

MB04lite Laparoscopic Sleeve Gastrectomy

Expires end of December 2019

A more detailed version of this procedure specific information sheet is available. Please ask your health practitioner at Joondalup Health Campus for a copy.

Write questions or notes here:



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This document will give you information about a sleeve gastrectomy. If you have any questions, you should ask your GP or other relevant health professional.

What is a sleeve gastrectomy?

A sleeve gastrectomy involves reducing the size of your stomach to a short tube shape (see figure 1). It works by making you feel full sooner so that you eat less.

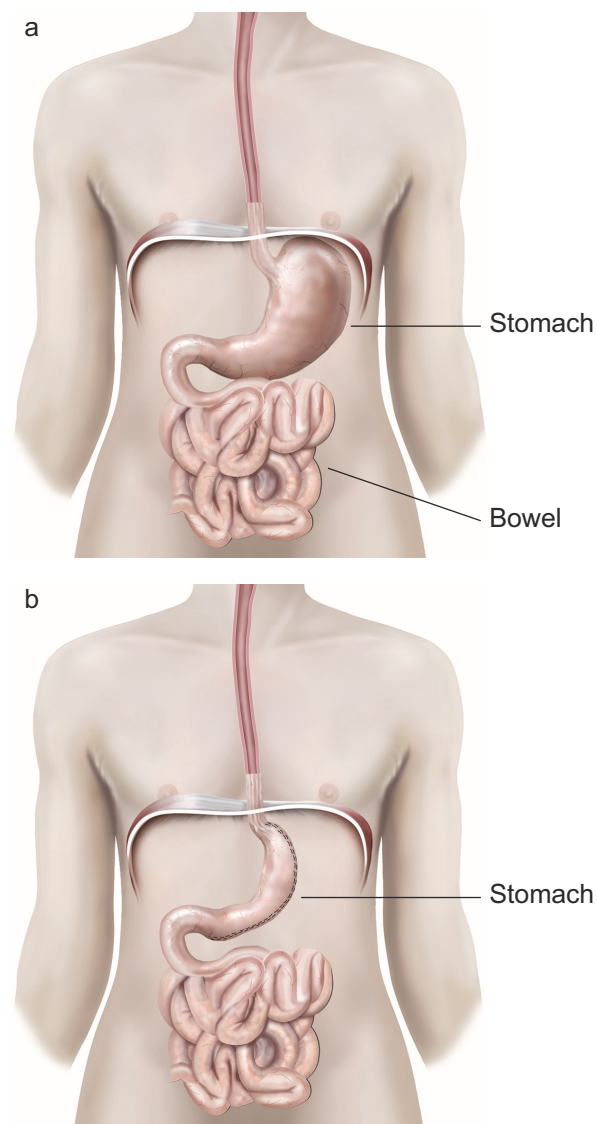


Figure 1

a Before a sleeve gastrectomy

b After a sleeve gastrectomy

Is a sleeve gastrectomy suitable for me?

If your BMI score is over 40, surgery may help you to achieve long-term weight loss. Surgery may also help if you have a BMI over 35 and have other medical problems such as Type-2 diabetes, or high blood pressure.

Your surgeon will confirm your BMI score and carry out a detailed assessment before deciding if surgery is suitable for you.

What are the benefits of a sleeve gastrectomy?

You should be able to achieve long-term weight loss, but this depends on your ability to keep to your new lifestyle.

Long-term weight loss should improve most obesity-related health problems you may have.

Are there any alternatives to a sleeve gastrectomy?

The simple approach to losing weight involves eating less, improving your diet and doing more exercise. Sometimes medication given by your GP can help.

There are other surgical options to a sleeve gastrectomy, such as gastric banding, shortening your digestive tract and a gastric bypass.

It may be possible to have a gastric balloon, but a gastric balloon can stay in place for only up to 9 months.

What does the operation involve?

The operation is performed under a general anaesthetic and usually takes one to three hours. Your surgeon will make several small cuts on your abdomen. They will insert surgical instruments, along with a telescope, so they can see inside your abdomen and perform the operation.

Your surgeon will pass a tube down your oesophagus and into your stomach. They will use the tube to guide them while they use a stapling device to cut and seal your stomach. Your surgeon will remove the excess stomach.

What complications can happen?

1 General complications of any operation

- Pain
- Bleeding
- Infection of the surgical site (wound)
- Unsightly scarring
- Developing a hernia in the scar
- Blood clots

2 Specific complications of this operation

- Damage to structures such as your bowel, bladder or blood vessels
- Surgical emphysema
- Developing a hernia near one of the cuts

- Staple-line bleeding
- Staple-line leak or making a hole in your stomach or bowel
- Sleeve narrowing
- Developing acid reflux
- Nutritional deficiencies

How soon will I recover?

You should be able to go home after two to three days.

You will be able to take only liquids for a few weeks, progressing to soft food and then, after about 4 to 6 weeks, to solid food.

You should be able to return to work after two to four weeks, depending on how much surgery you need and your type of work.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

On average, people who have a sleeve gastrectomy lose over half their excess body weight.

Summary

A sleeve gastrectomy may help you to achieve long-term weight loss. Success depends on your ability to keep to your new eating plan and exercising regularly.

Acknowledgements

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