

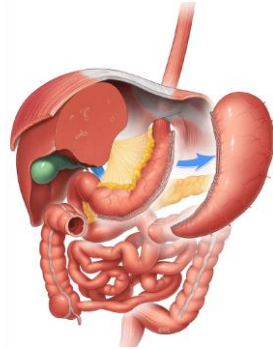
Primary Weight Loss Surgery Options

Commonly Performed Procedures



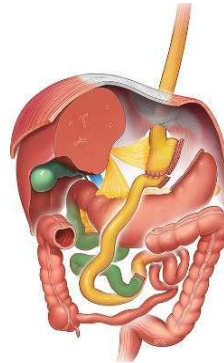
Adjustable Gastric Band

- Lowest weight loss
- Highest risk of long-term reoperations
- Highest risk of weight regain
- Rarely performed now



Sleeve Gastrectomy (SG)

- Introduced in 2000's
- Most commonly performed
- Lose 25% current weight
- Lower risk than RYGB
- Less weight loss in BMI>50
- May cause reflux



Roux-en-Y Gastric Bypass (RYGB)

- Introduced in 1960's
- Lose 31% current weight
- Better improvement in diabetes than SG
- Better weight loss than SG
- Improves reflux
- Risk of ulcer and hernias

If your BMI is >50, you may qualify for



SG with Single Anastomosis Duodenoileostomy (SADI-S)

- Introduced in 2000's
- Lower risk than DS
- Less weight loss than DS
- More reflux than DS



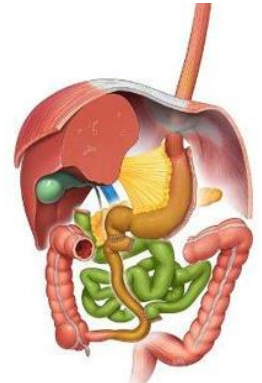
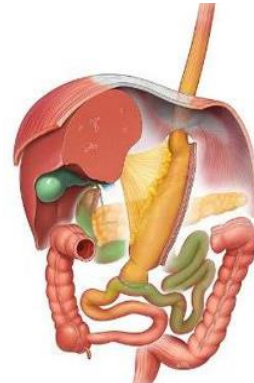
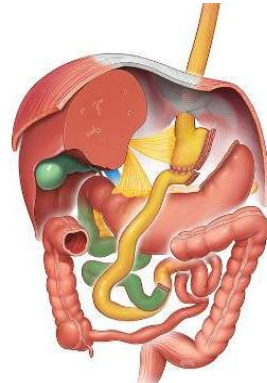
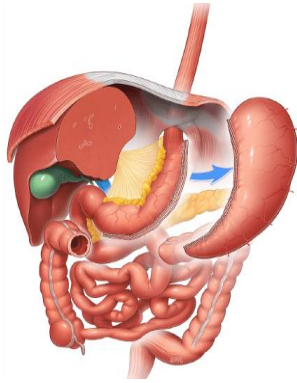
Duodenal Switch (DS)

- Introduced in 1970's
- Greatest weight loss
- Higher surgical risk

Greatest risk of nutritional deficiencies

Revisional surgery recommendations may vary based on other factors

Primary Weight Loss Surgery Options



Benefits & Risks

SG

RYG

SADI-S

DS

% Weight loss 1-year

25%

31%

Higher than RYGB

Higher than SADI-S

% Weight loss kept at 5-years

19%

26%

Higher than RYGB

Higher than SADI-S

% Type II DM resolved

84%

86%

Higher than RYGB

Higher than SADI-S

% Type II DM returned

42%

33%

Lower than RYGB

Lower than SADI-S

30-day Complications

3%

5%

Higher than RYGB

Higher than SADI-S

Re-operations/Reinterventions
5-years

9%

12%

Higher than RYGB

Higher than SADI-S