

# Ask *the* Expert Weight Loss Surgery

## What are the health risks of obesity?

Massive obesity shortens life. Obesity influences many diseases including diabetes, high blood pressure, heart disease, sleep apnea, spine and joint diseases, infertility, cancer, varicose veins, venous stasis ulcers, and reflux esophagitis. In this weight conscious society, obesity may negatively affect self-esteem, interpersonal relationships, and employment opportunities.

## Does obesity run in the family?

Genetics play a huge role in obesity. "Thrifty genes" helped protect our ancestors from starvation by programming humans to store large quantities of food as fat to be used during famine. Even in

good times hard outdoor work helped use up excess fat. In all human history food has never been as constantly available as now. Work has become less physical. The result is that we have an obesity epidemic.

## How is obesity measured?

Body mass index (BMI) is used to measure obesity. BMI formula of weight divided by height squared factors out the differences in heights when comparing weights. A body mass index of 40 is life-threatening obesity. Sometimes, even lower BMI's are associated with serious illness.

## What options are available to treat obesity?

Because of strong genetic and environmental influences, significant long term weight loss through dieting alone is extremely difficult. Surgical

procedures for weight loss help counter the genetic predisposition to be obese.

Today, there are three common operations for weight loss (bariatric surgery). The reason there are three is because taking all factors into account, none has shown a clear superiority over the other two.

The gastric bypass (FIG) is the oldest and most "tried and true". It is the most aggressive of the three and provides both restriction of caloric intake and some malabsorption of calories. Average excess weight loss is greatest with the gastric bypass and it has a very powerful effect on diabetes.

The lap band (FIG) provides restriction only and is extremely safe. Weight loss varies, although tends to be less than with the bypass. Weight loss also tends to be slower and is very dependent on careful patient follow up.

The gastric sleeve (FIG) is the newest bariatric operation. The sleeve provides restriction only but involves removal of a part of the stomach. Weight loss with the sleeve tends to be intermediate between the band and bypass. The sleeve being relatively new is showing great promise with good weight loss averages and good reduction of obesity associated illnesses.

## Where can I learn more about weight loss surgery?

For more information about all of these operations and other aspects of obesity please attend our free seminar or visit [www.neaweightloss.com](http://www.neaweightloss.com).

The next seminar will be held on February 25, 2014 at 6 pm in the Conference Center at the new NEA Baptist medical campus, located at 4800 E. Johnson, Jonesboro. 870-936-8000



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