

Information Session: Bariatric Surgery

Dr. Abraham Betancourt

Dr. Eduardo Parra-Davila



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HEALTH NETWORK

WEIGHT LOSS
MANAGEMENT

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Good Samaritan Bariatric and Weight Loss Management Program

1309 N Flagler Drive
West Palm Beach, FL 33401
GSMCBMI@tenethealth.com

Meet the Surgeons



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Abraham Betancourt, MD



Eduardo Parra-Davila, MD,
FACS, FASCRS



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Program Experience:

- Our Surgeons have completed more than 4,000 laparoscopic and robotic cases
- Certified Bariatric Nurse with more than 20 years experience
- Bariatric Dietitian has more than 15 years experience
- Members of American Society for Metabolic and Bariatric Surgery
- Metabolic and Bariatric Accreditation Award
- Blue Cross Blue Shield Designated Blue Distinction Center for Bariatric Surgery



Designated
BlueDistinction®
Center
Bariatric Surgery





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What is obesity?

- A complex disease involving an excessive amount of body fat
- Defined by a Body Mass Index (BMI) 30 or greater
- According to the Center of Disease Control (CDC):
 - 1999-2000 through 2017-March 2020, U.S. obesity prevalence increased from 30.5% to 41.9%
 - The prevalence of severe obesity increased from 4.7% to 9.2% (NHANES 2021)
- Leading cause of death in U.S.
- Contributing factors include lifestyle, dietary choices, genetic and metabolic processes

Body Mass Index



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Prevalence of Overweight and Obesity



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	% All (Men and Women)	% Men	% Women
Overweight	30.7	34.1	27.5
Obesity (including severe obesity)	42.4	43.0	41.9
Severe Obesity	9.2	6.9	11.5

Age-adjusted percentage of U.S. adults with overweight, obesity, and severe obesity by sex, 2017-2018 NHANES Data

As shown in the table above:

- Nearly 1 in 3 adults (30.7%) are overweight
- More than 1 in 3 men (34.1%) and more than 1 in 4 women (27.5%) are overweight
- More than 2 in 5 adults (42.4%) have obesity (including severe obesity)
- About 1 in 11 adults (9.2%) have severe obesity
- The percentage of men who are overweight (34.1%) is higher than the percentage of women who are overweight (27.5%)
- The percentage of women who have severe obesity (11.5%) is higher than the percentage of men who have severe obesity (6.9%)

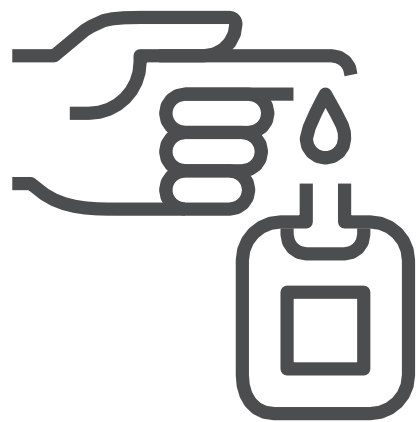
Obesity Related Co-Morbid Conditions



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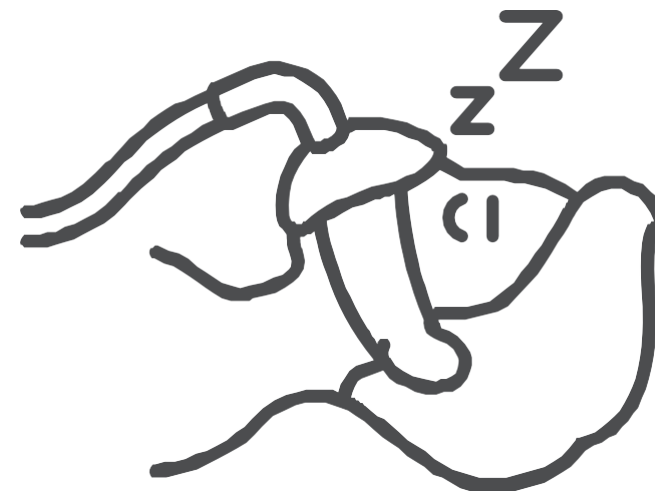
What comorbidities qualify for bariatric surgery?



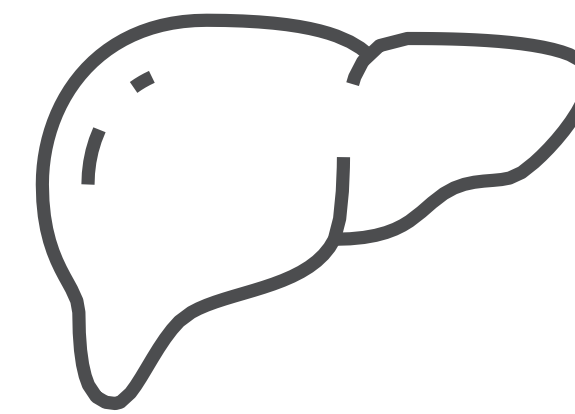
Diabetes



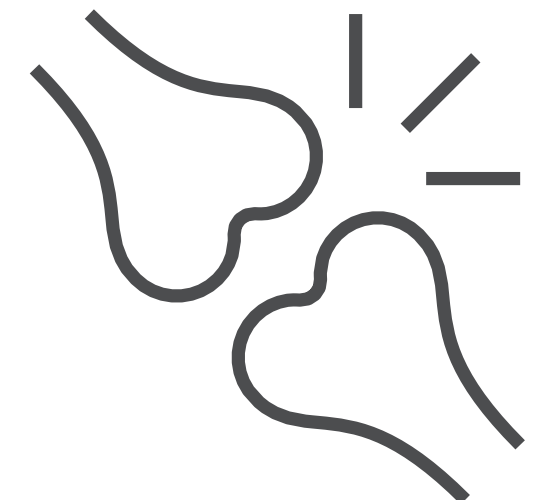
Gastro-esophageal Reflex
Disease (Heartburn)



Sleep Apnea



Steatohepatitis
(Fatty Liver Disease)



Degenerative
Joint Disease

Overweight and obesity were associated with nearly 1 in 5 deaths(18.2%) in the U.S. between 1986-2000, according to a study published in the American Journal of Public Health.

Treatment Options



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What are the options to treat obesity?

- Healthy eating plan that is sustainable (not a FAD diet!)
- Regular structured exercise program
- Join a medical weight loss program:
 - Nutrition therapy with a Registered Dietitian
 - Anti-obesity medication, supervised by Nurse Practitioner
- Surgical Weight Loss Program
 - Robotic Laparoscopic Gastric Bypass (Roux-en-Y)
 - Robotic Laparoscopic Sleeve Gastrectomy
 - Robotic Conversion or Revision Surgery



Surgical Weight Loss Requirements



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Who is a candidate for surgical weight loss?

- BMI > 40
- BMI > 35 with one or more co-morbid conditions
- Non-smoker
- > 18 years of age
- History of weight loss attempts:
 - Weight Watchers, Atkins, keto, intermittent fasting
 - Exercise
 - Weight loss drugs (Ozempic, Phentermine, Contrave, Wagovy)
- No psychological contraindications



Surgical Treatment Options



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What are the different types of bariatric surgery?

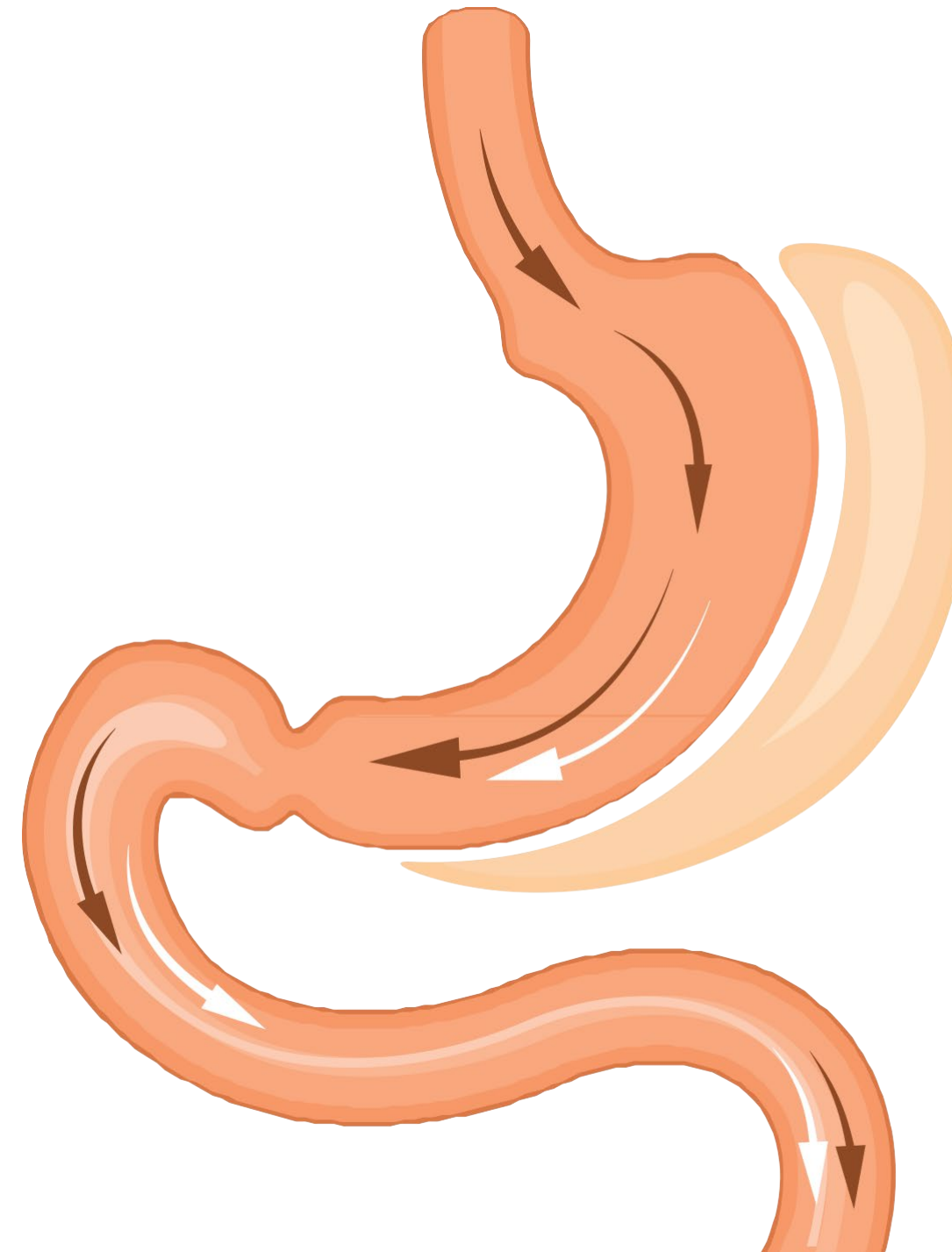
- Robotic-Assisted Laparoscopic Gastric Bypass (Roux-en-Y)
- Robotic-Assisted Laparoscopic Sleeve Gastrectomy
- Follow up care for Gastric Band
- Robotic-Assisted Laparoscopic Sleeve Gastrectomy Conversion to Gastric Bypass
- Robotic-Assisted Laparoscopic Revision of Gastric Bypass



Studies show bariatric surgery may reduce a patient's risk of premature death by 30-50%.

Robotic Laparoscopic Sleeve Gastrectomy

- Restrictive Procedure
- Non Reversible procedure
- Excess stomach is removed (80-85%)
- Decrease in Ghrelin
- Typically a 25-35% body weight loss from your baseline starting point
- Allows food to pass normally through your digestive tract
- May worsen or cause new onset reflux and heartburn



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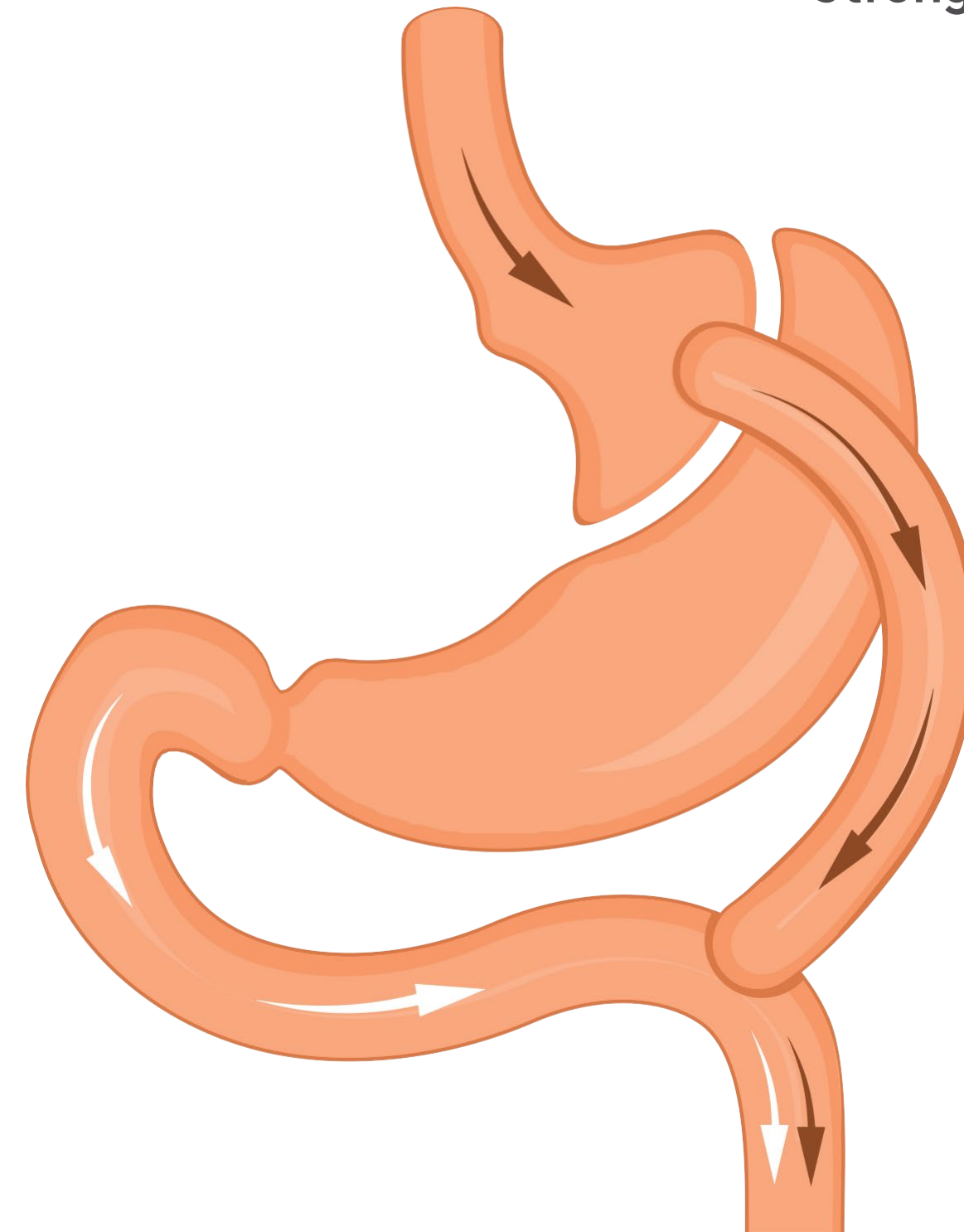
Robotic Laparoscopic Gastric Bypass (Roux-en-Y)

- Considered the “Gold Standard “ of bariatric surgery
- Combination of restrictive and malabsorptive
- Gut hormone changes, improving insulin sensitivity and increased fullness with smaller portions
- Creates a smaller stomach pouch
- Allows food to bypass part of the intestines, limiting calorie absorption
- Reliable and long-lasting weight loss
- Effective for remission of obesity-associated conditions
- Refined and standardized technique



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Complications

Possible Acute Surgical Complications

- Nausea
- Vomiting
- Wound infection
- Hemorrhage
- Anastomotic leak
- Pulmonary embolism or deep vein thrombosis
- Bowel blockage or obstruction
- Mortality rate less than 0.1%
- Constipation

Late Surgical Complications

- Marginal ulcers
- Stricture
- Deep vein thrombosis
- Vitamin deficiency
- Dumping syndrome
- Internal hernia

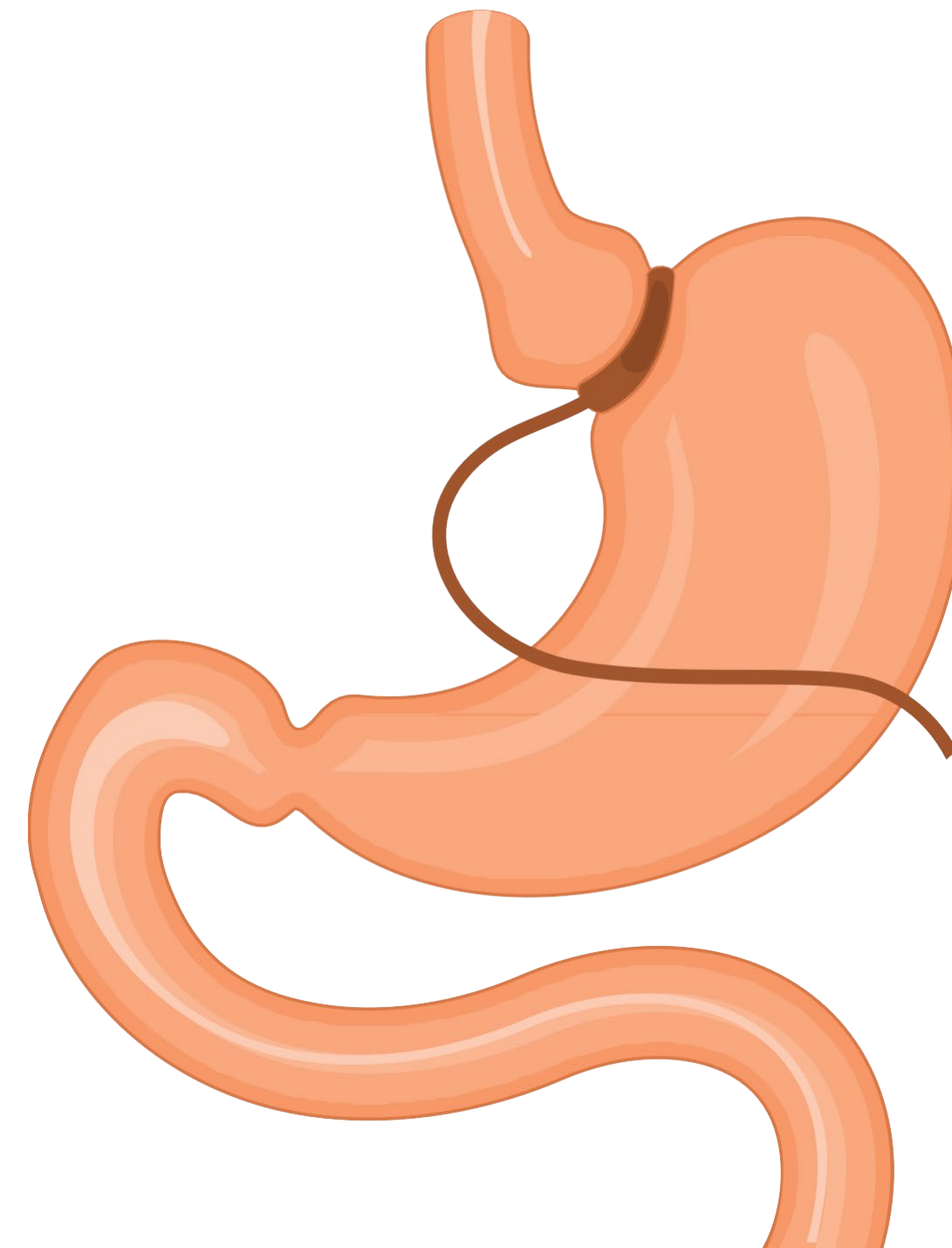
Gastric Banding

- Follow up treatment (Band Fills, if medically appropriate)
- Option to convert to surgical option, if medically necessary



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Pre-Surgery Requirements



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What steps are required before weight loss surgery?

1. Watch this video
2. Complete patient history forms
3. Attend orientation
4. Meet with program nurse, dietitian and surgeon
5. Obtain preoperative class
6. Attend support group
7. Obtain clearances, including an EGD
8. Pre-op with Surgeon



Post-Surgery Follow Up



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What steps are required after weight loss surgery?

1. Lifelong commitment to the program
2. Lifelong follow up with the Bariatric Team
3. Follow up with Surgeon 2 weeks after procedure, 3 months, 6 months and annually for life with Surgeon
4. Lifelong vitamin supplementation
5. Annual labwork to test vitamin levels



Support Group



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What are the benefits of a support group?

- Great way to connect to your peers, who are also having surgery or who already had surgery
- Hear perspective from others on issues you are experiencing
- Listen to the challenges other people are experiencing in similar situations
- Long-term maintenance of weight management behaviors
- We require support group prior to surgery and encourage you to maintain participation with the support group after surgery

What types of support groups are available?

- Monthly daytime group
- Monthly mental health support group
- Monthly general support group



Keys to Success

How can I ensure my weight loss success?

- Lifestyle change with diet and exercise
- Improve relationship with food (working with mental health counselor, if needed)
- Follow up with Bariatric Team regularly
- Attend support groups
- Regular visits with dietitian
- Vitamin supplementation

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For any questions, please contact our office:
772-255-7550
GSMCBMI@tenethealth.com



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