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Risks & Benefits

Obesity is a chronic health problem that results from an excess of fat that exceeds the body's physical needs and is linked to the development of a number of other chronic health conditions, known as co-morbidities. Comorbidities are secondary illnesses that are caused by obesity.

Comorbidities include conditions such as:

- Cardiovascular disease
- Diabetes
- Hypertension
- Pulmonary dysfunction
- Osteoarthritis
- Gallbladder disease
- Cancer (breast and colon)

There are numerous studies that confirm the beneficial effects on health after bariatric surgery. Recent reviews have concluded that:

- **Diabetes** was completely resolved in 77% of patients and was improved in 86%
- **High blood pressure** was resolved in 62% of patients and improved in 79%
- **Abnormalities in lipids** were improved in 70% or more of patients
- **Obstructive sleep apnea** was completely resolved in 86% of patients

Bariatric surgery, also known as weight loss surgery, can assist severely obese patients in achieving long-term weight loss goals and improving their overall health. The decision to undergo bariatric surgery can be difficult due to the fact that patients must accept permanent post-operative lifestyle changes. **The purpose of surgery is to prevent, alleviate or cure the diseases that are associated with morbid obesity. It's only a tool. It is not cosmetic surgery.** Our healthcare team and support groups, along with your family and friends, can help you achieve this life-long goal.

Benefits

- Improvements to pre-existing medical conditions related to obesity
- Prevention of obesity-related diseases
- Increased energy
- Extended life span
- Increased self-esteem
- Weight loss (**note: this requires a lifestyle changes and ongoing patient commitment**)

Risks

- Surgery to produce weight loss is a serious and life-altering event. If you are thinking about surgery, you should completely understand what the operation involves. Prior to having any procedure done, patients and health care providers should carefully consider the following benefits and risks.

- Like any major abdominal operations, this procedure carries risks of **bleeding, infection in the incision, bowel blockage caused by scar tissue, hernia through the incision, rejection of sutures and adverse reactions to anesthesia**. From the Roux-en-Y procedure, **the most serious potential risk is leakage of fluid** from the stomach or intestines, which may result in abdominal infection and the need for additional surgery. There is also a small possibility of injury to the spleen, which may have to be removed if bleeding cannot be controlled. Some additional risks are directly related to being obese. These include **blood clots in the legs or lungs, pneumonia, and cardiac problems**.
- **In restrictive/malabsorptive operations**, such as the Roux-en-Y and Biliopancreatic Diversion with Duodenal Switch, there is a greater risk for **nutritional deficiencies**. This is because the procedure causes food to bypass the duodenum and jejunum where most iron and calcium are absorbed. Menstruating women may develop anemia because not enough vitamin B12 and iron are absorbed. Decreased absorption of calcium may also lead to osteoporosis. It will be necessary to take vitamins and supplements to prevent these deficiencies. For patients who have Duodenal Switch with Biliopancreatic Diversion surgery, they must also take fat-soluble vitamins A, D, E and K.
- Other, less serious risks of gastric bypass surgery are **ulcers in the stomach or small intestine**. There is also the phenomena of “**dumping syndrome**,” which consists of cramps, diarrhea, lightheadedness, sweating, and palpitations resulting from eating foods high in sugar content.
- Some obese patients who have weight loss surgery develop **gallstones**, which are clumps of cholesterol and other matter that form in the gall bladder. This is because during rapid weight loss, the risk of developing gallstones increases. This is usually prevented by taking a medication which is supplemental bile for the first six months after surgery.
- **A common risk of restrictive-only operations**, such as the laparoscopic adjustable band, is **vomiting**, caused when the smaller stomach is overstretched by food that has not been chewed well. Adjustable band slippage and saline leakage have been reported as well. Although restrictive operations lead to weight loss in almost all patients, they are less successful than combined restrictive/malabsorptive operations in achieving substantial, long-term weight loss.

PLEASE NOTE:

Women of child-bearing age should avoid pregnancy until their weight becomes stable. Rapid weight loss and nutritional deficiencies can harm a developing fetus. You will be advised not to become pregnant for 18 to 24 months after obesity surgery.

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