

Weight loss surgery options: Sleeve Gastrectomy (LSG)

What is a sleeve gastrectomy?

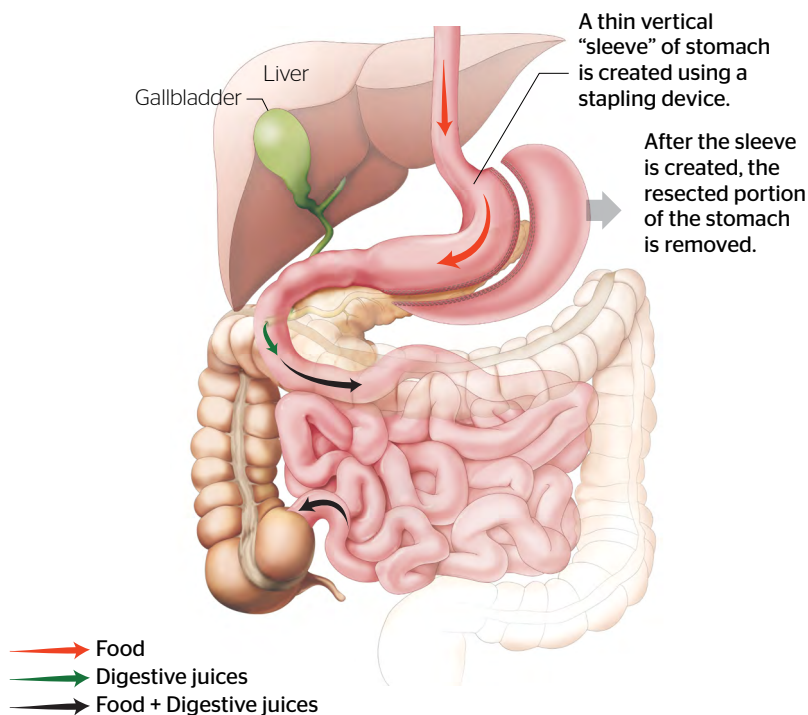
Using laparoscopic (keyhole) surgery, a thin vertical sleeve of stomach is created (about the size of a banana) and the larger part of the stomach is removed. The intestines are not changed.^{1,3}

Why does a sleeve gastrectomy help you to lose weight?

Altered hormone signals change how your blood sugar levels are controlled, decrease your hunger, and increase your feelings of fullness. This affects how your body processes and stores calories from food, which improves your metabolic health and helps your body to manage weight by lowering its metabolic set point.^{3,5}

DID YOU KNOW?

- Over 80,000 people in Australia have had weight loss surgery¹⁶
- Around 80% of people having bariatric surgery in Australia are 25-54 years old¹⁶
- Nearly a third of adults in Australia are living with obesity¹⁷



Benefits and health outcomes of a sleeve gastrectomy

If you achieve your target excess weight loss (in consultation with your surgeon) you may see improvement in obesity-related conditions, including type 2 diabetes, high blood pressure, abnormal lipid levels, and sleep apnoea.⁶⁻¹²

Please speak with your doctor for more information.



Health risks* of a sleeve gastrectomy are generally low (rate of any adverse event 1.6%), and can include:¹³⁻¹⁵

- Malnutrition if recommended supplements are not taken
- Complications from the stomach stapling
- Risk for stomach or oesophageal (food pipe) problems.

*Actual risks will depend on individual circumstances and should be discussed with your surgeon.

Important Safety Information. Since 2012, the Bariatric Surgery Registry has collected safety data from almost 90,000 people who have undergone bariatric (weight loss) surgery in Australia and New Zealand. In 2018-2019, the incidence of adverse events requiring unplanned return to surgery, intensive care unit admission, or hospital readmission in the first 90 days after primary (first-time) bariatric surgery was 2.1%. This indicates that around 1 in 50 people who undergo bariatric surgery will experience a complication such as leaking or narrowing (stricture) of the surgical connection, dehydration or electrolyte imbalance, abdominal pain, bleeding, or vomiting.¹⁴

Bariatric surgery is generally recommended for people with morbid obesity (BMI ≥ 40 kg/m²) or severe obesity (BMI ≥ 35 kg/m²) with ≥ 1 obesity-related conditions, but may be considered for those with a BMI 30-35 kg/m² who have poorly controlled type 2 diabetes.^{16,19} It may not be suitable for individuals with certain digestive tract conditions. You should consult your physicians to determine your need for a healthy energy controlled diet and physical activity, and whether bariatric surgery is appropriate for you.¹⁸ There are risks with any surgery, such as adverse reactions to medications, problems with anaesthesia, problems breathing, bleeding, blood clots, accidental injury to nearby organs and blood vessels, even death. Your weight, age, and medical history will determine your specific risks.²⁰ Bariatric surgery has its own risks, including failure to lose weight, nutritional or vitamin deficiencies, and weight regain.¹

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To be completed in discussion with your healthcare team.

Surgeon details

Name:

Email:

Telephone:

Practice address:

General practitioner (GP) details

Name:

Email:

Telephone:

Practice address: