

The Bariatric and Heartburn Center of Northeast Ohio

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A message from Dr. Chlysta:

Thank you for considering our program. Bariatric Surgery is a significant endeavor but it is very safe. There are many health benefits of Bariatric Surgery, but there are some risks. In many cases, truly change the course of one's life. Our program sets itself apart from others not only in the category of experience and safety, but also in friendliness and caring. Thank you.

This packet contains:

1. Information to determine if you are a candidate for bariatric surgery
2. Information on the general types of accepted bariatric procedures in the United States and how they work.
3. Information on Laparoscopic Sleeve Gastrectomy and Laparoscopic Roux-en-Y gastric bypass.
4. Information on the advantages of choosing Dr. Chlysta and his staff to help you achieve your goals.
5. A medical history form and information on how to get the process started.

FREE BARIATRIC INFORMATION SESSIONS

Please call our office at 330-926-3443 to register.

ARE YOU A CANDIDATE FOR BARIATRIC SURGERY?

You must meet all of the following requirements to be a candidate for bariatric surgery. Fulfilling all these criteria does not guarantee that you are a candidate. There may be other patient specific issues that affect candidacy.

1. **You must have a body mass index (BMI) of 40 or more**

OR

A BMI of 35 - 40 with obesity related health problems. These generally include high blood pressure, osteoarthritis, sleep apnea, type II diabetes, and many others. You can obtain your BMI from the chart on the next page or from an online calculator.

2. **You must not be addicted to drugs or alcohol or use tobacco products**
3. **You must be at least 18 years of age**
4. **You must be psychiatrically stable and able to understand all the risks and benefits of surgery as well as alternative options.**
5. **You must be a reasonable operative risk.**
This will be determined after a thorough evaluation.

Generally Accepted Mainstream Bariatric Procedures

Sleeve Gastrectomy
Roux-en-Y Gastric Bypass
Duodenal Switch
Gastric Banding

Bariatric Procedures We Offer

Laparoscopic Sleeve Gastrectomy
Laparoscopic Roux-en-Y Gastric Bypass

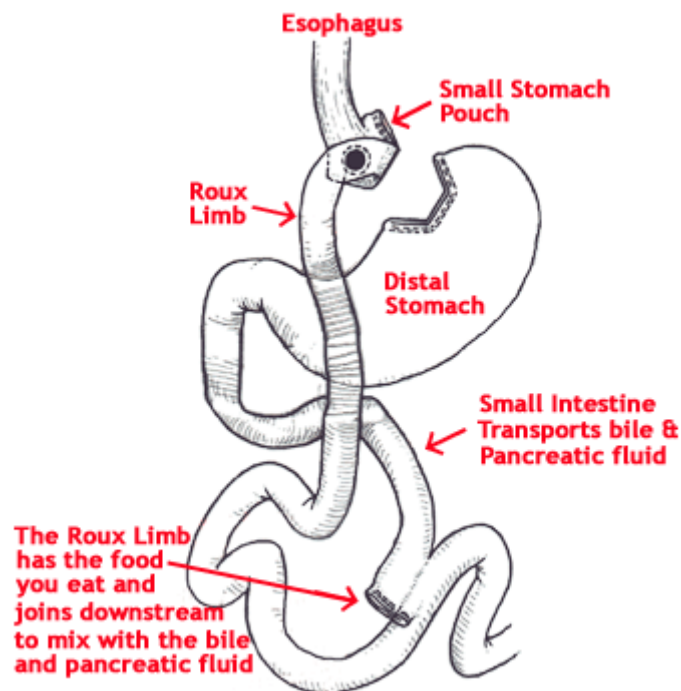
www.obesehelp.org

BODY MASS INDEX CHART

BMI	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54
Height (inches)	Body Weight (pounds)																		
58	172	177	181	186	191	196	201	205	210	215	220	224	229	234	239	244	248	253	258
59	178	183	188	193	198	203	208	212	217	222	227	232	237	242	247	252	257	262	267
60	184	189	194	199	204	209	215	220	225	230	235	240	245	250	255	261	266	271	276
61	190	195	201	206	211	217	222	227	232	238	243	248	254	259	264	269	275	280	285
62	196	202	207	213	218	224	229	235	240	246	251	256	262	267	273	278	284	289	295
63	203	208	214	220	225	231	237	242	248	254	259	265	270	278	282	287	293	299	304
64	209	215	221	227	232	238	244	250	256	262	267	273	279	285	291	296	302	308	314
65	216	222	228	234	240	246	252	258	264	270	276	282	288	294	300	306	312	318	324
66	223	229	235	241	247	253	260	266	272	278	284	291	297	303	309	315	322	328	334
67	230	236	242	249	255	261	268	274	280	287	293	299	306	312	319	325	331	338	344
68	236	243	249	256	262	269	276	282	289	295	302	308	315	322	328	335	341	348	354
69	243	250	257	263	270	277	284	291	297	304	311	318	324	331	338	345	351	358	365
70	250	257	264	271	278	285	292	299	306	313	320	327	334	341	348	355	362	369	376
71	257	265	272	279	286	293	301	308	315	322	329	338	343	351	358	365	372	379	386
72	265	272	279	287	294	302	309	316	324	331	338	346	353	361	368	375	383	390	397
73	272	280	288	295	302	310	318	325	333	340	348	355	363	371	378	386	393	401	408
74	280	287	295	303	311	319	326	334	342	350	358	365	373	381	389	396	404	412	420
75	287	295	303	311	319	327	335	343	351	359	367	375	383	391	399	407	415	423	431
76	295	304	312	320	328	336	344	353	361	369	377	385	394	402	410	418	426	435	443

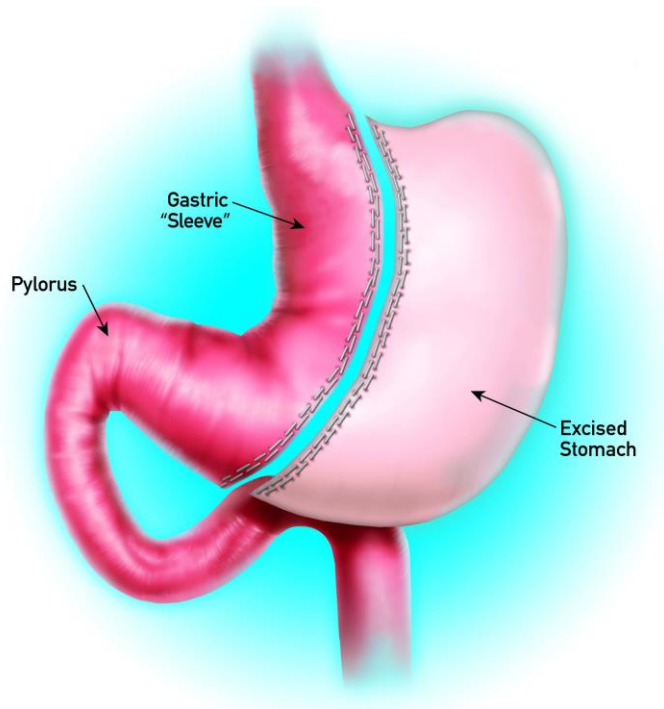
Laparoscopic Roux-en-Y Gastric Bypass

The Roux-en-Y Gastric Bypass performed laparoscopically (minimally invasive surgery) in most cases through six small incisions. The stomach is partitioned into two parts using a surgical stapler. The upper part forms a small (approx. 1/2 ounce) gastric pouch, which will receive food. A 150 centimeter “roux” limb is then created along with a 50 centimeter biliopancreatic limb of bowel. Then an outlet from the small gastric pouch is made to the “roux” limb. This results in a bypass of most of the stomach and duodenum. The hospital stay is 1-2 days. Reported weight loss varies, but it is generally reported that average weight loss is 60% - 70% of a patients excess weight. Most of the weight loss occurs in the first year after surgery. Potential complications include leakage from the anastomosis (hook-up), bleeding, blood clots, vitamin and mineral deficiencies and others. The average mortality rate is 0.1%. Dr. Chlysta will discuss potential complications with you during your appointment.



Laparoscopic Sleeve Gastrectomy

The sleeve gastrectomy is a procedure that limit dietary intake by significantly reducing the volume of your stomach. Generally it does not affect the absorption of food. The left side of the stomach is surgically removed. This results in a and holds approximately 2-3 ounces. Sleeve gastrectomy is performed laparoscopically through 4 or 5 small incisions. It is simpler than gastric bypass since the procedure does not involve re-routing the intestines. In addition to causing weight loss by limiting food intake, sleeve gastrectomy also removes a portion of the stomach responsible for secreting the hormone ghrelin which results in a lower ghrelin level. This is a hormone is known to stimulate hunger and appetite. Reported weight loss varies, but it is generally reported that average weight loss is 50% - 70% of a patients excess weight. Most of the weight loss occurs in the first year after surgery. Potential complications include leakage from the staple lines, bleeding, blood clots, vitamin and mineral deficiencies and others. The average mortality rate is 0.1%. Dr. Chlysta will discuss potential complications with you during your appointment.



Why Choose Us

We offer very personalized service.

We offer a very structured post-operative follow-up plan. Much thought has gone into your post-operative care. We have a very competent network of independent support personnel including dietitians, psychologists, medical physicians, physical therapists. There are also specialists in endocrinology, pulmonology, cardiology and others if needed.

Our results are usually excellent

We have a dedicated monthly support group.

We perform procedures using minimally invasive (laparoscopic) surgery over 99% of the time.

We really care. We treat patients as we would like to be treated.

You will not be treated like a number. We offer prompt, personalized service and attention that other bariatric centers may not offer. You will not speak with a different person every time you call our office. There is no “program fee” and we do not charge a “facility fee” as do many other programs. We offer free valet parking.

Where Do I Start?

Research bariatric surgery and determine if it is something that you really want to do. Obesity surgery is not an “easy way out” or a “quick fix”. It is a major endeavor that helps most people but has resulted in death and unpleasant experiences for a few.

Find out what your body mass index (BMI) is and determine if you are a candidate for surgery.

If you are a candidate, you may not be sure which procedure is best for you. This is normal. You can learn more about your options at The American Society for Metabolic and Bariatric Surgery website. All of your questions/concerns will be answered at your initial consultation. Together, you and Dr. Chlysta can reach a decision about which procedure is right for you.

Contact our office at (330) 926-3443 with your insurance information. We will be happy to check with your insurance company to see if you have benefits for bariatric surgery and to see which procedures are covered. Some insurance companies have limits on bariatric coverage. If so, full prepayment is required prior to scheduling surgery.

Fill out the attached medical history form mail it to our address on the last page of the form. After we have reviewed your medical history form we will contact you regarding an appointment. If you are not contacted within 7 - 10 days after mailing your medical history form, please call our office at (330) 926 - 3443.

Thank you for your interest. If you have questions, please contact our office at 330-926-3443