**Introduction**

Welcome to Virginia Commonwealth University’s Medical College of Virginia’s program for evaluation and possible surgical treatment of obesity. MCV has a highly regarded and well-respected Gastric Bypass program. Approximately 350-400 surgeries are done each year at our institution.

Gastric Bypass surgery involves stapling of the stomach and re-routing of the small intestine to form a small stomach pouch and a bypass of a portion of the small intestine (see diagram). This is done either through an abdominal incision or through ‘laparoscopy’ (6 small incisions). Your surgeon will determine which approach is appropriate for you.

In order to be considered a candidate for Gastric Bypass surgery, you must have made multiple attempts to lose weight, weigh at least 100 pounds over ideal body weight, and have medical problems caused by obesity (such as diabetes, hypertension, sleep apnea, joint pains, etc.).

If you meet these criteria, you may be a candidate for Gastric Bypass. After an evaluation by our gastric bypass dietitians and your surgeon, a letter of request for insurance approval will be written.

**Benefits of Gastric Bypass**

- Limits the amount of food consumed at one time.
- Enables you to feel satisfied after smaller food portions.
- Causes “dumping syndrome” (in most patients), causes abdominal cramping, diarrhea, and other symptoms, which helps alleviate the “craving” for sweets and desserts.
- Provides you with a “tool” to help achieve the permanent weight loss you desire.
- Helps eliminate many medical problems such as diabetes, high blood pressure, sleep apnea, reflux disease, joint pain, high cholesterol, urine incontinence, shortness of breath and leg swelling.

Virginia Commonwealth University’s Medical College of Virginia Hospitals

GASTRIC BYPASS SURGERY

A surgical treatment for obesity

www.helpforobesity.com

MCV PO Box 980519
Richmond, VA 23298 (804)
Your role after Gastric Bypass Surgery

Gastric Bypass surgery is a “tool” in the weight loss and maintenance process. While the only proven way for severely obese persons to lose weight and keep it off, it is by no means a “magic cure”. It requires absolute cooperation and dedication from our patients. With this dedication will come unlimited benefits, the most important being either a complete elimination or a vast improvement in your obesity-related medical problems.

In order to make the Gastric Bypass work for you it is vital that you understand your role in making it a ‘success’:

♦ Thoroughly review all information provided to you (pamphlets, booklets, video at consultation).
♦ Follow the suggestions made by your surgeon, nurse and dietitian. This is crucial to your success.
♦ Recognize that the surgery has its limitations.
♦ Adopt a sensible, sugar-free, low-fat diet; maintain this for life.
♦ Exercise!
♦ Take your vitamin supplements.
♦ Give serious consideration to your role before considering surgery.

Risks of Gastric Bypass

As with any surgery, there are risks directly associated with Gastric Bypass. At your appointment, you will see an informational videotape and your questions regarding surgery will be addressed.

At VCU’s Medical College of Virginia, we take many measures to prevent these complications. Even with our preventative measures, complications are unavoidable. The chart below lists some, with rates at our institution:

<table>
<thead>
<tr>
<th>Condition</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major wound infection (for open gastric bypass, requiring long-term dressing changes)</td>
<td>2%</td>
</tr>
<tr>
<td>Incisional hernia (open gastric bypass)</td>
<td>25%</td>
</tr>
<tr>
<td>Stomal stenosis (scarring of the opening between pouch and intestine)</td>
<td>12%</td>
</tr>
<tr>
<td>Ulcer</td>
<td>9%</td>
</tr>
<tr>
<td>Gallstones (with anti-gallstone med) (without anti-gallstone med)</td>
<td>2%</td>
</tr>
<tr>
<td>Blood clots in lungs</td>
<td>.5%</td>
</tr>
<tr>
<td>Leak from hook-up/ peritonitis</td>
<td>1.5%</td>
</tr>
<tr>
<td>Death</td>
<td>.5%</td>
</tr>
</tbody>
</table>

Further education regarding prevention and treatment of these complications will occur at your consultation appointment.

Smoking

If you are a smoker, we will require you to quit 30 days before surgery.

MCV’s Gastric Bypass Program

After nearly 3000 patients and 20 years performing Gastric Bypass surgery, we have shaped and refined MCV’s practice into an exemplary program. Continuity of care is achieved through lifetime care from our Gastric Bypass Team.

Our Team:
- Experienced Surgeons
- Registered Dietitians
- Gastric Bypass Registered Nurse

The Evaluation:
- Information gathered through questionnaires sent to patient
- Education through videotape, ‘fact sheet’, and discussion
- Consultation with Dietitian
- Consultation with Surgeon (includes determination of open versus laparoscopic approach)

Pre-Operative Education:
- Comprehensive gastric bypass booklet
- 2 hour educational class with RN and Dietitian
- Individual attention when needed

Gastric Bypass Support Group
- Monthly newsletters and meetings
- Educational and emotional support