Q: What are the most important things to know about a surgical team, prior to selecting one to perform my surgery?
A: Experience, commitment and collaboration are critical. Because of the compromised health of most obesity surgery patients, most of the procedures are considered ‘high risk’. The surgeon’s experience is, therefore, crucial. Another determining factor should relate to the knowledge of your care team about obesity surgery and collaboration among specialties. Obesity surgery isn’t just about losing weight. We believe that successful outcomes are best achieved if patients are educated by a multidisciplinary team, including nursing, dieticians and psychologists.

Q: How do I know if I qualify for gastric bypass surgery?
A: If you are greater than 100 pounds overweight or have a BMI greater than 35 with significant co-morbid conditions such as diabetes, sleep apnea, hypertension, obstructive sleep apnea, lower extremity edema, asthma, reflux disease, urinary stress incontinence, chronic headaches, menstrual irregularities, you may qualify for the surgery.

Q: How can I improve my chances of losing (and keeping) the weight off?
A: Adopting a healthy lifestyle, such as exercising, eating well-balanced meals, avoiding sugar and fatty foods, and following our other recommendations will improve your chances of losing and maintaining weight. Our multidisciplinary program, which has evolved over the past 25 years, includes thorough education in order to teach you how to succeed. In addition to a 2 1/2 hour educational class, each patient receives a 165-page reference book, written by our experts, about gastric bypass surgery.

Q: How safe is this surgery?
A: No surgery is without risk and obesity surgery has particular risks. During the consultation visit, these risks will be discussed in detail so that an informed decision can be made.
The Problem

Obesity is a national epidemic and is recognized as being directly associated with a number of serious conditions including type-2 diabetes, hypertension, hyperlipidemia, obstructive sleep apnea, degenerative joint disease, gastric reflux disease, asthma, lower extremity edema, chronic headaches, urinary stress incontinence, certain gynecological cancers, colon cancer and prostate cancer. The Centers for Disease Control and Prevention (CDC) estimates that approximately 64% of Americans are overweight, including more than 30% who are considered obese (BMI >35) and 5% who are morbidly obese (BMI > 40 or greater than 100 pounds overweight). Some experts believe these numbers may be conservative.

A Solution

In 1991, the National Institutes of Health (NIH) endorsed obesity surgery for people with morbid obesity (100 pounds or more over their ideal weight) or for people with a BMI greater than 35 with significant co-morbid conditions. The VCU Medical Center’s Obesity Surgery Program has been in place since 1978. In fact, our program was the first in Virginia to perform this surgery using minimally invasive or laparoscopic techniques. Since then, our program has developed into one of the country’s largest and most successful such programs, having performed surgery on thousands of individuals.

Our surgeons use the Roux-en Y gastric bypass procedure that is both restrictive and malabsorptive. This means that stomach capacity is surgically reduced (restrictive) so that the amount of food consumed is limited. Also a small portion of the small intestine is bypassed which makes eating sugar difficult because doing so can cause extreme discomfort. Nearly all gastric bypass surgeries performed at VCU Medical Center use minimally invasive techniques (laparoscopic method), involving five or six small incisions (versus one large incision). This translates to less pain and quicker recovery for the patient.

We’re Different

We recognize that many places offer gastric bypass surgery. Our program features several defining factors that set us apart from the competition including a multidimensional approach to care, decades of experience, comprehensive care before, during and after surgery; and documented success rates.

Our multidimensional approach to care means that each patient is surrounded by a team of experts, from the time they are first seen until well after their surgery. Our team includes surgeons, dedicated nursing staff, nurse practitioners, registered dieticians and psychologists. The VCU Medical Center’s gastric bypass surgery success rates demonstrate that a team approach is essential to ensure safe and effective weight loss.

We consider gastric bypass surgery a tool and not a cure for weight loss. Therefore, we require that each patient is actively involved with their care team and that they are fully committed to the lifestyle changes that are essential to success regarding dietary and activity changes post-surgery. We also urge patients to schedule routine follow up visits to ensure proper health maintenance post-surgery.

Because the success of gastric bypass surgery may be directly related to the experience and expertise of the surgeon, this should be an important factor for patients to consider when considering a surgical program. Our obesity surgery team has combined experience of more than 100 years. Furthermore, key members of our team hold some of the highest positions in the American Society of Bariatric Surgery (ASBS), the nation’s only professional organization for health providers specializing in obesity surgery. The VCU Medical Center’s Obesity Surgery Program is recognized as one of the nation’s leaders, with a proven track record that includes outstanding patient outcomes and numerous publications in internationally renowned medical journals. Additionally, our surgeons are sought out by their peers (nationally and internationally) to train them in techniques of laparoscopic gastric bypass surgery.

The Results

On average, patients who receive gastric bypass surgery at the VCU Medical Center lose 2/3 of their excess weight.

The following are some patient reported statistics at our institution related to resolution of their health conditions within two years after gastric bypass surgery:

- Diabetes: 73% completely resolved
- For those on oral meds pre-op: 82% are completely resolved and 1% are controlled by diet alone
- Hypertension: 56% resolution
- Urinary stress incontinence: 91% resolution
- Severe heartburn: 90% resolution
- Venous stasis ulcers: 94% resolution
- Pseudotumor cerebri: 100% resolution
- Orthopedic conditions: 71% resolution

Additional Information

Phone: (804) 828-8000
Web: www.helpforobesity.com