

# Considering Bariatric Surgery?

Learn about minimally invasive  
*da Vinci*® Surgery

## The Condition:

### Obesity

Obesity is defined as having a body mass index (BMI) of 30 or greater. Obesity is a serious medical condition that can have a negative effect on your health.

Obesity rates have more than doubled since 1980 with nearly 500 million adults worldwide considered obese. In the United States alone, obesity affects nearly 65% of adults and is the second leading cause of preventable death.

Obesity often leads to other serious health problems such as heart disease, stroke, cancer, arthritis, high blood pressure, sleep apnea and diabetes – conditions that can cause early death or disabilities. The good news is even modest weight loss can reduce your risk for these diseases or outcomes.

### BMI Categories

Normal	18.5–24.9
Overweight	25.0–29.9
Obesity	30.0–39.9
Extreme Obesity	40.0+

If you don't know your BMI, there are many simple online calculators available, including one at the National Institutes of Health website:

[http://www.nhlbi.nih.gov/health/educational/lose\\_wt/BMI/bmicalc.htm](http://www.nhlbi.nih.gov/health/educational/lose_wt/BMI/bmicalc.htm)

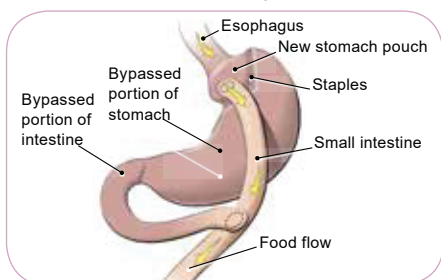
# The Surgery:

## Bariatric Surgery

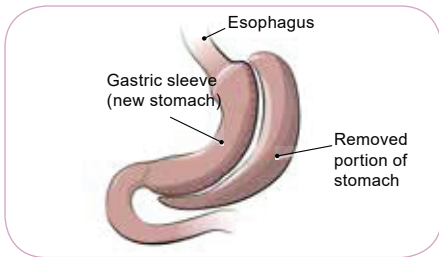
While there are many non-surgical treatments for obesity such as dieting, exercise, and medication, bariatric surgery may also be recommended for people who are morbidly obese (40+ BMI). Surgery may be recommended to patients who are committed to following a healthy diet and exercise plan after recovering from surgery. The most common bariatric procedures are Roux-en-Y gastric bypass and gastric sleeve surgery; gastric banding is sometimes used.

Gastric bypass permanently reduces your stomach size and reroutes your digestive tract. During this procedure, your surgeon divides your stomach to create a new, smaller stomach. The new stomach is connected to the small intestine and bypasses the larger part of your original stomach. Your new stomach is now much smaller — as is the amount of food it can hold.

### Gastric Bypass



## Gastric Sleeve Surgery



During gastric sleeve surgery, also known as sleeve gastrectomy, the majority of your stomach is removed. As with gastric bypass, the smaller, sleeve-shaped stomach that remains is sealed and holds only smaller amounts of food.

Gastric band surgery reduces your stomach size using an adjustable band wrapped around the stomach. Some patients like the idea that lap banding is reversible, but removing the band requires a second operation.

Bariatric surgery is often performed using minimally invasive surgery. Minimally invasive surgery (laparoscopy) is done through a few small incisions using long, thin surgical instruments and a tiny camera. The camera takes images inside your body. The images are sent to a video monitor in the operating room which guides surgeons as they operate.



**da Vinci** Surgery/Laparoscopy Incisions

## ***da Vinci* Surgery:**

### A Minimally Invasive Surgical Option

State-of-the-art *da Vinci* Surgery is another minimally invasive surgical option for patients considering bariatric surgery. The *da Vinci* System features a magnified 3D high-definition vision system and special wristed instruments that bend and rotate far greater than the human wrist. *da Vinci* enables your doctor to operate with enhanced vision, precision, and control.

As a result of *da Vinci* technology, *da Vinci* Bariatric Surgery offers the following potential benefits compared to traditional laparoscopy:

- › Lower rate of gastrointestinal leaks
- › Lower risk of converting to open surgery
- › Shorter hospital stay
- › Lower risk of needing follow-up surgery

Additional potential benefits of *da Vinci* Surgery include:

- › Low rate of complications
- › Short hospital stay
- › Reduced surgeon fatigue (due to the *da Vinci* System ergonomics)

#### **Risks & Considerations Related to Bariatric Surgery for Morbid Obesity includes:**

gastric bypass (stomach reduction surgery), sleeve gastrectomy and duodenal switch: leaking and/or narrowing at the spot where two parts of the bowel were reconnected, leaking from where the bowel is cut, malnutrition, dumping syndrome (food moves too quickly into small intestine), dehydration, need for supplementation of vitamins, minerals and protein.

Additionally, morbidly obese patients are typically not candidates for *da Vinci* Surgery.