Is Weight Loss Surgery Right For You?

When enough weight is not lost through diet, exercise, or medication, bariatric surgery may be an option.

- Weight loss surgery makes your stomach smaller and changes hormones that make you feel hungry.
- Most people who have bariatric surgery will feel full soon after beginning to eat a meal and will eat less, leading to weight loss.
- You must follow eating recommendations before and after the surgery. If you don’t make changes in your eating and activity, you could regain weight.

How much weight can I lose?

Bariatric surgery is very effective in helping people lose up to 20% to 30% of their weight. For example, if you weigh 300 pounds, this would mean losing 60 to 90 pounds. Losing this much weight will improve control of type 2 diabetes, lower blood pressure, decrease joint pain, and improve quality of life and life expectancy.

What are the different kinds of weight loss surgery?

The type of surgery a patient has is based on their level of obesity, surgeon's recommendation, and patient preference. It is also based on whether you have health conditions like diabetes, heart disease, or acid reflux. All types are performed laparoscopically without a large incision. This reduces the recovery time after surgery.

If you decide to have surgery, you need to understand the risks, benefits, and side effects of each type and make a decision that is right for you.

Gastric Bypass (20%–30% weight loss): This surgery divides the stomach into two parts. The smaller portion is 1 ounce in size and it is connected to the small intestine 2 feet below the stomach. A larger portion is reconnected further down. Dumping syndrome [when food, especially sugar, moves from your stomach into your small bowel too fast] is a rare complication of gastric bypass and may occur with diets high in simple carbohydrates.

Gastric Sleeve (20%–25% weight loss): This surgery removes 75%–85% of the stomach. The new stomach looks like a narrow shirt sleeve. There is no bypass and digestion occurs normally.

Gastric Banding (10%–15% weight loss): An adjustable band placed around the upper stomach creates a small stomach pouch. The pressure on the band can be adjusted by a port placed under the skin. This procedure is rarely performed because of modest initial weight loss and weight regain.

Duodenal Switch (30%–40% weight loss): A large portion of the stomach is removed, and the upper portion of the intestine is bypassed. The bypassed portion of the intestine is reconnected below. This surgery is rarely performed because of the severity of complications.

Does insurance pay for this surgery?

- Many insurance plans do pay for bariatric surgery. To be eligible, you must have a body mass index (or BMI) more than 40. BMI can be calculated from your height and weight using online calculators.
- If you have medical problems such as high blood pressure, diabetes, fatty liver disease, arthritis, or sleep apnea, you may be eligible with a BMI more than 35.

What about adolescents?

Teens who have finished growing may be candidates for surgery. They need to be treated in health centers that specialize in younger patients.

What do you need to do before having this surgery?

- You must also have a psychological evaluation by a mental health specialist. They will look for risk of substance abuse, depression, suicide, and problems following instructions. These problems may increase after surgery and lead to surgery failure and complications.

For more information, visit this link at the National Institutes of Health: https://www.niddk.nih.gov/health-information/weight-management/bariatric-surgery

Srividea Kidambi, Department of Medicine, Medical College of Wisconsin, Milwaukee, Wisconsin, USA; Thomas Inge, Division of Pediatric Surgery, Children’s Hospital Colorado and University of Colorado, Denver, USA; Elizabeth Parks Pitt, Division of Gastroenterology, Hepatology, and Nutrition, Children’s Hospital of Philadelphia, Philadelphia, Pennsylvania, USA.

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