

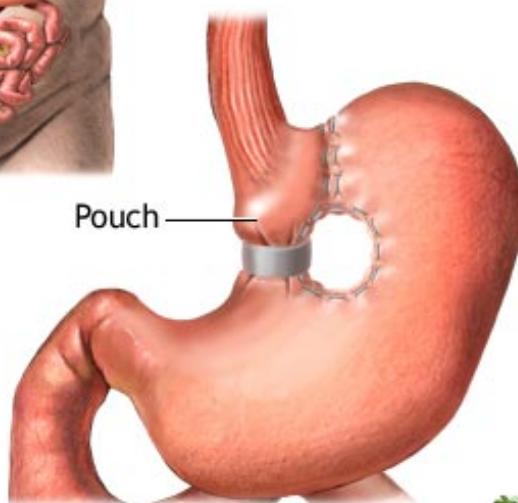


Vertical Banded Gastroplasty Mcleans Procedure

This is a procedure which has been about since the early 1980's but not done that often any more. The reason for this is the high risk of weight regain, and therefore the patient is urged to consider the RNY instead. It carries less risk though and this is why it would still be performed on overweight patients who perhaps have other operative risk factors involved. The operation extends the oesophagus into the stomach, to form a new upper stomach pouch. The stomach is resected to reduce stomach volume as shown in the picture, and then a fixed band is placed around the bottom of the pouch to limit quantity and size of food intake.



Band and staples are used to create a small stomach pouch



ADAM.

Understanding that the pouch is about the size of an egg and the opening through to the stomach is restricted by a fixed band, is vital to the success of this procedure. The pouch can be stretched by not stopping food intake when you feel full. The stomach volume is reduced by the procedure too but everything else is intact as before. This procedure is a tool to allow you to re-educate your mind about the way you eat and what you eat. It will restrict your intake immensely and you will get a feeling of fullness much sooner than pre op because the nerve receptors are at the top of the pouch and will send off the signal to your brain that you are full and should not eat any more. If you ignore this and keep eating, you will not lose the weight. The fixed band is also a tool to restrict you from eating large mouthful's of food at once. If it does not fit through the band, it will sit in the pouch and cause you pain. Eventually, you will be sick which will get rid of the blockage. Food has to be chewed very thoroughly and swallowed in small quantities to avoid this.

Pro's

Less invasive You are having a much less invasive procedure and are less likely to develop complications during the operation. This is why it is a useful procedure for more 'at risk' patients.

Good weight loss Weight loss will be achieved through the smaller portion sizes, and modification of eating habits. If you

carry on eating after you feel full though, you will jeopardise your weight loss.

No Fills needed The band used in this procedure is not adjustable. It is a fixed band and the restriction you have on day one of your operation will be the same 4 years later. The up side to this is that you don't have to mess about trying to find the right amount of 'fill' in the band, but the downside is if you feel too restricted and cannot live with it, you will have to return to theatre.

No sugar or fat limitations Unlike the RNY and DS, this procedure leaves the bowel and stomach exit intact. Therefore you will not experience dumping syndrome which occurs to the patients who have alternative surgeries. However, beware that your sugar and fat intake will be digested and stored by your body the same way they were pre op.

Better results than on a diet Because you have a tool that will aid your feeling of saity and make you feel full much sooner than before, your intake will be much reduced. You are far more likely to successfully lose your excess weight with this tool than on any diet or tablet alone. The success is based on your compliance though.

Con's

Weight regain Because the pouch can and will stretch after a while, your volume intake can and will increase. It is down to you to not over stretch your pouch in the first year post op to enable you to continue losing or maintaining weight. _

Not as effective as RNY Because it does not have the malabsorption qualities of the RNY or DS, and the stomach is still largely intact, the weight loss with this procedure is not as radical as the RNY or DS.

Non Adjustable band The fixed band means that it will control what goes through it and what doesn't. It is not able to be filled and therefore you will have to live with the size that it s set to.

Stomach erosion As with the adjustable band, the risks of getting an ulcer or some erosion are possible. You need to be aware of these risks and if you get any ongoing heartburn type pain the you need to report this to your Dr or Surgeon as soon as possible.