

MEDICAL OBESITY MANAGEMENT IN CANADA



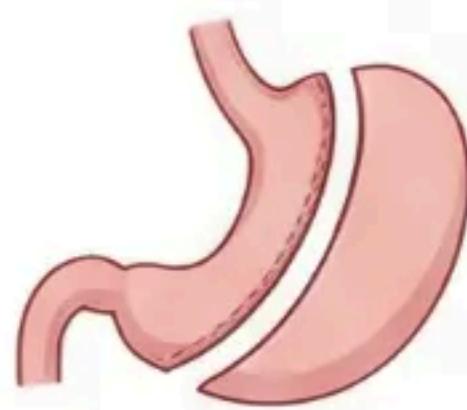
Bariatric Surgery & Key Principles

4. TREATMENT OPTION 3: BARIATRIC SURGERY

WHO IS ELIGIBLE?

- BMI $\geq 40 \text{ kg/m}^2$ OR
- BMI $\geq 35 \text{ kg/m}^2$ with significant obesity-related disease(s) OR
- BMI 30-35 kg/m^2 with poorly controlled type 2 diabetes
- Age 18-70 (varies by center)
- Failed structured diet/exercise programs
- Psychological readiness

GASTRIC SLEEVE (SLEEVE GASTRECTOMY)



→ **Most Common Procedure**

- Removes 80% of stomach
- Weight loss: 50-60% of excess weight
- Less complex surgery
- Permanent change
- Reduces hunger hormone (ghrelin)

GASTRIC BYPASS (ROUX-EN-Y)



→ **Highly Effective for Diabetes**

- Creates small stomach pouch
- Weight loss: 60-70% of excess weight
- More complex procedure
- Best diabetes remission rates
- Changes digestion and hormones

BENEFITS BEYOND WEIGHT LOSS

- ✓ Type 2 diabetes remission (50-80%)
- ✓ Improved blood pressure and cholesterol
- ✓ Sleep apnea resolution
- ✓ Reduced joint pain
- ✓ Lower cardiovascular risk
- ✓ Improved quality of life

IMPORTANT CONSIDERATIONS

- ⚠ Surgical risks (2-4% complication rate)
- ⚠ Lifelong vitamin/mineral supplements required
- ⚠ Dietary modifications needed
- ⚠ Regular medical follow-up essential
- ⚠ Possible revision surgery (10-20% over 10 years)
- ⚠ Wait times: 1-5 years (varies by province)

5. KEY PRINCIPLES FROM OBESITY CANADA



CHRONIC DISEASE

Obesity requires long-term management, not quick fixes



REALISTIC GOALS

5-10% weight loss provides major health benefits



TEAM APPROACH

Physicians, dietitians, psychologists work together



PATIENT-CENTERED

Individualized treatment plans without stigma

NEXT STEPS: Talk to your healthcare provider about which treatment options are right for you. Obesity Canada provides free resources at obesitycanada.ca.

Remember: successful weight management is a journey, not a destination. Support is available.