Let's learn about:

Obesity
Bariatric Surgery
Our Program
Facts
Obesity is Common

Approximately 1/3 of adults in Michigan are obese.
Obesity is Unhealthy

Obesity is related to many illnesses such as:

- diabetes
- heart disease
- high cholesterol
- sleep apnea
- arthritis
- fatty liver disease
- infertility
- certain cancers
Losing weight helps:

Weight loss can:

Improve your health
Reduce your need for prescription medication
Extend your life
Bariatric Surgery Works

National Institutes of Health (NIH) recognizes bariatric surgery as the only effective treatment to combat severe obesity and maintain weight loss in the long term.
Bariatric Surgery:

Gastric Bypass

Sleeve Gastrectomy
Laparoscopic Surgery

- Shorter hospitalizations
- Quicker return to activity
- Less complications
Procedures:

Sleeve Gastrectomy
Sleeve Gastrectomy

- General anesthesia
- 1-2 hour procedure
- 2-3 days in the hospital
- 55% - 65% excess body weight loss
- 60-100 lbs weight loss
- Maximal weight loss occurs at 1 year.
Risks and Complications

- Overall complications < 10%
- Major complications < 2%
- Not reversible
- Heartburn
Procedures:

Gastric Bypass
Gastric Bypass

- General anesthesia
- 2-3 hour procedure
- 2-3 days in the hospital
- 65% - 75% excess body weight loss
- 100-150 lbs weight loss
- Maximal weight loss occurs at 1 year.
Risks and Complications

- Overall complications <15%
- Major complications < 3%
- Ulcers
  - Highest risk with smokers and use of NSAIDs
- Dumping syndrome
- Internal hernia
- Longer operation = higher risk of blood clots and wound complications
Risks and Complications

- Overall complications < 15%
- Major complications < 3%
- Ulcers
  - Highest risk with smokers and use of NSAIDs
- Dumping syndrome
- Internal hernia
- Longer operation = higher risk of blood clots and wound complications
Why does surgery work?

Not clear but there are lots of theories:

- Limits portion size
- Decreases absorption of nutrients
- Changes body’s regulation system for gaining and losing weight
When does it fail?

- Eating habits and food choices
- Physical activity
- Genetics
- Gender
- Illness
- Age
- Medications
What happens after surgery?

- **2-3 days** in the hospital
- **2 weeks** - follow up in surgery clinic
- **2 months** - follow up in surgery clinic
- **6 months** and **yearly** - follow up in the Metabolic and Endocrine Clinic
What happens after surgery?

- 70 grams of protein/day
- 64 fluid ounces/day
- Small portions
  - **No** concentrated sweets
  - **No** carbonated drinks
Taking supplemental vitamins is IMPORTANT!

Weight loss surgery reduces vitamin absorption.
<table>
<thead>
<tr>
<th>Time</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast</td>
<td>1 Multivitamin 1 Sublingual Vitamin B12 (500mcg)</td>
</tr>
<tr>
<td>AM Snack</td>
<td>---</td>
</tr>
<tr>
<td>Lunch</td>
<td>Calcium Citrate (2 Tablets)</td>
</tr>
<tr>
<td>PM Snack</td>
<td>---</td>
</tr>
<tr>
<td>Dinner</td>
<td>Calcium Citrate (2 Tablets)</td>
</tr>
<tr>
<td></td>
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<td><strong>AM Snack</strong></td>
<td>Calcium Citrate (2 Tablets= 500mg)</td>
</tr>
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</table>
What’s the best procedure for me?

Gastric Bypass

Sleeve Gastrectomy
Balancing the risks and benefits

Weight Loss

Complications
## Outcomes Calculator

<table>
<thead>
<tr>
<th></th>
<th>Sleeve Gastrectomy</th>
<th>RYGB</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Weight (Lost) at Year 1</strong></td>
<td>217 (83)</td>
<td>203 (97)</td>
</tr>
<tr>
<td><strong>Comorbidity Resolution</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Insulin Dependent</td>
<td>81 %</td>
<td>86 %</td>
</tr>
<tr>
<td>Hypercholesterolemia</td>
<td>59 %</td>
<td>77 %</td>
</tr>
<tr>
<td>Sleep Apnea</td>
<td>70 %</td>
<td>76 %</td>
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</tbody>
</table>
## Outcomes Calculator

<table>
<thead>
<tr>
<th>COMPLICATIONS</th>
<th>SLEEVE GASTRECTOMY</th>
<th>RYGB</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANY</td>
<td>4.1 %</td>
<td>7.06 %</td>
</tr>
<tr>
<td>SEVERE</td>
<td>1.33 %</td>
<td>2.06 %</td>
</tr>
</tbody>
</table>
Weight Loss = Change

Weight loss is more than just a number

• It’s important to match your expectations with realistic goals:
  • Reduction of comorbid conditions
  • Reduction of prescription medications
  • Life-long lifestyle changes
  • Possible complications
Am I a candidate?

Body mass index (BMI)

BMI > 40
or
BMI > 35
+ Weight related illnesses
Am I a candidate?
Can tolerate general anesthesia.

Able to make dietary and lifestyle changes

Able to exercise

Not smoking

Psychological illnesses are well controlled

No active cancer
The Road to Surgery
Informational Meeting

Psychological Evaluation + Medical Evaluation + Dietary Evaluation

Review Committee Meeting (RCM)

2 Support Group Meetings + RCM Tasks Completed + 3, 6 or 12 Months Medically Supervised Weight Loss Documented

Insurance Authorization

Pre-operative History and Exam + Meet Surgeon Discuss Procedure + Pre-Surgery Nutrition Class

Surgery
Informational Meeting

Psychological Evaluation + Medical Evaluation + Dietary Evaluation

Review Committee Meeting (RCM)

RCM Tasks Completed

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Surgery
Review Committee Letter

- Risk/Benefit Profile
  - Estimated weight at 1 year
  - Estimated complication rate

- Requirements

- Recommendations
Informational Meeting

Psychological Evaluation + Medical Evaluation + Dietary Evaluation

Review Committee Meeting (RCM)

2 Support Group Meetings + RCM Tasks Completed + 3, 6 or 12 Months Medically Supervised Weight Loss Documented

Insurance Authorization

Pre-operative History and Exam + Meet Surgeon Discuss Procedure + Pre-Surgery Nutrition Class

Surgery
Insurance

• Coverage Varies:
  • Private Insurance
  • Veterans
  • Medicare

• You need to contact your provider for specific details

• Use our insurance questionnaire as a guide
Important questions for your insurance carrier:

1. Representative at insurance company (name): ________________________________
2. Do I have benefit coverage for medically necessary **weight loss surgery** for morbid obesity from my insurance company?  □ Yes  □ No
3. Are above procedures (codes listed above) covered if I have surgery at the University of Michigan?  □ Yes  □ No
4. What is my insurance benefit or exclusion? ________________________________
5. Does my weight loss surgery benefit require a medically supervised weight loss trial program?  □ Yes  □ Yes Length of Program? ________________  □ No  Skip to next question.
6. Is a primary care physician required to complete the weight loss documentation or can a specialty doctor recommend and follow the weight loss trial program?

________________________________________
7. What is my co-pay for a primary care office visit? $________________________
8. What is my co-pay for a specialist care office visit (example: lap band adjustment)? $________________________ *(Adjustments for the lap band: CPT code: HCPCS S2083)*
9. How many nutrition appointments will be covered with the diagnosis of morbid obesity? Individual _____ Group _____
10. When is the effective date of the policy? ____________________________ (MM/DD/YYYY)
11. When is the renewal date? ____________________________ (MM/YYYY)
12. Do I have a pre-existing clause?  □ Yes  □ No. If No, skip to question # 14.
Medically Supervised Weight Loss Documentation

Assessment and Treatment Plan for Obesity
This form must be completed at each office visit for the duration specified by your insurance company.

Patient Name: ___________________________ Date of Visit: ______________________
Registration Number: ____________________
Date of Birth: ___________________________

Weight: ______________________ lbs. Height (first visit): ____________________ in. BMI: ______________
Blood Pressure: _______________ / ______________ Pulse: _______________

Diet (Prescribed caloric restriction, review of dietary intake and recommendations).
Notes: __________________________________

_______________________________________

Recommended Dietary Goal(s):

Physical Activity (Physical exercise program appropriate for age and physical condition. Recommend achievable goals.)
Notes: __________________________________

_______________________________________

Recommended Exercise Goal(s):

Behavioral Intervention (Specific strategies and tools for overcoming barriers and improving dietary compliance, for example log books, support groups, stress management, social support).
Notes: __________________________________

_______________________________________

Pharmacotherapy (This must be addressed and documented. List FDA approved weight loss drugs and strength or indicate that patient is unable to tolerate or refuses pharmacotherapy).
Notes: __________________________________
Multidisciplinary Team

Surgeons
Endocrinologists
Physician Assistants
Psychologists
Dietitians
Certified Bariatric Nurse
Patient Service Associates
On-line Resources

UM Adult Bariatric Surgery Program

A community site for participants in the Adult Bariatric Surgery Program at the University of Michigan. This website does not provide specific medical advice and does not endorse any medical or professional service obtained through information provided on any links to this site. Use of this website does not replace medical advice from a qualified medical provider.

While the content of this website is frequently updated, medical information changes rapidly and therefore, some information may be out of date, and/or contain inaccuracies or typographical errors.

Please click the "resources" tab on the left side of the screen to access all the folders containing patient education documents, recipes and support group schedules! Support groups are only open to those patients in the University Michigan Bariatric Program.

If you have questions for the staff, please contact our office during normal business hours (Monday through Friday, 4:30pm) at 734-647-6685. We will not respond to inquiries left in the chat room!

The purpose of the chat room is to seek and provide support throughout your weight loss journey. Inappropriate or offensive comments towards patients, staff and/or the program will be removed from the chat room.
## Adult Bariatric Surg: Resources

<table>
<thead>
<tr>
<th>Location: Adult Bariatric Surg Resources</th>
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<tbody>
<tr>
<td>Remove</td>
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</table>

<table>
<thead>
<tr>
<th>Title</th>
<th>Access</th>
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</thead>
<tbody>
<tr>
<td>Adult Bariatric Surg Resources</td>
<td>Add ▼</td>
</tr>
<tr>
<td>Additional Websites of Interest</td>
<td>Add ▼</td>
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<tr>
<td>Cookbooks</td>
<td>Add ▼</td>
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<tr>
<td>Exercise</td>
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<td>Mental Health</td>
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<td>Mentor Program</td>
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<td>Newsletters</td>
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<td>Patient Education Binder</td>
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<tr>
<td>Pre- &amp; Post-op Nutrition Information</td>
<td>Add ▼</td>
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<tr>
<td>Recipes</td>
<td>Add ▼</td>
</tr>
<tr>
<td>Recording your daily intake/activity</td>
<td>Add ▼</td>
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<tr>
<td>Support Group presentations and handouts</td>
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</tr>
<tr>
<td>Support Group Schedule (current)</td>
<td>Add ▼</td>
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</tbody>
</table>
Weight-Loss Conditioning Program

Transitions Training Studio
325 East Eisenhower Parkway
Garden Level, Suite 12
Ann Arbor, MI 48108

Refunds and Credit Policy
In the case of severe injury or emergency, full or partial refunds may be issued. A doctor's note must accompany a written request for refund. Credit may be given for all participants who wish to return to the program at a later date due to these circumstances. Prices are subject to change at any time without notice.

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Hunger Within

• Nationally recognized treatment for weight management

• 12 week program

• Explores core reasons for overeating (triggers for emotional eating)

https://www.uofmhealth.org/hunger-within-workshop
Clinic

Domino’s Farms
Lobby A, Suite 1200
4008 Ave Maria Dr.
Ann Arbor, MI 48105
Next Steps

1. Provide your name and contact information.

2. Contact your insurance carrier about details of your policy