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Surgery for Obesity

- Can be effective in weight loss, but should be reserved for the morbidly obese, with a BMI (body mass index) above 40 (about 100 pounds overweight)
- There are two ways surgery works, bypassing part of the bowel so less food is absorbed, or restricting the amount of food that can be eaten. These two techniques are often used together
- VBG or Vertical Banded Gastroplasty is a restrictive procedure in which a 1 or 2 ounce pocket is made in the stomach. It may fail if the opening of the pouch stretches open. Failure rate is 20%. Sweet eaters are likely to fail
- Gastric banding is similar to VBG but a plastic ring is used to create a small pouch in the stomach
- Gastric bypass may cause diarrhea if excessive amounts of food are eaten. Failure rate is around 5%
- Complications include death (less than 1%), complications of surgery (up to 15%), diarrhea, more frequent stools, and protein, vitamin and mineral deficiencies
- Folate and vitamin B12 supplements should be taken after surgery to avoid deficiencies
- Quality of life can improve dramatically for the morbidly obese after surgery in the areas of work, interpersonal relationships, mobility, and activities of daily life