

Dr.G.Ramesh DNB, MRCS(UK)

Surgical gastroenterogist and Bariatric surgeon. He is postgraduated from st. Marthas hospital, Bangalore. He is a member of royal college of surgeons, UK. Has vast 17yrs experience in advanced laparoscopic surgery. He obtained fellowship in laparoscopic colorectal surgery from kyungpook university of South Korea. He was trained in bariatric surgery at Michigan university hospital, USA. Undergone Metabolic surgery training program at universal hospitals, Turkey. He has wide experience in Bariatric and metabolic surgery.



Dr. G. RAMESH DNB, MRCS(UK)

FELOW IN LAP COLORECTAL SURGERY (SKOREA).

ADVANCED LAPAROSCOPIC & BARBATRIC SUCIEON.

CHARMAN OF SELANU HOSPITALS PVT LTD., VIJAYAWADA.

CHEF SURGICAL GASTROPNITROLOGIST IN ANU HOSPITALS.

VISITING CONSULTANT IN PRIME HOSPITALS, HYDERABAD.

Who is eligible for weight loss surgery

- Body Mass Index of 35-40 with two comorbidities such as hypertension, Type 2 diabetes, sleep apnea, obesity-related cardiomyopathy, infertility, GERD, and arthritis of weight bearing joints or a BMI of 40 (about 100 lbs overweight) without comorbidities.
- Attempted medically managed weight loss programs without success.
- · A nonsmoker or willing to stop smoking.
- · Willing to make lifestyle changes necessary for maintaining weight loss.
- Willing to participate in the lifelong bariatric program including follow-up appointments and monthly support groups.

How to get started:

Attend a FREE INFORMATIONAL SEMINAR to learn about all aspects of bariatric surgery. You will have the opportunity to meet the surgeon and members of the bariatric team. 0866: 2438881, 2438889 or visit us on-line at anuobesolutions.com for a listing of seminars and to schedule one today!







LAPAROSCOPIC SLEEVE GASTRECTOMY

Laparoscopic Sleeve Gastrectomy is a restrictive procedure, which involves removal of 60-75% of the stomach, leaving a narrow gastric tube or sleeve. No intestines are removed or bypassed. This procedure will result in approximately a 50% loss of excess body weight in the first 6-12 months.

Advantages:

- Food restriction
- No intestinal bypass
- No post-op adjustments
- · 60% of excess body weight loss
- · Resolution of some comorbidities

Risks:

- Gastric leakage
- Nonreversible
- Ulcers
- · Nausea and vomiting



ADJUSTABLE GASTRIC BAND

Adjustable Gastric Band is a strictly restrictive weight loss surgery that does not involve rerouting or bypassing of the intestine. It works simply by decreasing the size of the stomach by placing a silicone band around the top part of the stomach, allowing you to feel full quicker and stay full longer. Weight loss is much slower with this procedure but you can expect to lose about 50-70% of your excess body weight in about three years. The band is intended to remain in place at all times, but can be removed in cases of emergency.

Advantages:

- · Restricts food intake
- Reversible
- · Less invasive
- · Resolution of some comorbidities

Risks

- Gastric perforation
- · Port malfunction
- Nausea and vomiting
- Band migration/slippage



ROUX-EN-Y

Roux-EN-Y is a laparoscopic surgical procedure that combines restrictive and malabsorptive components. It decreases the size of the stomach to about one-ounce capacity and bypasses part of the small intestine to decrease absorption. This is the most commonly performed weight loss surgery and you can expect to lose about 80% of your excess body weight within 12 months.

Advantages:

- Restricts food intake
- · Weight loss is rapid
- Average loss of excess weight is 60%-70%
- Resolution of some comorbidities
- No adjustments post-operatively

Risks:

- Vitamin and mineral deficiencies
- Dumping syndrome
- Ulcers
- Gastric leakage
- · Bowel obstruction

