




Procedure	Procedure Image	Mechanism of weight loss	Hospital & Recovery	Unique issues to procedure
Sleeve Gastrectomy		<ul style="list-style-type: none"> • Removes ~80% of the stomach without bypassing intestines • Creates a small narrow 'sleeve' shaped stomach and keeps pylorus intact • Restricts how much you can eat at one time • Reduces your appetite through favorable changes in gut hormones 	<ul style="list-style-type: none"> • Procedure takes about 1 hour • Inpatient stay 1-2 nights • Out of work 2-4 weeks (depending on job) • Return to clinic at 1 month postop to transition to regular texture diet 	<ul style="list-style-type: none"> • Preexisting reflux (GERD) might be made worse • Less effective at diabetes resolution than Bypass or Switch • Choice procedure for adolescents, or more complex patients due to no manipulation of small intestine • Option for 2nd stage in the future (Duodenal Switch) • 50-70% Excess weight loss
Gastric Bypass		<ul style="list-style-type: none"> • Creates a small pouch which is about 85% smaller than the size of your current stomach • Restricts how much you can eat at one time • Bypasses part of small intestine and limits how much is absorbed • Reduces your appetite through favorable changes in gut hormones 	<ul style="list-style-type: none"> • Procedure takes about 1-2 hours • Inpatient stay 2 nights • Out of work 2-4 weeks (depending on job) • Return to clinic at 1 month postop to transition to regular texture diet 	<ul style="list-style-type: none"> • More effective at diabetes resolution than sleeve • Considered anti-reflux procedure due to ability to resolve GERD • May experience dumping syndrome or reactive hypoglycemia with concentrated sweets • Connection between stomach and intestine puts more at risk for ulcer • 60-75% Excess weight loss
Duodenal Switch		<ul style="list-style-type: none"> • Creates a 'sleeve' shaped stomach first • Restricts how much you can eat at one time • Creates malabsorption by bypassing large part of small intestine after pylorus • Reduces your appetite through favorable changes in gut hormones 	<ul style="list-style-type: none"> • Procedure takes about 2-3 hours • Inpatient stay 2-3 nights • Out of work 2-4 weeks (depending on job) • Return to clinic in 1-2 weeks for drain removal • Return to clinic at 1 month postop to transition to regular texture diet 	<ul style="list-style-type: none"> • Requires additional attention to fat soluble vitamins (ADEK) • Complex surgical procedure – experienced surgeons only • Protein and fat malabsorption occurs by nature of procedure • Diarrhea, malodorous bowel movements/gas normal • 70-80% Excess weight loss