you follow changes in your weight, but it is not the best way to determine if you are overweight or obese, or at risk of developing obesity and its related health conditions. A measurement used to assess health risks of obesity is Body Mass Index (BMI).

BMI levels can be broken down as follows:

BMI of 20-25: "ideal weight" People who fall naturally into

this range tend to have the best lifelong health.
BMI > 30: Excess weight creates medical problems.
BMI > 35-40: WLS is likely to improve health, if the person is experiencing weight related problems.
BMI > 40: The risk/benefit ratio favors surgical therapy in most people who suffer from this level of obesity.
BMI > 60: The excess weight puts so much load on the body that there is a significant increase in the risk of surgery. At the same time the risk of surgery is higher, the risk of the medical problems caused by obesity is much higher, so the risk/benefit ratio of surgery usually still weighs in favor of surgery.

You can calculate your BMI by dividing your weight in kilograms by your height in meters squared. For example if you weighed 100 kg and were 1.5 meters tall your BMI would be 100 divided by 2.25 which is 44. Alternatively use our BMI calculator on our website.

WHAT IS GASTRIC BANDING SURGERY

This laparoscopic operation places a soft, inflatable band around the upper portion of the stomach which creates a small upper pouch and a larger lower portion of the stomach. The band is inflated with liquid (saline) so there is only a small passage between the two pouches and this restricts the amount that can be eaten at each meal. The band makes you feel full after eating even a small amount of food and this reduces food intake to entrée size portions causing weight loss. This band can be adjusted through a port which sits beneath the skin on the abdominal wall so it can be tightened or loosened according to the patient's wishes.

The procedure is performed under general anesthesia. You will be admitted on the day of surgery and generally be required to spend two nights in hospital during recovery.

As there are no large incisions trauma and recovery time is minimised.

For detailed information please refer to the relevant pages of our website.

BENEFITS OF GASTRIC BAND PROCEDURE

Minimally Invasive

Our surgeons use laparoscopic techniques (using small incisions and long-shafted instruments), to effect the gastric band positioning. There is no cutting, stapling or stomach re-routing involved in the procedure, making it the least traumatic of all weight loss surgeries. The laparoscopic approach to the WLS also offers the benefits to the patient of reduced post-operative pain, shortened hospital stay and a quicker recovery.

Adjustable & Reversible

As apposed to other types of weight loss surgery the gastric band system is adjustable and can be easily reset after surgery to meet changing patient requirements. The diameter of the band is adjustable for a customised weight-loss rate. Your individual needs can change as you lose weight. For example, pregnant patients can expand their band to accommodate a growing fetus, while patients who aren't experiencing significant weight loss can have their bands tightened.

Also, if for any reason the gastric needs to be removed, the stomach will generally return to its original form.

WEIGHT LOSS

Weight-loss will vary from patient to patient, and the amount of weight you may lose will depends on several things. The band needs to be in the right position, and you need to be committed to your new lifestyle and changed eating habits. Obesity surgery on its own does not constitute a cure, and the weight won't come off on its own.

Most of the achievable weight loss will take place in the first two years post surgery. The operation is considered a successful when you lose two thirds, or greater, of your excess weight over this two year period. Excess body weight is the amount of weight that is carried above what is regarded normal and healthy for that person. A reasonable weight loss expectation is to lose 1kg per week.

POSSIBLE COMPLICATIONS AND SIDE EFFECTS?

Laparoscopic gastric banding is the safest operation currently available for control of obesity but complications can still occur particularly as patients who require the surgery usually have an increased risk due to co-existing diseases. Being male, unfit and having a very high BMI will increase your risk.

General complications include:

- Deep vein thrombosis/clots
- Heart problems (eg heart attack)
- Stroke
- Breathing complications
- Wound infections
- Bleeding/Brusing

Specific Complications of Gastric Banding:

- Band Slippage causing obstruction and vomiting
- Port problems e.g. rotation, displacement, tubing leaks.
- Infection requiring further treatment.
- Erosion of the band into the stomach requiring removal.
- Injury to bowel, stomach or other intra-abdominal organs.

Side effects:

Vomiting if excess food is eaten

