

Bariatric Surgery at Sinai Hospital

To an outsider, gastric bypass surgery may seem to be a way of treating obesity.

But Alejandro Gandsas, M.D., head of the Division of Bariatric and Minimally Invasive Surgery at Sinai Hospital, says the increasingly popular surgery is really much more than that.

"It may appear that you're just treating obesity, but what you're really treating is health problems," Gandsas said. "And it's amazing to see how those problems – from hypertension to high cholesterol to sleep apnea – disappear or are cured within a one-year period of the surgery."

Gastric bypass, or bariatric, surgery has come a long way in the past decade. Procedures have improved, making the surgery more effective and less invasive than ever. As a result, medical professionals and patients alike are increasingly recognizing gastric bypass as a real option for people who have tried, but failed, to lose weight by other methods.

The Journal of the American Medical Association recently reported that an estimated 180,000 gastric bypass surgeries were performed in 2006.

Under the direction of Gandsas and Christina Li, M.D., Sinai's Bariatric Surgery program has blossomed into one of the nation's best. The American Society of Bariatric Surgery named it a "Center of Excellence" in 2006.

Patients have a variety of options when choosing weight loss surgery including gastric bypass surgery, the Lap Band and a new procedure: the gastric sleeve.

In gastric bypass surgery, the surgeon makes small incisions between the breastbone and navel and then sections off a small section of stomach about the size of an egg. Then,

the surgeon attaches a section of the patient's intestine to this "new" stomach. Another limb of intestine is then attached to the original stomach to allow digestive juices produced there to be emptied into the intestines.

The gastric sleeve is a relatively new approach in bariatric surgery. It involves a vertical resection of up to 85 percent of the stomach resulting in a small "tube" or "sleeve" to accommodate food, hence, creating a feeling of satiety with a small meal.

Unlike the gastric bypass, the gastric sleeve operation does not involve any "re-routing" of the small bowel and no implantation of a plastic device (as seen with the Lap-Band technique) is necessary.

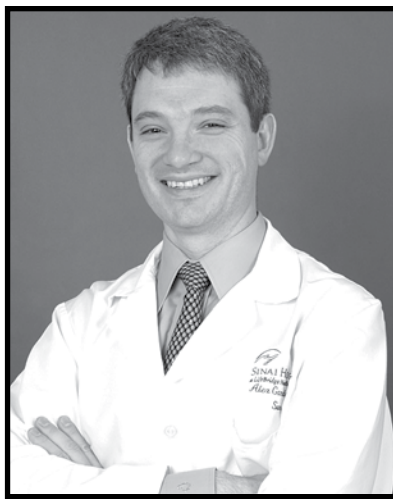
All three procedures create a new, smaller stomach, allowing patients to satisfy their hunger with smaller portions. As a result, they will likely consume fewer calories, allowing them more easily to lose weight.

Still, Gandsas is quick to point out that

the surgery alone will not lead to success. Even after the surgery, patients need to work to change their habits and adjust to their new stomach – and their new life.

"It requires extreme accountability from the patients," Gandsas says. "They need to be compliant with their diet. The operation is just a tool. It's not a 100 percent fix. You have to go and work with the tool."

For more information about Sinai Hospital's Division of Bariatric and Minimally Invasive Surgery, come to one of the free seminars held the first Monday of each month from 6 to 8 p.m., or call 410-601-WELL (9355) for more information.



Dr. Alex Gandsas, head of the Division of Bariatric and Minimally Invasive Surgery at Sinai Hospital



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