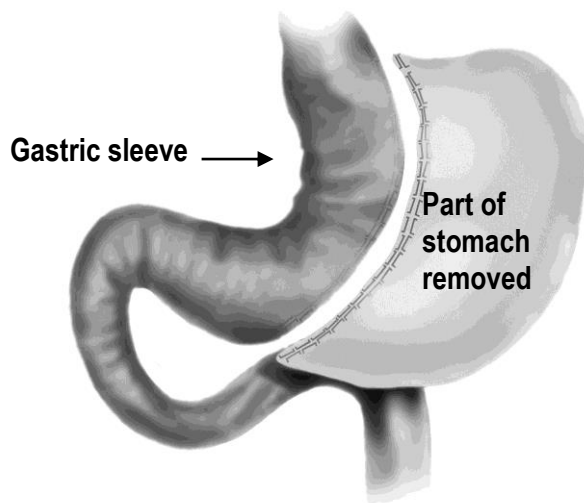


Bariatric Surgery: Sleeve Gastrectomy

How is it done?

A surgeon makes several small openings in the abdomen to place the laparoscopic (surgical) tools. Surgical staples are used to divide the stomach into two sections. One section is long and narrow, called a *sleeve*. Most of the stomach (about 80%) is removed from your body (see the picture below).

Food passes into the sleeve from the throat and out into the intestine. The size of the gastric sleeve is about $\frac{1}{3}$ – $\frac{1}{2}$ cup (80–120 mL).



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How does it work?

The small pouch limits the amount of food you can eat at one time to about 1 cup (250 mL). You will feel full eating smaller portions. When you eat less food, you may take in fewer calories, which will help you lose weight.

After surgery, your body will produce less *ghrelin*, which is an appetite hormone. This helps you to feel less hungry.

There will be no changes to your intestine; the only changes will be to your stomach. This means your body will absorb most of the nutrients from the foods you eat.

What are the risks or side effects?

- This procedure cannot be reversed because most of the stomach is removed. Some people may have another surgery to change to a gastric bypass.
- You are at risk for low levels of vitamins and minerals because you are not eating as much food and not as many nutrients are absorbed.
- To get enough vitamins and minerals after surgery:
 - eat healthy meals and snacks.
 - take vitamin and mineral supplements each day.
 - go for blood tests regularly.
- You may take in extra calories and regain weight if you:
 - choose high calorie foods more often.
 - eat too much or too often (grazing).