



BARIATRIC AND METABOLIC INSTITUTE WEIGHT LOSS SURGERY AND BEHAVIORAL HEALTH

Weight loss surgery is a life-altering, stressful process and procedure that requires careful thought, considerable awareness, and adjustment. Changes occur both emotionally and physically. Weight loss surgery is not a “cure-all”. Instead, it is a tool to help you achieve a healthier weight. We want you to be as successful as you can with weight loss surgery!

In order to have a successful long-term outcome, it is necessary to make a number of permanent lifestyle changes. You will need to permanently change your behaviors, eating habits and activity patterns. A behavioral health evaluation is a requirement at The Cleveland Clinic Bariatric & Metabolic Institute because many habits, behaviors, thoughts and emotions can affect the success of weight loss surgery. Minimally, the behavioral health evaluation will include a one-hour interview and brief questionnaire(s) assessing eating habits, weight history, stress factors, coping patterns, and lifestyle behaviors. Sometimes additional visits may be needed to complete this evaluation. The behavioral health team member will make individualized recommendations to build upon your strengths and help you address challenges so that you can best lose weight and keep it off.

In addition to the behavioral health evaluation, our team can work with you both before and after surgery. It is sometimes necessary to have follow-up behavioral health visits, either individually or in a group, to change behavioral, emotional or psychological patterns that would interfere with a good surgical outcome. For example, many patients need help from a Psychologist to reduce binge-eating behaviors prior to surgery. This eating pattern can reduce your ability to benefit from the surgery. Behavioral health can also provide additional support, stress management skills, assertiveness building, emotion management (e.g., anger or depression), assistance to stop smoking, and strategies for reducing anxiety or fears associated with having the surgery. Further, after the surgery, many individuals are helped from behavioral health follow-up. These visits can help with your psychological and social adjustment to your new lifestyle. Finally, we also encourage you to attend a Weight Loss Surgery support group. This lets you hear from others who have already had the surgery. Support groups also give you additional information about weight loss surgery and the behavioral changes that you will need to make in order to reach a healthier weight and maintain it for the rest of your life.

In summary, we want to help you achieve the best post-surgical outcome possible! If you have any questions or concerns, please do not hesitate to share them with us during your first behavioral health appointment.



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Behavioral Health Considerations

Weight loss surgery is not a cure-all but rather a serious medical procedure that serves as a tool for establishing a healthier weight. In order to be successful over the long-term, it is also necessary to make permanent lifestyle changes in your eating and activity patterns.

ROUX EN Y SURGERY:

The Roux en Y surgical procedure reduces your stomach to the size of an egg (15cc).

This dramatically reduces the amount of food that can be consumed without slowing your metabolism.

The surgery also changes the type of foods that can be eaten.

- There are many possible medical complications associated with RNY surgery such as:
 - Dumping syndrome: this occurs when food too high in fat and/or sugar move rapidly through the intestinal pathway resulting in diarrhea, nausea, cramping, dizziness, sweating, and vomiting.
 - Nutritional deficiencies (e.g. vitamin A, B₁₂, D, E) and mineral deficiencies (calcium, iron, folic acid).
 - Stomach hernias and ulcers
 - Staple line or intestinal connection leak

LAP-BAND SURGERY:

- Although it is possible to remove the band (and thus reverse the surgery), the LAP-BAND is intended to be a permanent or long-term implant.
- The laparoscopic procedure involves inserting an inflatable gastric band through tiny (1cm) incisions in the abdomen and then fitting the band around the upper part of the stomach. This creates a small pouch about the size of an egg (15cc), which limits the amount of food that the stomach will hold at any time. The inflatable/adjustable ring controls the flow of food from this smaller pouch to the rest of the digestive tract. The patient will feel comfortably full with a small amount of food, and because of the slow emptying; the patient will continue to feel full for several hours thereby reducing the urge to eat between meals.
- The LAP-BAND procedure requires regular follow-ups to ensure the band is functioning correctly and check for any complications.
- In addition to dramatically reducing the amount of food that can be consumed, this procedure changes the types of food that can be eaten.
- The LAP-BAND is designed to be adjustable after surgery and to assist you in losing weight and maintaining your weight loss. However, following the surgery there are risks of complications associated with the placement, movement, infection, or leakage of the band or port.



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1. In addition, some patients may experience post-operative gastric symptoms, such as nausea and vomiting. There also remains the possibility that you may not lose weight or that you may even gain weight or that very rapid weight loss could cause health problems.

2. Some of the specific major risks associated with the LAP-BAND are:

Band leakage	Enlargement of stomach pouch or band slippage
Erosion of band into stomach	Reflux
Dehydration	Nausea
Gas bloating	Ulceration
Difficulty swallowing	Psychological intolerances
<i>In rare cases, death</i>	

****Some complications can be corrected through repositioning or replacement of the band but some may require band removal.**

• **Some of the risks associated with any laparoscopic surgery are:**

Blood clots	Damage to major blood vessels
Damage to spleen/liver	Perforation of the stomach/esophagus
Lung problems	

- **Though weight loss surgery physically reduces the size of your stomach, it will not prevent you from eventually gaining back weight if you do not learn how to reduce the amount of food you eat and increase your physical activity to promote calorie burning.**
 - It is entirely possible to “beat” the surgery by eating fatty foods or liquids (such as potato chips, milkshakes, ice cream, etc.).
- **Having a diagnosable eating disturbance before surgery increases the chances of gaining back weight. Weight regain often occurs 2-5 years after surgery.**
 - Binge Eating Disorder and Night Eating Syndrome are linked with greater risk of weight regain.
 - Cognitive-behavioral consultation/psychotherapy are often necessary to treat such eating disturbances.
- **Individuals with mental health difficulties are at an increased risk of medical complications, emotional distress, and decreased satisfaction following surgery.**
 - There is a higher rate of psychological difficulties in individuals with obesity compared to the national norm.
 - Clinical depression is the most reported illness.
 - A prescreening for psychological difficulties is important so that proper intervention can be instituted, reducing the risk of post-surgery complications.

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- **Individuals who use eating to cope with negative emotions or stress are most successful after surgery if they have learned to replace eating with more adaptive coping strategies such as deep breathing, exercise, or developing a hobby.**
- **The majority of patients who have weight loss surgery report having a better quality of life after surgery and recovery.**
- **Weight loss surgery alone will not increase your self-esteem. Many factors play a role in one's self-esteem, such as current and past experiences, perceptions, and attitudes.**
 - How you perceive yourself after surgery depends on more than just weight loss. This is especially true when an individual's weight begins to increase or stabilize after surgery.
- **The majority of patients also report improved body image.**
 - It is not uncommon to develop new attitudes and perceptions about life after surgery as a result of the dramatic weight loss and new body image. As a result of these changes, individuals often report significant changes in their relationships.
- **Individuals who have weight loss surgery often experience both positive and negative effects in their marital and interpersonal relationships.**
- **Some obese individuals who also experience social anxiety (i.e., discomfort in interacting with others) have reported using their weight as an excuse to reduce social interaction. Once the weight is lost, there is the potential for increased anxiety as a result of increased social demands.**
- **If you are currently on disability for obesity or an obesity-related medical condition, it is important to plan for potential discontinuation of this income after surgery.**
- **Patients who have undergone surgery and returned to work have reported mixed feelings. This is due to individual differences in how one welcomes the new attention received.**
- **The majority of patients who have undergone weight loss surgery report an increase in energy after a brief recovery period. This new energy should be put to good use as soon as possible by exercising and being active.**
- **Those who have had prior substance abuse problems are at an increased risk for relapse. Substance abuse has also been shown to increase the risk of regaining weight 2-5 years following surgery. Ongoing awareness and support can help to reduce this risk.**
- **These potential risks for undermining a successful post-surgical outcome are important to consider on an individual basis in the context of psychotherapy.**
- **As you take personal responsibility for making permanent lifestyle changes to create a healthier you, psychotherapy is able to provide you with:**
 - Ongoing support and information about how our thoughts and beliefs can impact our ability to make changes in our eating and exercise patterns.
 - Identification and treatment of potential problem areas such as depression, anxiety, or binge eating.
 - The development of specific plans for how to cope with problem areas or stresses that can impede your ability to lose weight and maintain a healthier weight.