

Northwestern Medicine Weight Management

Program for Bariatric Surgery



Surgical options

If obesity is putting your health at risk with complications such as diabetes, hypertension or sleep apnea, and lifestyle changes have not helped, surgery may be an option for you. Northwestern Medicine offers a wide variety of surgical procedures to help you lose weight.

While it is a very effective weight loss tool, surgery alone does not guarantee success. You also must make a lifetime commitment to new behaviors, including a new way of eating. To help you make these changes, we offer an after-care program that provides the guidance and support you need to live healthier and make your weight loss permanent.

Is surgery right for you?

If you decide to consider surgery, you will receive a thorough medical, psychological, behavioral and dietary evaluation. Here are some of the factors we may consider to determine if surgery is right for you:

- Body mass index (BMI) of at least 40 (about 80 pounds overweight for women or 100 pounds overweight for men)
- BMI of 35 with additional significant medical problems related to being overweight
- A history of failed weight loss attempts, which may include diet, exercise and medications



Setting realistic expectations

Clinically morbid obesity is a chronic condition that can be difficult to treat. People with severe obesity have higher rates of health problems, so they have more need for weight loss. That means they may want to consider more intensive treatment options, such as bariatric surgery, to lose weight.

Surgery can cause weight loss by restricting the amount of food you eat or interrupting your digestive processes. The goal of bariatric surgery is to achieve and maintain a weight loss of more than half your excess body weight. This can ultimately improve and/or resolve several medical conditions associated with obesity. In addition, significant weight loss maintained over a period of time may reduce your risk of developing these health problems later in life.

Important considerations to keep in mind:

Weight loss surgery is not cosmetic surgery.

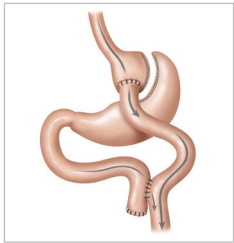
Weight loss surgery is only an option if other weight loss methods have not been successful. You must try and document these other methods before you can pursue surgery. Some insurance companies will request that you complete a medically supervised weight loss program for a specific period of time before they will cover bariatric surgery.

Weight loss surgery is meant to be permanent. You will need to make lifestyle changes for the rest of your life.

Weight loss surgery is only the beginning. You must commit to making good food choices and being more active after surgery. Otherwise, you will not reach your weight loss goals.

Weight loss takes time. You will not reach a healthy weight immediately. You will lose most of the weight steadily over the first year and a half after surgery.

Weight loss surgery is a tool to help you lose weight. Exercise, proper nutrition, and attending support groups and workshops will dramatically improve your chances of losing more weight and reaching your goal.



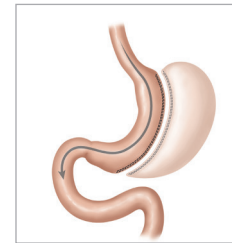
Roux-en-Y gastric bypass surgery

Roux-en-Y gastric bypass helps patients lose weight by restricting the amount of food eaten and reducing the number of calories the body absorbs.

During the procedure, which often can be performed through tiny incisions (laparoscopically), the surgeon makes the stomach smaller. They create a small pouch at the top of it using surgical staples. They connect the smaller stomach directly to the middle portion of the small intestine. This bypasses the rest of the stomach and the upper part of the small intestine.

In the first 12 to 18 months after surgery, patients typically lose 60% to 80% of their excess body weight.

Roux-en-Y surgery is a very effective and established procedure with long-term weight loss and remission of obesity-related conditions. However, there is a slight risk of developing ulcers and dumping syndrome (a feeling of sickness after eating or drinking.) There is also slightly more vitamin and mineral deficiencies seen following Roux-en-Y.



Sleeve gastrectomy

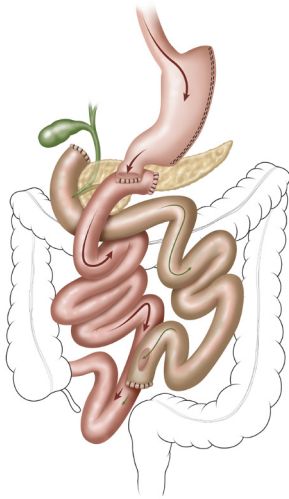
Sleeve gastrectomy helps patients lose weight by reducing the amount of food they can eat. The procedure, which makes the stomach smaller, has helped many patients lose weight and improve their health. It can also be an effective first step for patients with severe obesity.

During the procedure, the surgeon reduces the stomach to a thin vertical sleeve. The sleeve holds between 50 and 150 milliliters (about the size of a banana). They remove part of the stomach and staple the remaining sleeve together. The procedure is permanent.

Sleeve gastrectomy does not affect digestion or how much nutrition is received from food. Food passes through the digestive tract just as it did before, so your body can fully absorb it.

On average, patients lose 50% to 65% of their excess weight.

Although sleeve gastrectomy is an extremely effective weight loss procedure, it is non-reversible. It may also worsen or cause reflux and heartburn. For those with reflux issues, alternative procedures may want to be considered.

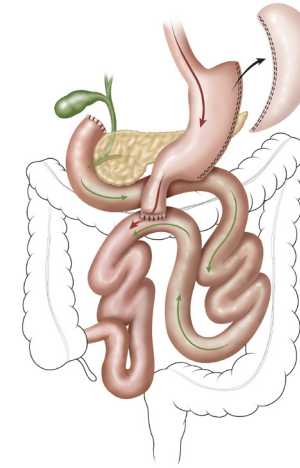


Biliopancreatic diversion and duodenal switch

Biliopancreatic diversion and duodenal switch (DS)

This procedure is more effective in achieving excellent weight loss in people with extreme obesity. However, it has a higher rate of malnutrition, which is very rare for those who undergo gastric bypass.

In the DS, about 2/3 of the stomach is removed. The small intestines are arranged so the section where the food mixes with the digestive juices is fairly short. All segments of the small intestine remain functional.



Single anastomosis duodenal switch

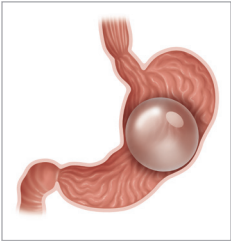
Single anastomosis duodenal switch

The single anastomosis duodenal switch is similar to the biliopancreatic diversion, but involves only one surgical bowel connection.

The surgery begins the same way as the sleeve gastrectomy. The surgeon makes the stomach into a smaller, tube-shaped pouch. They then divide the first section of the small intestine just after the stomach. They connect a loop of intestine near the end to the stomach. This is the only place the surgeon connects the stomach to the intestine.

When the patient eats, food goes through the pouch and directly into the latter part of the intestine. This allows your body to absorb just enough vitamins and minerals to maintain healthy nutrition. This surgery is recommended for weight loss, blood sugar control and diabetes management.

Like with the duodenal switch, there is a higher rate of malnutrition with this procedure. There is also the potential to worsen or develop reflux.



The Orbera system

The Orbera system involves a weight loss procedure and a 12-month diet and exercise program. Patients work with a dietitian and exercise specialist. Orbera is intended for patients with a BMI between 30 and 40 who have struggled with weight loss.

The surgeon places a deflated balloon in the stomach using an endoscope. Then, they fill the balloon with saline. The balloon takes up space in the stomach to help the patient feel full. There are no incisions and no scars. The balloon is temporary. It remains in place for 6 months, during which time the patient works with a weight loss team.

After the removal of the balloon, the patient works with the weight loss team for another 6 months to help establish a new, healthier lifestyle.

On average, patients lose 3 times more weight with the Orbera system than with diet and exercise alone. As with other weight loss procedures, patients must commit to permanent lifestyle changes for long-term weight loss.

At Northwestern Medicine you have access to comprehensive surgical weight loss programs that address the whole person, combining surgery with behavior-based counseling, nutritional counseling and exercise support to maximize your results.

For more information or to schedule an appointment, call the Northwestern Medicine location of your choice.

Northwestern Memorial Hospital
Northwestern Medicine Digestive Health Center
Weight Loss Surgery Program
312.695.5620

In the Western Suburbs
Northwestern Medicine Bariatric Surgery and
Metabolic Health Program at Delnor Hospital
300 Randall Road
Geneva, Illinois 60134
630.938.8266

Northwestern Medicine Bariatric Surgery and
Metabolic Health Program at Central DuPage Hospital
25 Winfield Road
Winfield, Illinois 60190
630.933.6745

In the Northwest Suburbs
Northwestern Medicine Medical and Surgical Weight Loss
Center at Huntley Hospital
10350 Haligus Road, Suite 220
Huntley, Illinois 60142
847.802.7230