Metabolic and Bariatric Surgery Procedures offered at MUSC Health

Procedure	Mechanism of weight loss	Hospital & Recovery	Unique risks/benefits to procedure
Sleeve Gastrectomy	 Removes 80% of the stomach without bypassing intestines Creates a small narrow 'sleeve' shaped stomach Restricts intake of food/fluids Reduces your appetite through favorable changes in gut hormones 	 Procedure takes about 1 hour Inpatient stay 1 night Out of work 1-4 weeks Return to clinic at 1 month postop to transition to regular texture diet 	 Expected weight loss: 50-70% of excess weight Preexisting reflux (GERD) might be made worse Less effective at diabetes resolution than Bypass or Switch
SADI	 Creates a 'sleeve' shaped stomach first Restricts how much you can eat at one time Creates malabsorption through a single loop bypass of the small intestines after pylorus Reduces your appetite through favorable changes in gut hormones 	 Procedures takes 1.5-2 hours Inpatient stay 1 night Out of work 1-4 weeks Return to clinic at 1 month postop to transition to regular texture diet 	 Expected weight loss: 70-80% of excess weight Protein and fat malabsorption occurs which require additional attention to fat soluble vitamins (ADEK) Experienced surgeons only Effective at diabetes resolution
Gastric Bypass	 Creates a small pouch which is about 85% smaller than the size of your current stomach Restricts intake of food/fluids Bypasses part of small intestine and limits how much is absorbed Reduces your appetite through favorable changes in gut hormones 	 Procedure takes about 1-2 hours Inpatient stay 1 night Out of work 1-4 weeks Return to clinic at 1 month postop to transition to regular texture diet 	 Expected weight loss: 60-75% of excess weight More effective at diabetes resolution than sleeve Considered anti-reflux procedure May experience dumping syndrome Risk for ulcers, small bowel obstruction, and internal hernias NSAIDS are contraindicated- Motrin- Ibprofuen- Aleeve, Goodies Powder
Duodenal Switch	 Creates a 'sleeve' shaped stomach first Restricts intake of food/fluids Creates malabsorption by bypassing large part of small intestine after pylorus Reduces your appetite through favorable changes in gut hormones 	 Procedure takes approx 2 hours Inpatient stay 1-2 nights Out of work 1-4 weeks If drain, 1 week post surgery visit for removal Return to clinic at 1 month postop to transition to regular texture diet 	 Expected weight loss: 70-80% of excess weight Experienced surgeons only Protein and fat malabsorption occurs by nature of procedure, which required additional attention to fat soluble vitamins (ADEK) Diarrhea, malodorous bowel movements/gas may occur