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More Americans Eligible for LAP-BAND Weight-Loss Surgery

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If you've been thinking about weight loss surgery, you may have some new options.

An estimated 37 million more people are now with the patient criteria for the LAP-BAND operation thanks to an expansion of the device's approval by the FDA.



You now may qualify if you are at the lower end of the obesity spectrum. That means a body mass index (BMI) of 30 — five points below the previous requirement — in addition to a serious weight-related condition like type 2 diabetes or hypertension. Above a 34 BMI there are no such restrictions.

LAP-BAND surgery, along with gastric bypass surgery, is one of two most commonly performed weight loss operations. (A third, sleeve gastrectomy, is relatively new and not often performed.)

With LAP-BAND surgery, small incisions are made in the abdomen through which a silicon band is inserted creating a small pouch of the upper portion of the stomach that holds just 4 to 6 ounces of food. An access port under the abdominal skin allows for adjustment of the band's tightness to control the rate that food enters the rest of the stomach and the intestines. A LAP-BAND surgery has the same risks that come with all major surgeries, but may have fewer risks than other surgical treatments for obesity. Patients can experience complications after surgery. A troubling 70 percent of patients have reported such complications — mainly nausea and vomiting, which are usually temporary — and nearly half the patients in a small, recently



published Belgian study who were followed for 10 years or more had the bands removed because of more serious complications. In addition, on average they had lost only 43 percent of their excess weight.

Nonetheless, says Ted Khalili, MD, founder of the Khalili Center for Bariatric Care in Beverly Hills, California, "For patients who only want to lose weight and are not diabetic, LAP-BAND surgery can be preferable because it is less invasive than gastric bypass and it's reversible." Dr. Khalili, who says that he has done over 4,000 bariatric surgeries, adds that the surgeon's expertise and experience combined with long term patient follow-up are crucial to the success of the LAP-BAND procedure.

But for diabetics, gastric bypass can be a boon, says Dr. Khalili: "Even before patients lose weight there's a biochemical change that's not well understood, but within weeks they can go off their diabetic medicine." It's major surgery, comparable to a gall bladder or a hernia operation, he says, and it is irreversible. A minimum BMI of 35 to 39 with weight related complications is required to qualify. Generally, the stomach is stapled to create a small pouch plus a passage for food that gets attached to the small intestine.

If you're considering bariatric surgery find an experienced board-certified bariatric surgeon. But that's just the first step, says Khalili. "Patients need lifelong support which the surgeon should provide — weekly meetings with others who've had the surgery, frequent consultations with social workers and dietitians. If you're not committed to lifelong change then don't have bariatric surgery."

Would you ever consider weight loss surgery?

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