

Editorial on Surgical Weight loss

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Editorial

Weight loss surgery or Bariatric surgery is recommended based on the individual's body mass index (BMI). BMI is a formula that uses weight and height to estimate body fat.

Weight-loss surgery might be an option for an adult/adolescent with BMI ≥ 40 , with at least when one obesity-related medical condition and when other weight-reduction strategies, such as diet management, exercise etc., has failed.

Depending on the type or severity of an obesity-related illness, some adults or adolescents with lower BMIs may be able to undergo weight-loss surgery. It is a surgical procedure of the digestive system to promote weight-loss in people with severe obesity.

How the procedure works?

Bariatric surgery influences the anatomy and hormones of the stomach and digestive system. These changes reduce hunger, emotional eating, and increase satiety, thus regularize food intake and promote fat burning. Over a period of time, the physiological changes related to energy balance and fat metabolism occurs, which in turn helps to achieve desired body weight.

Thus, contrary to dietary weight loss which is usually short living and reversible, surgical weight loss offers long-lasting weight loss, improved coexisting diseases, better quality of life, improved self-esteem and psychosocial status. Most of the bariatric surgeries are done using minimal invasive techniques such as laparoscopy.

Risks:

As with any major procedure, bariatric surgery poses potential health risks, such as:

- Leaks in your gastrointestinal system
- Bowel obstruction
- Dumping syndrome
- Nausea or Vomiting
- Gallstones
- Hypoglycemia
- Malnutrition
- Ulcers
- Acid reflux

- Need for a second, or revision, surgery procedure (rarely).

Types of Bariatric surgeries:

Laparoscopic Adjustable Gastric banding: A soft band is placed at the upper part of the stomach, which reduces the amount of food consumed at one time and provides a feeling of fullness for a longer time. Hence there is weight loss.

Laparoscopic sleeve gastrectomy: About two-thirds of the stomach is removed laparoscopically and this makes the stomach look like a tube. The part of the stomach that produces Ghrelin hormone (which stimulates appetite and promotes fat deposition in body) is removed.

Gastric bypass: Size of the stomach is reduced and a part of small intestine is bypassed so that digestion process is altered and less food is consumed and absorbed.

Gastric balloon: A balloon is placed inside the stomach to promote early satisfaction.

Weight-loss after surgery: Various factors influences weight loss after surgery. However, the average weight-loss generally observed are:

- LAGB: 15-20% after six months
- Gastric Sleeve: 60-65% in two years
- Gastric Balloon: 25-33% after six months
- Gastric Bypass: 70-75% in the first year

Post-surgery Diet:

After a few hours of surgery, only clear liquid is given. This is followed by pureed food for few weeks and then small, tender and easily chewable pieces. After eight weeks of surgery, firmer food can be started. Normal diet may be followed after about four months of surgery.

Throughout the diet, one should eat and drink slowly, keep meals small and chew thoroughly.

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