

Ian Beckingham DM FRCS (Gen. Surg.)
Consultant Laparoscopic and Hepatobiliary Surgeon

Secretary:
Linda Chambers
Tel: 07808 552282
Email: lcmedical@me.com

www.ianbeckingham.com

MB01lite Laparoscopic Gastric Banding

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This document will give you information about laparoscopic gastric banding. If you have any questions, you should ask your GP or other relevant health professional.

What is gastric banding?

Gastric banding involves placing an adjustable silicone band around the upper part of your stomach. It works by making you feel full sooner so that you eat less (see figure 1).

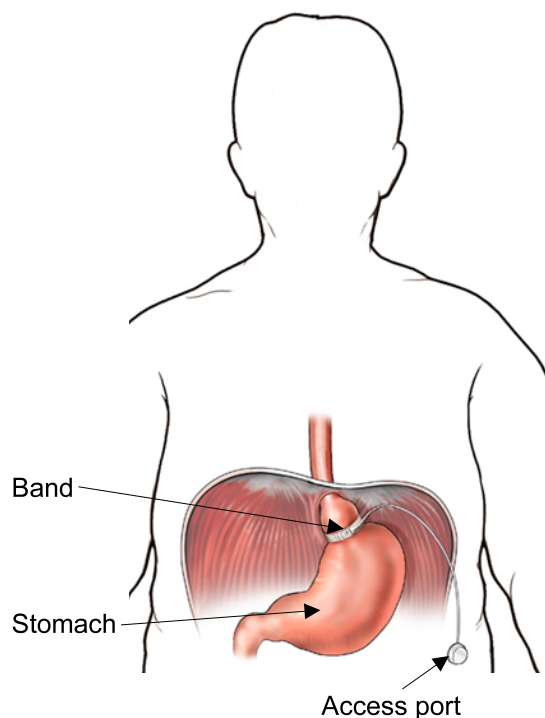


Figure 1
Gastric banding

Is gastric banding suitable for me?

If your BMI score is over 40, surgery may help you to achieve long-term weight loss. Surgery may also help if you have a BMI over 35 (severe obesity) and have other medical conditions such as Type 2 diabetes or high blood pressure.

Your surgeon will confirm your BMI score and carry out a detailed assessment before deciding if surgery is suitable for you.

What are the benefits of gastric banding?

If the operation is successful, you should be able to achieve long-term weight loss. However, this depends on your ability to keep to your new lifestyle.

Long-term weight loss should improve most obesity-related health problems.

Are there any alternatives to gastric banding?

The simple approach to losing weight involves eating less, improving your diet and doing more exercise. Sometimes medication prescribed by your GP can help. There are other surgical options to gastric banding, such as shortening your digestive tract, sleeve gastrectomy and gastric bypass. Gastric banding has fewer complications and there is a lower risk of serious complications happening. Recovery is usually faster. It may be possible to have a gastric balloon. However, this can stay in place for only up to nine months.

Is silicone safe?

Many studies have been carried out to find if silicone is safe. There is no evidence to suggest that people who have gastric bands are at a higher risk of getting diseases such as cancer and arthritis.

What does the operation involve?

The operation is performed under a general anaesthetic and usually takes between one and two hours.

Your surgeon will make several small cuts in your upper abdomen. They will place surgical instruments, along with a telescope, inside your abdomen and perform the operation.

Your surgeon will create a tunnel behind your stomach. They will pass the band around the upper part of your stomach to create a smaller upper pouch. They will fold some of the lower stomach over the band and stitch it to the upper stomach pouch.

What complications can happen?

1 General complications

- Pain
- Bleeding
- Infection of the surgical site (wound)
- Unsightly scarring
- Developing a hernia in the scar
- Blood clots

2 Specific complications

- Damage to internal organs
- Developing a hernia near one of the cuts
- Surgical emphysema
- Air in the chest cavity
- Developing gastro-oesophageal reflux
- Stretching of the oesophagus or the oesophagus not working properly
- Difficulty swallowing
- Making a hole in the oesophagus or stomach
- Constipation or diarrhoea
- Infection of the band
- Pouch dilatation
- Band slippage, erosion or leakage
- Failure of the band

How soon will I recover?

Most people go home the following day. You may be able to go home the same day. You will start with a liquid-only diet, progressing to soft food and then to solid food.

You should be able to return to work after one to two weeks depending on the extent of surgery and your type of work.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, you should ask a member of the healthcare team or your GP for advice. On average, people who have gastric banding lose over half of their excess body weight.

Summary

Gastric banding may help you achieve long-term weight loss. Success depends on your ability to keep to your new eating plan and taking regular exercise.

Acknowledgements

Author: Mr Ian Beckingham DM FRCS and Mr Stephen Blamey MBBS FRACS

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