

Surgery: Laparoscopic Sleeve Gastrectomy (Gastric Sleeve)

Patient Name: _____

Thank you for trusting us to be part of your weight loss journey. This document explains important information about sleeve gastrectomy. Please read it carefully and discuss any questions or concerns with your surgeon before signing.

Why this surgery?

Sleeve gastrectomy is a proven treatment for people with obesity. It is generally recommended if:

- Your body mass index (BMI) is **≥35**, or
- Your BMI is **≥30** and you have obesity-related health problems (e.g., diabetes, high blood pressure, sleep apnoea).

Expected Benefits

Weight loss

- On average, patients lose about **60% of their excess weight** in the first year.
- Some achieve more, especially with healthy eating and regular exercise.
- Weight loss usually continues for about 12 months, making this an important time to focus on building healthy habits.

Improvement in obesity-related conditions

Many health problems improve with weight loss, such as:

- Diabetes
- High blood pressure
- Sleep apnoea
- Polycystic ovary syndrome (PCOS)
- Joint pain and mobility issues
- Mood and energy levels

Your GP and specialists may need to **adjust your medications** as your health improves.

Risks and Possible Complications

All operations carry some risk. For sleeve gastrectomy, the key risks include:

Short-term (first few weeks)

- **Leak:** Rare but serious. A leak means fluid escapes from the stapled stomach and may require additional procedures, longer hospital stays, and a slower recovery.
- **Bleeding:** Rare; may need a blood transfusion or additional surgery.
- **Anaesthetic risks:** Such as allergic reactions (very uncommon).
- **Death:** Extremely rare (about 1 in 1,000 in Australia).

Medium to long-term

- **Heartburn/reflux:** Some patients experience new or worsened reflux. Most manage this with medication; a few may need another procedure.
- **Persistent nausea/vomiting:** Uncommon. Usually improves with time, dietary changes, or minor treatments.
- **Weight regain:** Some patients may regain weight over time. Continued healthy eating, portion control, and follow-up support are essential.
- **Nutritional deficiencies:** Rare if you take recommended vitamins and attend regular check-ups.

Other considerations:

- Temporary hair thinning (often improves within months)
- Possible food intolerances
- Extra skin after weight loss (may need later surgery if bothersome)
- Avoid pregnancy for at least **12–18 months** after surgery; use reliable contraception
- Stop smoking **at least 6 weeks** before surgery and do not restart
- Avoid alcohol for at least **1 month before** and **3 months after** surgery

What the Operation Involves

- **Gastroscopy:** We may check the inside of your stomach at the start of surgery.
- **Keyhole approach:** Usually five small cuts in the abdomen. Rarely, a larger cut may be needed.
- **Duration:** About 40 minutes.
- **Hospital stay:** 1–3 nights.
- **Recovery:**
 - 1–2 weeks off work.
 - Avoid heavy lifting (>5 kg) and strenuous exercise for 4 weeks.
- **Stomach size after surgery:**
 - At first: very small (about $\frac{1}{4}$ cup). Eating too quickly or too much may cause discomfort, nausea, or vomiting.
 - Later: gradually increases to about $\frac{1}{2}$ cup. It's important to keep portions small to avoid stretching your stomach.

After Surgery

- Pain and nausea are usually mild and improve within days.
- Avoid driving for the first week.
- Follow your dietary plan closely.
- Attend all scheduled follow-ups.

Consent

Please tick the boxes that apply:

- I have read and understood the information provided in this document.
- I have had time and opportunity to ask questions.
- I have no further questions I need to discuss.
- I am satisfied with the information given to me and I consent to sleeve gastrectomy.

Patient Signature: _____

Date: _____