

SURGICAL TREATMENT FOR SEVERE OBESITY

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### Introduction

At Franciscus, we believe it is important that we offer you the best possible support to combat your (severe) obesity. We listen to your preferences, and together, we'll explore how we can reach the best possible outcome for you.

This leaflet tells you more about the following topics:

- the definition of severe obesity;
- the causes and risks of severe obesity;
- the treatment programme/procedure for severe obesity at Franciscus Gasthuis;
- the outcome of your treatment.

# What is severe obesity?

The term 'severe obesity' is used when the body mass index (BMI) of a person is 40 or higher than 35, and if that person also has a condition related to their obesity. Your BMI is calculated by dividing your body weight in kilogrammes by your height in metres, squared.

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BMI <18.5 = underweight
BMI 18.5 - 25 = healthy weight
BMI 25 - 30 = overweight
BMI 30 - 40 = obese
BMI \geq40 = severely obese
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### The causes of obesity

As is the case in all other Western countries, the number of people who are overweight is on the rise in the Netherlands. The main causes of obesity are eating too much or eating the wrong types of food, and insufficient exercise. On top of that, your genetic disposition also plays a role, and in some cases, your obesity may be caused by a specific condition, such as overactive adrenal glands.

### The risks of severe obesity

If you are severely obese, you are at a higher risk of developing the following conditions:

- cardiovascular disease;
- diabetes;
- arthritis (wear and tear in your joints);
- OSAS (sleep apnoea);
- breathing difficulties;
- an increased risk of malignant disease;
- lipid disorders (abnormal levels of fats in the blood);
- psychosocial issues.

It is important that you get treatment for your severe obesity, so we can lower your risk of developing these conditions. Ultimately, this will reduce the chance of premature death.

## **Treatment for severe obesity**

There are lots of ways to lose weight, including though medicines, dieting and weight loss groups. These methods don't always work that well, and often, you will start to put on weight again over time. Weight loss surgery (bariatric surgery) is a good option. In fact, the <a href="https://www.who.area.com/who.area.c

Franciscus has been treating and supporting people with severe obesity since 1976. Our treatment programme and surgery methods have improved over the years. The team delivering our treatment programme and performing surgery is made up of the following care professionals:

- surgeons;
- internal medicine specialists;
- lung specialists;
- anaesthetists;
- physician assistants;
- psychologists;
- dieticians;
- physiotherapists;
- specialist obesity nurses.

Together, we form the BAM team ('Begeleiding/behandeling van Adipeuze patiënten voor en na een Maagoperatie', or 'Support/treatment for adipose patients before and after gastric surgery', with 'adipose' meaning patients with obesity).

The surgery programme covers around sixteen weeks. After surgery, you will attend regular checkups with us for five years.

To be eligible for the treatment programme at the Franciscus Obesity Centre, we will first of all check whether you meet the criteria under the guidelines for surgical treatment of obesity (2020)\*:

- 1. You are aged between 18 and 65. You may be eligible up to the age of 70, if you do not have any severe cardiac, renal or lung conditions, and you are in relatively good shape;
- 2. You have good command of Dutch or English (NT2 level B1 as a minimum). Personal communication with you is extremely important to ensure treatment can be completed as effectively and safely as possible;
- 3. Your body mass index (BMI) is:
  - a. higher than 35, and you have an obesity-related condition, such as diabetes. We will assess whether this is the case for you during our telephone intake interview;
  - b. equal to or higher than 40. <u>Calculate your BMI using the Netherlands Nutrition Centre website.</u>
- 4. you have made serious efforts to lose weight;
- 5. you are prepared to undergo comprehensive examination by an internal medicine specialist, medical psychologist and/or lung specialist;
- you are prepared to change your dietary and exercise patterns with support from a dietician and a physiotherapist, if necessary;
- 7. you are happy to attend mandatory checkups with the internal medicine specialist for five years.

The Dutch guidelines are based on the international IFSO criteria drawn up by the International Federation for the Surgery of Obesity.

### **Exceptions**

If you weigh over 200 kg or have a BMI higher than 60, the pre-surgery pathway will be different. We will take several measures to reduce the risk of problems during your surgery as much as possible. If you meet these criteria, you will receive more information on this during your appointments at the outpatient clinic.

### The treatment programme

Step 1 of the treatment programme: Signing up
To ensure we give your treatment for severe obesity the
highest chance of success, Franciscus follows an intensive
treatment and support programme known as the 'BAM'
programme. 'BAM' stands for 'Begeleiding/behandeling van
Adipeuze patiënten voor en na een Maagoperatie', or
'Support/treatment of adipose (obese) patients before and after
gastric surgery'.

Run by a multidisciplinary team, this programme is geared toward offering you the medical and mental support you need during all stages of your treatment. 'Multidisciplinary' means several different specialists will assess your condition.

### • Making an appointment

You can sign up for the programme with one of our specialist obesity nurses or assistants. You can do so during the telephone consultation window that takes place every working day from 08:30 to 12:00 and from 13:00 to 16:15 via telephone number +31 10 461 7264.

The specialist obesity nurse or assistant will schedule an appointment for you if you meet the <u>treatment criteria</u>. You will also receive information about the treatment pathway.

Next, we will upload several questionnaires for you to MijnFranciscus, our patient portal. It is essential that you complete these questionnaires prior to your first appointment. If you fail to do so, we will not be able to go ahead with any subsequent appointments.

#### Information session

Before we schedule your first individual appointment at the outpatient clinic, you will attend an information session. These information sessions are organised every three to four weeks. During this afternoon session, you will join a larger group of people to receive information about the causes and risks of obesity, what the options for treatment are and what the programme at Franciscus looks like, and you will get advice from the dietician. It is important that you start putting this advice into practice straightaway, as the longer you practice your new lifestyle, the better! You will also get the opportunity to ask questions to specialists and practitioners from several disciplines over the course of the afternoon.

### Specialist obesity nurse

During your first appointment at the outpatient clinic, you will see the specialist obesity nurse. You conversation with the nurse will cover the following:

- information about the treatment pathway;
- information about any pre-surgery examinations;
- information about the scientific research;
- check whether you have filled in all forms and questionnaires;
- check whether you have provided information on any external treatment you may have received over the past five years.

We will also measure your blood pressure and calculate your body mass index (BMI) during this consultation. Once done, we will take a blood sample.

The specialist obesity nurse will be your first point of contact for any questions and complaints/problems throughout the entire treatment programme and afterwards.

# Step 2 of the treatment programme: Analysis

During your second appointment at the outpatient clinic, you will see the dietician and medical psychologist in the morning.

#### Dietician

During your appointment with the dietician, you will run through the meal diary you handed in previously. Based on this conversation, we will assess whether you have sufficiently mastered your new lifestyle. After all, lifestyle changes are an indispensable element of a successful outcome.

### Medical psychologist

During your appointment with the medical psychologist, you will be asked several questions based on the questionnaires you have completed and any external treatment information you have provided.

### Patient review (MDC)

Around 11.00, the team will carry out a patient review for the patients who have visited the dietician and the medical psychologist that morning. Aside from the dietician and the medical psychologist, the internal medicine specialist, surgeon or physician assistant (PA) will also attend this review. Together, we will decide whether you are eligible for the procedure.

There are three possible outcomes:

Green: we give you the go-ahead for the operation straightaway. You have satisfactorily adopted your new lifestyle, and you do not have any conditions or problems that require further examination. At the start of the afternoon, you will immediately attend the group information session, in which the surgeon will run you through the different surgery options. You will discuss which surgery is most suitable for you with the surgeon or physician assistant. You will be added to the waiting list for surgery at the end of the day.

Amber: you will be placed on an extended pathway within the hospital. This pathway will be bespoke to you. You may have an appointment with the internal medicine specialist, for example, or an extra appointment with the dietician and/or medical psychologist. After this extended pathway, we will schedule a review with you to reassess whether you are eligible for surgery.

Red: you will be placed on an extended pathway outside of the hospital, as in our opinion, you have not satisfactorily changed your lifestyle, for example. We will refer you for further support and treatment by your GP, a dietician or a psychologist outside of the hospital, so that you can get more of a grip on how to change and maintain your new lifestyle.

Once this external pathway has been completed, we will reassess you.

Step 3 of the treatment programme: Planning day
During the surgery planning day prior to the procedure, you will
be weighed, and you will attend a group session with the
dietician and the specialist obesity nurse. If your weight on the
day turns out to be higher than the target weight for your
surgery, we may decide to postpone your surgery for safety
reasons, or to amend your preparatory diet. You will receive a
written invitation for this.

- Group session with dietician
  During the group session with the dietician, you will receive
  information about the preparatory diet. Two weeks prior to your
  surgery, you will need to go on a preparatory diet to ensure we
  can complete the procedure as safely as possible, and to reduce
  the risk of problems (complications) during and after surgery.
  You will also be given information about the food you can eat
  after your surgery.
- Group session with the specialist obesity nurse
   Right before your surgery, we will run you through a few final pieces of advice and information, and you will have the chance to ask questions.

Step 4 of the treatment programme: Weight loss surgery Bariatric or metabolic surgery is the specialism dealing with weight loss surgery and variants thereof. We believe your safety is paramount in our choice of surgery method. For that reason, we will carefully consider your personal situation.

The weight loss surgery pathway will be delivered by a team of specialists including bariatric surgeons, physician assistants and specialist obesity nurses. Internal medicine specialists, lung specialists, physiotherapists, psychologists, specialist cardiovascular nurses and dieticians will also provide intensive support around this special operation.

Your weight loss procedure will be performed via keyhole surgery. The benefit of this is that you will be able to get up and about relatively soon after.

### Weight loss surgery methods

The surgeons at Franciscus carry out the following weight loss surgery methods:

- Gastric sleeve resection (remove part of your stomach);
- Gastric bypass (stomach bypass);
- Mini gastric bypass (alternative stomach bypass);
- Nissen sleeve (stomach wrap)

### Repeat surgery

In some cases, we may need to repeat a procedure, as a previous weight loss procedure was not successful. This procedure will once again be performed by our surgeons.

We do not fit <u>gastric bands</u> at Franciscus, as these often result in insufficient weight loss and may cause a range of problems over the long term. However, we do remove gastric bands at the hospital.

## Surgery methods

Weight loss procedures at Franciscus are nearly always performed via keyhole surgery. As part of this keyhole surgery, we will make five small incisions.

In rare cases, it becomes apparent during keyhole surgery that we need to make a larger incision for safety reasons. We refer to this as 'open surgery'. The recovery process after open surgery takes longer, and you will need to spend more time at the hospital. If you have had major gastric surgery in the past, there is a slightly higher chance we will need to perform open surgery.

#### Anaesthetist

Before your procedure, you will need to be given the go-ahead by the anaesthetist. This is the doctor who makes sure you won't be able feel anything during surgery. During your conversation with the anaesthetist, you will also receive information on the type of anaesthetic we will use in your case. The anaesthetist will decide whether this conversation can take place by telephone, or whether you need to come to the hospital to be examined. The surgery will take place under a general anaesthetic. You will receive more information about this during this appointment.

### Surgery date

We will send you a letter to your home address to confirm your scheduled surgery date.

### Stay motivated

To have this type of surgery, you need to be and stay fully motivated. It is up to you to bring about permanent change in your eating and exercise patterns, and to achieve and maintain weight loss. The surgery serves as an important tool to help you do so. There are two things you can do yourself to reduce the risk of complications:

### Lose weight

Your surgeon or PA will discuss your target weight for surgery.

## Stop smoking

To avoid the risk of major problems, it is extremely important that you stop smoking. We recommend that you stop smoking six weeks prior to your surgery.

## Surgery types

Sleeve resection

In this type of procedure, a large part of your stomach is surgically removed. In terms of dimensions and shape, your stomach will be transformed from a rugby ball into a banana. The section of your stomach from where food moves into your intestine will remain intact. The volume of your stomach will be significantly reduced. On average, you will lose 60-70% of your excess weight after this procedure. The normal route of your

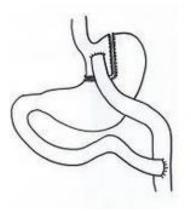


digestive tract is maintained, meaning there is a lower risk of diarrhoea and vitamin deficiencies, and a gastroscopy (stomach examination) can still be performed.

Patients with stomach problems such as reflux issues are **not** eligible for gastric sleeve resection, as this procedure may aggravate these symptoms.

### Gastric bypass

In this type of surgery, we create a diversion (bypass), without removing your stomach. Instead, we split your stomach into two parts, creating a reservoir with a volume of around 20 millilitres. This is then stitched to your small intestine. Next, the rest of your stomach is connected to this small intestine. As a result, food only comes into contact with digestive juices at a later stage, so some of your food is not absorbed by your intestines.



A gastric bypass is used in patients who also struggle with reflux issues in their stomach, and in those with a sweet tooth. On average, you will lose 60-70% of your excess weight after this procedure. Patients are at higher risk of diarrhoea and vitamin deficiencies after this procedure.

### Mini gastric bypass

In a mini gastric bypass — also known as an omega-loop bypass — staples are used to create a new, smaller stomach, just as in a normal gastric bypass, though with a different shape and with only one stitch to the small intestine. Once again, your food will move directly into your intestines, leaving you feeling full sooner. On top of that, your food is diverted (via the bypass), meaning your intestines cannot quite absorb as much food. The

intestines cannot quite absorb as much food. The result is weight loss, though you may also experience deficiencies of certain essential nutrients, such as protein, vitamins, minerals and iron.

### Nissen-sleeve (anti-reflux surgery)

This surgical procedure is performed in two stages. During the first step, the top part of your stomach (fundus) is wrapped behind and around your oesophagus and stitched to itself. This creates a 360° 'cuff' that produces an area of high pressure around the transition from your oesophagus into your stomach.

The second step consists of a classic sleeve procedure. This type of surgery is suitable for obese patients with a hiatal hernia larger than 3 cm, with reflux issues, who prefer not to have a bypass. As a result of the surgery, stomach acids no longer flow back into your oesophagus as easily.

Prior to this type of surgery, a gastroscopy and a contrast swallow will need to be performed to confirm the diagnosis.

## Step 5 of the treatment programme: After surgery

You will usually be able to go home the day after your surgery. If any problem occurs, you may need to stay at the hospital for longer, where we will keep a close eye on you. It is very important that you get up and about soon after your surgery, sit in the chair and start walking around. This reduces the risk of thrombosis in your legs (a blood clot in your leg artery), which may lead to a dangerous pulmonary embolism (a blood clot in your lung artery). During your time at the hospital, you

will be given an injection of blood thinners once every day to further reduce your risk of thrombosis.

The day after your surgery, the dietician will show you a video. They will also provide instructions on what to eat and drink after surgery, as well as advice about your food intake for the first two weeks after surgery. It is important that you follow these instructions carefully. Please also refer to the 'Dietary advice after weight loss surgery' leaflet.

The physiotherapist will walk around the ward with you and give you information about your breathing and what you can and cannot do in terms of exercise after surgery. Please also refer to the 'Physiotherapy after weight loss surgery' leaflet.

If you have any questions after surgery, please refer to our '<u>frequently asked questions</u>'. If your question is not listed or you are not sure about something, you can always call us, of course, or ask a question via BeterDichtbij or e-mail.

Step 6 of the treatment programme: Post-surgery checkups After your surgery, you will have appointments with the specialist obesity nurse, surgeon, dietician and internal medicine specialist.

#### Video consultation

Your post-surgery checkups with the surgeon, physician assistant, dietician and internal medicine specialist will take place via video calls. If you have any issues, or if you prefer to see someone in person, you can always convert these appointments into appointments at the outpatient clinic.

### Specialist obesity nurse

The specialist obesity nurse will call you two weeks after your surgery to ask how you are doing, and to provide advice for the initial period, if necessary. They also serve as your first point of contact during the entire pathway, including during the period after surgery.

#### Surgeon or PA

This appointment will take place eight to ten weeks after your surgery. We will send you details of the appointment in due course. After this appointment, you will see the surgeon or PA one more time. This appointment takes place one year later.

#### Dietician

When you are discharged from the hospital, we will schedule an appointment with the dietician. This appointment will take place six to eight weeks after your surgery. During this appointment, we will check how you are doing when it comes to eating. If necessary, an extra appointment will be scheduled after this appointment.

### Internal medicine specialist

The internal medicine specialist will keep checking you for any deficiencies in vitamins or other essential nutrients for at least five years after your surgery. Around six, twelve and eighteen months after your surgery, you will visit the <u>Diabetes and Vascular Centre</u>. The internal medicine specialist or specialist vascular nurse will perform some checks on you there. After these appointments, you will see the internal medical specialist once every year.

Three weeks prior to the appointments with the specialist vascular nurse and internal medical specialist, you will need to have a blood sample taken to check your nutrient and vitamin levels. We will send the form you need for your blood sample to your home address. If necessary, extra appointments will be scheduled for you.

### Home monitoring

Aside from the regular checkups with your treatment team, we will also keep an eye on you at home via the Home Monitoring app. The Home Monitoring app will ask you questions about your symptoms and lifestyle. Our team of telenurses will then assess the results of these questions. If necessary, your questions will be passed on to one of the practitioners at the obesity centre. Aside from monitoring you at home, you can also use the Home Monitoring app to find answers to the most frequently asked questions.

#### Group sessions

Our dieticians and medical psychologists will organise several group sessions you can attend after surgery, if you wish. Each of these sessions will cover a topic that is essential to help you enjoy the long-term benefits of this surgery. On top of that, exchanging experiences with peers can prove very valuable. Check our <u>diary</u> for all dates.

The vast majority of patients were very satisfied with the surgery and their new weight. On top of that, the risks to their health, such as high blood pressure, diabetes and raised cholesterol due to excess weight, had disappeared or reduced.

### **Effort on your part**

A significant effort will be required on your part to treat your severe obesity. If you fail to put in this effort, you will not see the desired outcome, and the treatment will have no effect. For that reason, we apply a simple rule: if you miss an appointment on two occasions, we will stop your treatment. This does not apply if you call us in advance to reschedule your appointment, of course.

### **Costs and reimbursement**

If you meet the criteria, weight loss surgery at Franciscus Gasthuis will be reimbursed by your health insurance provider. Please note that this will have an impact on the excess on your policy.

If you have any questions about reimbursement for your treatment or the policy terms and conditions, it is best to contact your health insurance provider. They will be able to explain your exact policy terms and conditions, and what they do and do not reimburse.

#### Leaflets

During your treatment pathway for weight loss surgery, you will receive the following leaflets (in alphabetic order):

- Surgical treatment for severe obesity
- Physiotherapy after weight loss surgery
- Weight loss surgery: around the time of the procedure
- Weight loss surgery: preparing for the procedure
- Discharge from hospital following weight loss surgery
- Diet following weight loss surgery
- Weight check consultation
- One year after weight loss surgery
- Five years after weight loss surgery
- Eight weeks after weight loss surgery

You will be given all of these leaflets during your pathway, and you can also find them yourself on the following website: www.franciscus.nl/obeistascentrum

## Questions

If you have any questions after reading this leaflet or wish to schedule an appointment, you can contact one of the specialist obesity nurses or assistants at the Franciscus Obesity Centre. They are available between 08:30 and 16:15 on working days via telephone number +31 10 461 7264. You can also ask any questions by e-mail to obesitas@franciscus.nl. More information on the treatment pathway can be found on our website: www.franciscus.nl/obesitascentrum.

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