Gastric Bypass Surgery - What You Need to Know

Gastric bypass surgery is considered a convenient and effective long-term weight loss solution for people diagnosed as morbidly obese. But because gastric bypass surgery is an elective procedure, it is imperative that you weigh both the risks and the benefits before signing on for this life-changing procedure. This article will explain gastric bypass surgery step-by-step to help you understand exactly what is involved and make an informed decision. Whether you have the open procedure, where they make a long incision through the outer wall of the abdomen, or the laparoscopic procedure, where they make several small incisions for the instruments and special cameras used by the surgeon to see what he is doing, the steps are still the same. First the surgeon will use a surgical stapler or hand stitches to divide the upper stomach into two parts, one large and one small. The small pouch is about the size of a golf ball and can hold approximately 20 cc of food (although it will later stretch some). This new pouch will still continue to produce the stomach acid needed to soften and break down your food; however, the small size dramatically limits the amount of food you can consume after weight loss surgery. In addition, creating a small pouch minimizes the risk of developing an ulcer from too much acid entering the small intestine. (The surgeon could just remove the lower part of the stomach during gastric bypass surgery, but they don't, for a very good reason. It still can produce the acid needed to digest food, so the operation can be revised, if necessary.) Next, the surgeon will divide the small intestine so it can be directly connected to the new stomach pouch. This part of the small intestine is called the "Roux Limb" after the Swiss surgeon who invented the technique. This piece of the small intestine is connected to the new stomach pouch either using a surgical stapler or by hand stitching. Even if the surgeon uses a stapler, he will reinforce the staples at strategic points with hand-sewn stitches. After gastric bypass surgery, the food you eat will travel down the esophagus into the new stomach pouch, where it will briefly begin to digest. Then, it quickly travels down the new connection to the small intestine, where it will be joined by other digestive juices from the lower stomach, liver and pancreas to complete the digestion process as they travel together down the length of the small intestine. In rare cases, the surgeon will insert a tube between the upper stomach and the intestine to allow stomach juices to flow into the small intestine. This is only done if the surgeon believes there is a high probability of a specific complication that prevents the digestive juices from draining properly. In most cases, this tube is removed a few weeks after surgery. Patients generally will stay in the hospital anywhere from two to six days and will have to eat a pureed diet for many weeks. Most patients begin losing excess weight immediately and will lose anywhere from 60% to 80% of their excess weight within a two year period. Most will keep at least half of their excess weight off permanently. Some of the benefits of this type of surgery are that other illnesses cause by excessive weight--such as sleep apnea, weight related heart problems, diabetes, and lower back and knee problems--will greatly improve and may completely disappear. But, like any surgery, there are risks, some of which can be fatal. Before considering any type of elective surgery, consult with your doctor and explore all of the available treatments.

About the Author

The Warrior Diet is the revolutionary new health, diet and fitness lifestyle based on the scientifically proven benefits of following.

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