


Roux-en-Y Gastric Bypass	Pros	Cons
	Sustained weight loss with limited dietary compliance.	Risks for nutritional deficiencies are higher than restrictive procedures (bypass causes food to skip the duodenum, where most iron and calcium are absorbed).
	Does not require the implantation of a foreign body, such as a silastic ring used in gastric banding.	Anemia may result from malabsorption of vitamin B12 and iron in menstruating women.
	More weight loss than Adjustable Gastric Banding <sup>1</sup>	Decreased absorption of calcium may bring on osteoporosis and metabolic bone disease.
	Less long-term maintenance than gastric banding (no band fills needed).	May cause dumping syndrome, a condition in which stomach contents move too quickly through the small intestine. This can result in nausea, weakness and sweating, faintness and diarrhea — especially after eating sweets.
	Combination procedure - offers both restrictive and malabsorptive effects.	Potential for gastric leaks (due to stapled recetion of the stomach).
	Robust clinical database available.	

1. Hutter, M et al. First Report from the American College of Surgeons Bariatric Surgery Ctr. Network Laparoscopic Sleeve Gastrectomy has Morbidity and Effectiveness Positioned Between the Band and the Bypass. *Annals of Surgery*, Vol 254, No 3, 410-22. September 2011

## General Surgical Risks

Weight loss surgery, as with any major surgery, has risks of which you should be made aware. Although surgical complications are infrequent, it is important for you to fully understand any potential risks so you can make an informed decision. Your surgical team will use their expertise and knowledge to avoid complications. If a problem does occur, your surgical team will use those same skills to attempt to solve the problem quickly. The importance of having a highly qualified medical team and the use of a certified facility cannot be overestimated.

In general, less serious problems tend to occur more frequently than serious issues which rarely occur. If a complication does arise, you, the surgeon and the nursing staff will need to cooperate in order to resolve the problem. Some complications can involve an extended hospital stay and recovery period.

It is important to know that bariatric surgery cannot be completely reversed. The decision to have this procedure must be made in consultation with your surgeon and a very careful consideration of the potential benefits and risks and lifelong consequences.

There is no amount of weight loss that is guaranteed for bariatric surgery. Weight control is the personal responsibility of the patient. As is true for other treatments for obesity, successful results depend significantly on knowledge, personal motivation and behavior.

## Potential side effects of bariatric surgery include, but are not limited to:

- Nausea and vomiting
- Gas and bloating
- Lactose intolerance
- Temporary hair thinning
- Depression and psychological distress
- Changes in bowel habits

## Potential complications of bariatric surgery include, but are not limited to:

- Infection, bleeding or leaking at suture/staple lines
- Blockage of intestines or stomach pouch
- Dehydration
- Blood clots in the legs or lungs
- Vitamin and/or mineral deficiency
- Protein malnutrition
- Incisional hernia
- Irreversibility, or difficulty reversing some procedures
- Revisional procedure(s) sometimes needed
- Death

Speak to your physician about other possible side effects and/or complications that may not be listed here.