

Weighing it up

Weight-loss procedures can be positively life-changing but there is a lot to consider, writes EMMA CHITTY

Unlike lots of plastic surgery, weight-loss procedures are focused first and foremost on improving a patient's long-term physical health.

Cosmetic benefits from weight-loss procedures are seen by many bariatric surgeons performing them as an added bonus — an extra boost of confidence for those undergoing surgery — but are not the highest priority.

Perhaps the most well-known weight-loss procedure is gastric banding — James Packer and Federal Treasurer Joe Hockey are both known to have had these procedures with positive results — but there are also other effective ways to lose weight through surgery, depending on the individual.

WHO'S ELIGIBLE?

If you're considering having a weight-loss procedure, it's of utmost importance that you've tried other ways to lose weight first.

"Patients must have tried non-surgical weight loss prior to considering surgery," Laparoscopic obesity surgeon Kevin Dolan says.

Your BMI, or body mass index, must also be at 30 or above — that's a 175cm, or 5'7" female, weighing about 90kg.

WHAT ARE THE OPTIONS?

Gastric banding

This procedure sees a small "pouch" formed at the top of the stomach to restrict the amount of food a person can eat before feeling full.

Pros and cons: It's safe, adjustable and is a reversible operation — but some surgeons say it's been taken over by the effectiveness of the sleeve gastrectomy in terms of better weight loss.

Hospital time: Day case.

Sleeve gastrectomy

In this operation, 80 per cent of the stomach is removed — making the patient feel full on small amounts of food and decreasing their hunger levels.

Pros and cons: It's more effective for losing weight than a band, with excess weight loss at an average of

80 per cent but is an irreversible and arguably more risky operation. **Hospital time:** Three days.

Less common procedures include the gastric bypass and intra-gastric balloon.

Gastric bypass

This operation makes the stomach smaller by bypassing part of the intestines — meaning patients don't digest or absorb all the food they consume.

Pros and cons: This procedure is a good fallback option if patients have already had other operations that haven't worked for them. It's the riskiest procedure though, and patients will have potential diarrhoea following the operation.

"I tend to view bypass as a revisional option for cases where either the sleeve is not appropriate or has failed — I don't do it as my first option," bariatric surgeon Leon Cohen says.

Hospital time: Four days.

Intra-gastric balloon

This procedure sees a balloon being

blown up inside the stomach, about 600ml in volume, and left there for six months.

Pros and cons: The balloon can be a great kick-start to losing weight organically — but it's not covered by insurance as it's removable.

Hospital time: Day case.

WHY DO IT?

Weight-loss procedures have many physical and mental benefits for patients.

"Obese people tend to get co-morbidities such as high blood pressure, sleep apnoea or infertility in women," laparoscopic surgeon Stephen Watson says.

"There can also be psychological issues such as being depressed about their weight."

What to expect from the operation

with bariatric surgeon Dr Leon Cohen:

A first consultation: "It's a getting-to-know-you visit — working out what their obesity problem is, what their other health problems are likely to be and what their goals are."

Time to think: "I don't believe in seeing a patient and booking them in the next week — we have a cooling-off period."

Working with a team: "Those who've thrown themselves into bariatric surgery have realised the necessity for a multi-disciplinary team."

This team may include the surgeon, anaesthetist,

dietitian, psychologist and support groups.

Follow up: "It's really important to make sure you follow people up — two weeks, four weeks, then three, six, 12, 18 months and two years."

"We keep a very thorough database of our results and from that, we can make predictions for other people."

Time to reshape

Losing lots of kilos is certainly impressive but it can lead to an unexpected problem. EMMA CHITTY reports that surgeons can help.

If you've lost lots of weight, whether through organic methods or bariatric surgery, chances are you're feeling a lot healthier.

But for many people, losing massive amounts of weight can create another problem: excess skin and fat.

These unsightly leftovers are reminders of obesity and may result in the need for body-contouring surgery.

"For many patients who have lost a lot of weight, it's not uncommon for them to be disappointed by the appearance of their post-weight-loss body," Plastic surgeon Anh Nguyen says.

"They feel burdened by the excess skin — they can't hide it, can't wear clothes they would like — and sometimes describe themselves as deflated versions of their former self."

A range of body-contouring options are now available to rid patients of this frustration. The Argera Clinic's Argie Xaftellis says the first step is to assess how extensive the problem is. If there is a large area of excess skin, surgical removal is recommended.

But if the area, such as the face, is gaunt from weight loss, then non-invasive treatments like Thermage radio frequency and medical rolling with plasma will build elasticity and collagen and is effective in tightening the skin.

"Weight-loss surgery is so common now, so we're used to the demand for follow-up contouring work," Dr Xaftellis says.



WHAT ARE THE OPTIONS?

The most common body contouring surgeries include a belt lipectomy (lower body lift), brachioplasty (arm reduction), thigh reduction, breast work and facelifts. "I usually ask patients which part troubles them the most — it's all about what they prioritise as the procedure they want to do first," says plastic surgeon Tim Hewitt.

WHO IS ELIGIBLE FOR CONTOURING SURGERY?

To be accepted for this type of surgery, patients need to have a BMI below 30 and be weight stable, meaning their weight has stopped going up and down excessively.

It's also essential that they are non-smokers, or prepared to stop smoking for at least two months over the period of the surgery.

"It's quite a significant surgery — patients also will need to have appropriate social support, employer support and financial support," Plastic surgeon Mark Hanikeri says.

WHAT CAN BE EXPECTED DURING RECOVERY?

If patients are having three procedures done — for example a total body lift, arm reduction and thigh reduction — it may mean up to four or five nights in hospital.

"The rest of the two weeks' recovery time is sitting at home taking it easy — no driving and no exertion," Dr Hanikeri says. "If you're just having one procedure, it will usually be about two nights in hospital — but you'll still need a fortnight to heal."

"Most wounds are healed well at two

weeks but the areas can feel tight and sore for a bit longer than that," says Tim Hewitt.

HOW MUCH DOES IT COST?

"Prices will always depend on the nature and complexity of surgery, length of anaesthetic time, hospital fees and whether or not the operation qualifies for rebates," Dr Nguyen says. "Any of the procedures can cost upwards of \$5000 depending on those factors."

Dr Hanikeri says if patients are considering having a few procedures done, they can expect a total cost of about \$30,000. "That's the cost people need to think about."

PRICE ESTIMATES:

Without private health:

Sleeve: \$18,000.

Band: \$13,000.

Gastric bypass: \$20,000.

Balloon: \$5000.

With private health:

Sleeve: \$3000-\$5000

Band: \$2500-\$4500

Gastric bypass: \$5000

Intra-gastric balloons

are not covered

by insurance.

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