

Laparoscopic Minimally Invasive Weight Loss Operation 腹腔鏡微創減重手術(英文)

Weight Loss Surgery

Obesity has become a global epidemic and also a very important public health issue in Taiwan. Many studies prove that obesity indeed increases the incidence rate of many chronic diseases such as diabetes, high blood pressure, cardio vascular diseases, and certain cancers.

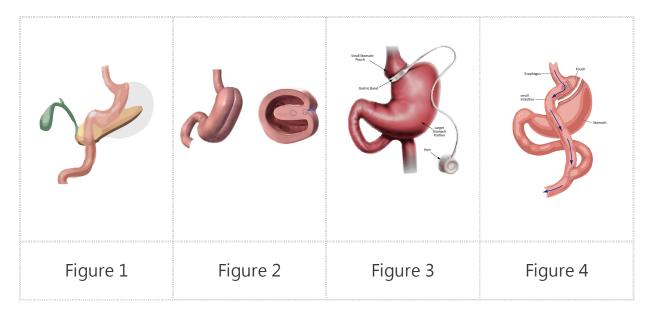
Although everyone knows that morbid obesity often leads to health deterioration, common weight loss methods often could not have lasting effects. Hence, how to provide an effective and long-lasting treatment to morbid obesity becomes a serious health issue.

Currently the only effective treatment for morbid obesity is surgery.

Type of Surgery

- Restrictive Surgery:
 - 1. Laparoscopic Gastric Sleeve Surgery (Sleeve Gastrectomy) (as shown in Figure 1))
 - Introduction: Remove sleeve from gastric antrum through laparoscopic surgery and retain approximately 100 c.c. of gastric capacity.
 - Advantage: Stomach hormone secretion and hunger perception are reduced after removing the stomach.
 - Disadvantage: Gastroesophageal Reflux Disease, approximately 15 %.
 - Rate of Reduced weight: 70 %.
 - 2. Laparoscopic Sleeve Plication (As shown in Figure 2)

- Introduction: Laparoscopic stitching technology folds the stomach at the gastric antrum to reduce stomach capacity and retain approximately 100 c.c. of gastric capacity.
- Advantage: A type of reversible surgery that reduces the amount of food intake.
- Disadvantage: Only approximately 1 % probability of gastric perforation.
- Rate of Reduced weight: 60 %.
- 3. Laparoscopic Gastric Band (as shown in Figure 3)
 - Introduction: Adjustable band is transplanted through laparoscopic surgery to divide the stomach into 2 sections by the band, and thereby reduce the amount of food intake and achieve weight loss.
 - Advantage: The band is adjustable and does not change the gastric tract structure with fewer days of hospitalization.
 - Disadvantage: Slow weight loss effect and takes approximately 1~3 years to achieve weight loss.
 - Rate of Reduced weight: 50 %.
- Gastric Bypass Surgery (Bariatric surgery) (as shown in Figure 4)
 - Introduction: Bariatric surgery forms a 30ml gastric pouch on the stomach to restrict the amount of food intake with intestinal bypass to reduce absorption.
 - Advantage: Currently the most effective weight loss surgery and extremely low, long-term, weight-regain rate.
 - Disadvantage: Lack of trace elements by approximately 15 %.
 - Rate of Reduced weight: 70 ~ 75 %.



- Patients of serious obesity with a Body Mass Index (BMI) ≥ 40 or a Body Mass Index (BM I) ≥ 32 with complications of internal medicine disease caused by obesity.
- Aged between 18 ~ 55 years old.
- Patients without psychiatric disease and endocrine system.
- Patients who can accept general anesthesia surgery.

Precautions

- Mortality rate is smaller than 0.1 % (a safe surgery similar to Laparoscopic Cholecystectomy).
- Bariatric surgery requires long-term supplement of vitamin complex after the surgery.
- Nutrition guidance is required in the 6 months after the surgery.
- Patients will require one return visit for follow-up in the 1st week, 1st month, 3 months, 6 months, 1 year and annually afterwards.

Post Wounds

Laparoscopic surgery will only need 3~5 incisions sized between 0.5~1 cm and could even be one single-cut laparoscopic surgery. The wound can be hidden by the belly button and nearly disappears after the surgery. The wound after surgery is smaller than the traditional surgery, which can reduce post-operative pain and reduces the days of hospitalization.



若有任何疑問,請不吝與我們聯絡電話: (04) 22052121 分機 1641 HE-20082-E