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BARIATRIC SURGERY



MORBID OBESITY

You have been diagnosed with morbid obesity. It is defined as having a body mass index of 32 or higher with serious health problems or a body mass index of 35 or higher without any serious health problems. This level of obesity has been shown to be dangerous and unhealthy, and increases your risk from a variety of medical illnesses which include (but not limited to) respiratory disease, high cholesterol, stroke, high blood pressure, heart disease, congestive heart failure, swelling in the legs and feet, diabetes, sleep apnea, degenerative joint disease, gout, deep vein thrombosis, shortness of breath, stress incontinence, irregular menstrual cycles, problems with infertility, depression, arthritis, gallbladder disease and asthma or death. Morbid obesity also limits you from not being able to work and not being able to participate in daily living tasks for yourself and your family.

TYPES OF WEIGHT-LOSS SURGERIES

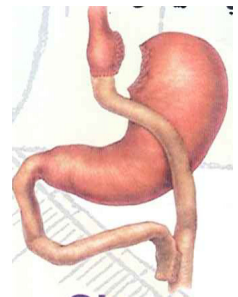
When appropriate, weight-loss surgery can result in dramatic improvements in weight and health. Within the first two years, you can expect to lose 50 percent to 60 percent of your excess weight. Those people who follow dietary and exercise recommendations tend to keep most of that weight off long term.

Surgery for weight reduction is not a miracle procedure. It doesn't guarantee that you'll lose all of your excess weight or that you'll keep it off long term. Weight-loss success after weight loss surgery depends on your commitment to making lifelong changes in your eating and exercise habits. And there is no preset pattern of weight loss that can be predicted.

There are many different types and variations of surgical procedures being performed for weight loss. Our hospital performs open/laparoscopic gastric bypass procedure, open/laparoscopic mini bypass procedure, open/laparoscopic sleeve gastrectomy and laparoscopic adjustable gastric banding. Your surgeon will discuss the details of your operation and why you are suitable for that procedure. You are strongly encouraged to make every effort to investigate and understand the details of the operations as well as the changes that must be made in your life following the procedure that is agreed upon.

Gastric Bypass Surgery (Roux-en-Y / Mini bypass)

The Roux-en-Y gastric bypass is a procedure that involves placing three rows of staples near the upper part of the stomach. This forms a small pouch that will hold 60 to 80 cc of food or liquid. The pouch is totally separated from the rest of the stomach. A portion of the small intestines is attached to the pouch with a small opening called an anastomosis. By doing this, food is unable to pass through the larger part of the stomach. It is also unable to pass through the first part of the small intestine. This operation helps with weight loss because it decreases the amount of food that is eaten and also alters fat absorption.



There is a variant of this operation called the Mini bypass which is similar but there is a difference in the anastomosis pattern and makes this more suitable for sweet cravers.

Both the open and laparoscopic gastric bypass procedures, once performed, can be reversed.

The laparoscopic gastric bypass and mini bypass is performed through 5 to 6 small incisions that will be placed on your abdomen. Long instruments will be inserted into each incision. With the aid of a camera and a television screen, the surgery will be performed. In some patients, it is necessary to “convert” from a laparoscopic bypass procedure to an open procedure. You are generally in the hospital 2 to 3 days and out of work for 1 to 2 weeks. If you experience any complications, your hospitalization and recovery time may take longer.

The open gastric bypass is performed through one vertical incision at the middle abdomen. Generally, you can expect to be in the hospital for 4 to 5 days. Hospitalization and recovery time may be longer if you experience complications. You are generally out of work from 3 to 5 weeks.

Laparoscopic Adjustable Gastric Banding

The laparoscopic adjustable gastric band is performed through 4 to 5 small incisions that will be placed on your abdomen. Long instruments will be inserted into each incision. With the aid of a camera and a television screen the surgery will be performed. A pliable band made of surgical grade silicone elastomer is placed around the top of the stomach. This creates a new small stomach pouch which can only hold a small amount of food, usually 50ml to 60ml. The band is connected by a tube to an access port placed under the skin during surgery. It is through this port that the physician can adjust the amount of saline in the band to aid in your weight loss.

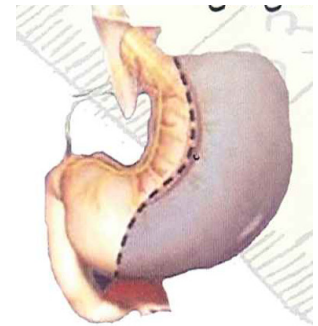


The laparoscopic adjustable gastric banding is removable under emergency circumstances only.

Laparoscopic Sleeve Gastrectomy

The laparoscopic sleeve gastrectomy is performed through 5 to 6 small incisions that will be placed on your abdomen. Long instruments will be inserted into each incision. With the aid of a camera and a television screen, the surgery will be performed. In some patients, it is necessary to “convert” from a laparoscopic bypass procedure to an open procedure.

A series of staples are applied on the stomach reducing the capacity of the stomach to 80 ml capacity tube like structure. You are generally in the hospital 2 to 3 days and out of work for 1 to 2 weeks. If you experience any complications, your hospitalization and recovery time may take longer



Both the open and laparoscopic sleeve gastrectomy, once performed, is not reversible