

WEIGHT CONTROL VIA GASTRIC BANDING

Constricting the stomach
to cut food intake.

The rule is simple: to control weight gain, one must reduce one's food intake. This is easier said than done. Food temptation is hard to resist and for those who can't weight gain is inevitable.

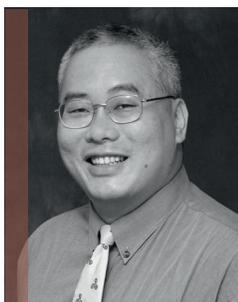
Obesity is the bane of our modern living, but for those who suffer from such problems, weight loss can be achieved via dieting and lifestyle changes. However, for those with a body mass index (BMI) of 35 or more and have not achieved significant weight loss through dieting and exercise, a lap band surgery might be a way to help reduce food intake drastically, especially if they are suffering from chronic illnesses such as diabetes, hypertension or sleep apnea, which are known to improve with weight loss.

A lap band surgery, also known as laparoscopic adjustable gastric band surgery, introduces an inflatable silicone device that is placed around the top portion of the stomach in order to restrict the amount of food passing through. Gastric banding is performed using laparoscopic surgery and usually results in a shorter hospital stay, faster recovery, smaller scars, and less pain than open surgical procedures.

Because no part of the stomach is stapled or removed, and the patient's intestines are not rerouted, he or she can continue to absorb nutrients from food normally. Gastric bands are made entirely of biocompatible materials, so they are able to stay inside the patient's body without causing harm.

HOW IT WORKS

The placement of the band creates a small pouch at the top of the stomach. Compared to a normal stomach, this pouch holds about 1/2 cup of food, instead of six cups of food. When the patient eats, the pouch fills up with food quickly, and the band slows the passage of food from the pouch to



the lower part of the stomach. As the upper part of the stomach registers as full, the patient feels he or she has eaten enough, and this sensation helps the patient to be hungry less often, feel full more quickly, eat smaller portions, and consequently lose weight over time.

Reducing the amount of food intake is only one part of the equation. Patients must carefully follow post-operative guidelines relating to diet, exercise, and band maintenance, i.e. to say, the band will need to be adjusted to carefully control food passage through the stomach. As the patient loses weight over time, the band will need to be adjusted to suit the patient's food intake.

Post surgery, the patient may initially be prescribed a liquid-only diet, followed by mushy foods and then solids. In general, a long-term diet should consist of normal healthy food that is solid in nature and requires sufficient chewing to achieve a consistent paste before swallowing.

Wet foods such as soups, casseroles and smoothies, which can pass through the band quickly and easily may result in greater caloric intake, thereby defeating the purpose of the lap band surgery.

For patients opting for such a surgery, it is important to discuss post-surgical care and diet plans with the doctor or dietician. While the surgery may have achieved the aim of restricting food passage through the stomach, consuming energy-rich liquid foods that can pass through easily defeats the purpose of intake reduction.

DR TAY KHOON HEAN | Hepatobiliary Surgeon
MBBS, FRCS (Glasg), FRCS (Edin), FICS, FAMS

Tay Khoon Kean Surgery
6 Napier Road #08-02 Gleneagles Medical Centre. Tel: 6471 1221
www.tkhsurgery.com