



A GUIDE TO WEIGHT LOSS SURGERY

a guide to your treatment options...

HOW DOES EXCESS WEIGHT AFFECT OUR LIVES?

THE FACTS ABOUT OBESITY

Individuals are considered severely overweight, or obese, if their Body Mass Index (BMI) is 30 or higher.

Today up to one in five people are considered obese.

Obesity means that your excess weight is putting your life at risk.

You are considered obese or morbidly obese if you are:

- More than 45 kgs over your ideal weight
- Or your BMI is 40 or greater
- Or your BMI is 35 or greater and you have life threatening conditions related to obesity

HEALTH RISKS ASSOCIATED WITH OBESITY

Diabetes

Congestive heart failure

Cardiovascular disease

Gallstones

Sleep apnoea

Coronary heart disease

Hypertension

Stroke

Incontinence

Osteoarthritis

Asthma

Cancer

Reflux

Amenorrhoea

Joint disease

Polycystic ovary syndrome

Hyperlipidaemia

Infertility

Depression

Dysmenorrhoea

High cholesterol

WHY WEIGHT LOSS SURGERY?

IT IS NOW UNDERSTOOD THAT SEVERE OBESITY IS NOT JUST THE RESULT OF EXCESS EATING BUT A CHRONIC DISEASE WITH MANY CONTRIBUTING FACTORS.

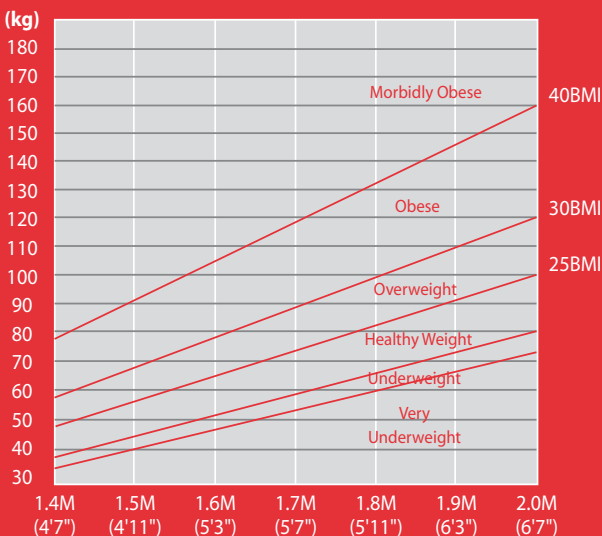
SURGICAL PROCEDURES HAVE SHOWN THE BEST LONG-TERM RESULTS IN DEALING WITH OBESITY.

BODY MASS INDEX (BMI)

BMI IS USED TO ESTIMATE YOUR BEST WEIGHT RANGE FOR YOUR HEALTH. IT IS CALCULATED BY DIVIDING YOUR WEIGHT IN KILOGRAMS BY YOUR HEIGHT IN METRES SQUARED (M²).

USE THE PROVIDED CHART BELOW AS A GUIDE.

BODY MASS INDEX CHART



FAILED TO LOSE WEIGHT THROUGH DIET AND EXERCISE?

While a healthier diet and exercise can result in weight loss, the real challenge is keeping the weight off. Unfortunately, studies show a nearly 100% failure rate during a five year period for obese persons who diet for weight control.

For those who have tried diet and exercise without success, weight loss surgery may be the best way to regain your health and lifestyle.

WHO IS SUITABLE?

Your doctor will discuss with you the indications for weight loss surgery and will determine if surgery is appropriate for you.

In general, your doctor will consider your weight versus ideal body weight standards, previous experience losing weight with non-surgical methods and your commitment to follow the strict diet, exercise and medical guidelines associated with the procedure. In addition to these considerations, there are some pre-existing medical conditions that are contra-indicated for weight loss surgery.

WHAT RISKS ARE INVOLVED IN WEIGHT LOSS SURGERY?

As with any surgical procedure, weight loss surgery presents risks.

It is important that you discuss with your surgeon the specific risks for someone with your conditions and undergoing your specific procedure.



WHICH WEIGHT LOSS SURGERY OPTION IS RIGHT?

THERE ARE TWO MAIN APPROACHES TO WEIGHT LOSS SURGERY. DISCUSS WITH YOUR SURGEON WHICH ONE IS RIGHT FOR YOU.

1. RESTRICTIVE SURGERY

Bands or staples are used to section off a part of the stomach, creating a pouch. Because this stomach pouch is so small, the amount of food one can eat is limited. Food continues to be digested through the normal digestive and absorption process.

Most restrictive procedures involve the use of a polymeric silicone ring or mesh band around the stomach. This band provides stability by not allowing the pouch outlet to expand.

2. RESTRICTIVE WITH MALABSORPTIVE

This procedure restricts both food intake and the amount of calories and nutrients the body absorbs. In addition to creating a stomach pouch, the surgery disrupts the body's normal digestive process. As a result, food bypasses a large part of the stomach and most of the small intestine.

RESTRICTIVE SURGERY

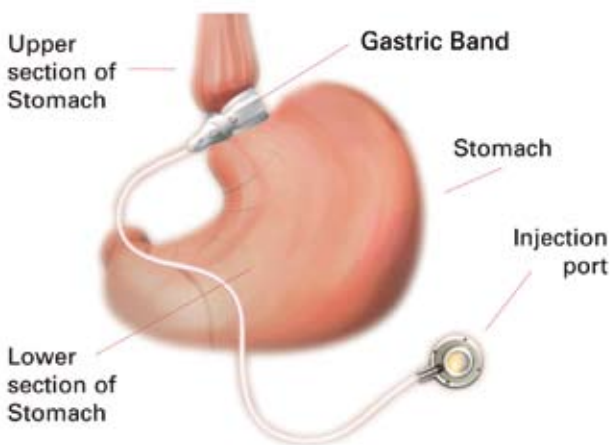


SWEDISH ADJUSTABLE GASTRIC BAND LAPAROSCOPIC SURGERY

The **Swedish Adjustable Gastric Band** causes the section of the stomach sitting above the band to hold a small amount of food. As this section of the stomach fills and stretches, the body sends signals to the brain that the stomach is full and consequently you feel satisfied and eat less.

As your eating patterns change and you become accustomed to eating less, you can achieve sustainable weight loss, which in turn will lead to a healthier lifestyle with less risk of obesity related health problems.

With a Swedish Adjustable Gastric Band procedure, using **keyhole surgery**, your normal anatomy has not been altered and there is no impact to your normal digestive processes. The food you eat will be absorbed by your body exactly as it was before surgery.



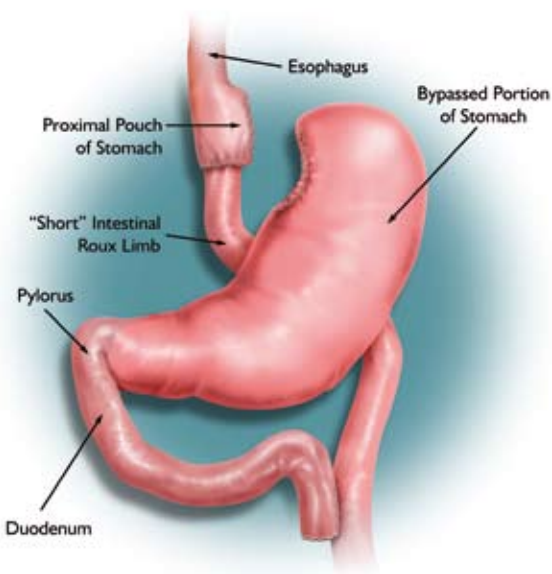
RESTRICTIVE WITH MALABSORPTIVE

ROUX-EN-Y GASTRIC BYPASS

The Roux-en-Y Gastric Bypass procedure combines restrictive and malabsorptive procedures.

During the Roux-en-Y procedure, stapling is used to create a small, upper stomach pouch, which restricts the amount of food able to be consumed. A portion of small bowel is bypassed, thus delaying food from mixing with digestive juices to avoid complete calorie absorption. In most cases, patients report an early sense of fullness, that reduces the desire to eat.

As with the purely restrictive procedure many health problems i.e. back pain, sleep apnoea, high blood pressure, diabetes and depression, may improve or be resolved following surgery.



WANT MORE FACTS?

If you would like to know more about weight loss surgery, visit our informative and interactive website.

WWW.WEIGHTLOSSSURGERY.COM.AU

SOME OF THE FEATURES INCLUDE:

- Interactive BMI calculator
- Procedure animations
- Anatomy images
- In-depth guide to benefits and risks of surgery
- “Find a surgeon” locator

ETHICON ENDO-SURGERY

BARIATRIC **EDGE**SM

The information in this brochure is as an overview of weight loss surgery and is not intended to replace the advice of a qualified bariatric surgeon.

Consult with your doctor for information about how weight affects your health.

All references online at www.weightlosssurgery.com.au

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