

# Surgery for Severe Obesity

Marc M. Zaré, MD

This month's quiz is based on the article "Surgery for Severe Obesity: Patient Selection, Surgical Options, and Aftercare," which begins on page 8 of this issue. Choose the single best answer for each question.

**1. Which of the following statements regarding behavioral and pharmacologic treatments for severe obesity is correct?**

- (A) Because orlistat induces weight loss by inhibiting the intestinal lipase, it is generally well-tolerated
- (B) Lifestyle modifications alone usually result in weight loss ranging between 20% and 35% of excess body weight in severely obese individuals
- (C) Orlistat and sibutramine should not be prescribed to patients with uncontrolled hypertension
- (D) The pharmacologic agents approved for long-term treatment of obesity are used as adjuncts to dietary and behavioral modifications
- (E) Well-designed studies have shown that weight loss achieved by combining pharmacologic agents and behavioral treatments may be similar to weight loss from surgical treatments

**2. Which of the following statements about bariatric surgery in young and elderly patients is correct?**

- (A) Age above 65 years is associated with an up to threefold increase in mortality
- (B) Bariatric surgery may only be offered to adolescents aged 16 years and older
- (C) Data from most specialized and academic centers indicate an increased rate of postoperative complications associated with age over 65 years in spite of high procedural volume
- (D) A decreasing number of weight loss operations are being performed in the elderly population due to increased mortality in this group
- (E) Outcomes of bariatric surgery among the elderly have remained stable over the last 10 years

**3. Which of the following comorbidities is a contraindication for bariatric surgery?**

- (A) Diabetic nephropathy
- (B) History of pulmonary embolism
- (C) Major depression

- (D) Severe degenerative joint disease
- (E) Severe obstructive sleep apnea requiring daily bilateral positive airway pressure treatment

**4. All of the following may be responsible for weight loss after gastric bypass EXCEPT**

- (A) Decreased hepatic metabolism of fat
- (B) Decreased total caloric intake
- (C) Diminished appetite
- (D) Malabsorption of fat

**5. All of the following statements about the immediate postoperative period after laparoscopic bariatric surgery are correct EXCEPT**

- (A) Asymptomatic hypoxia requires urgent work-up to rule out pulmonary embolism
- (B) Dumping syndrome is usually avoided by limiting concentrated carbohydrates
- (C) Patients may have a completely normal abdominal examination in spite of having an anastomotic leak
- (D) Surgical reexploration is indicated if an anastomotic leak is clinically suspected but the upper gastrointestinal study is negative
- (E) Tachycardia in the absence of fever or leukocytosis is likely due to pain and may be treated by patient-controlled analgesia

**6. Which of the following statements regarding outcomes of bariatric surgery is correct?**

- (A) Approximately 50% of patients with diabetes will have resolution or improvement of their condition
- (B) Comorbid conditions such as diabetes usually take many years to resolve
- (C) The majority of weight loss occurs in the first 3 months after surgery
- (D) Patients experience improvement in their comorbidities after losing 50% or more of their excess weight
- (E) Up to 20% of patients may experience complications after surgery

For answers, see page 48.

Dr. Zaré is the Director, Obesity Surgery Associates, San José, CA.

**Answers to the Clinical Review Quiz, which appears on page 24. The article on surgery for severe obesity begins on page 8.**

1. (D) The pharmacologic agents approved for long-term treatment of obesity are used as adjuncts to dietary and behavioral modifications
2. (A) Age above 65 years is associated with an up to threefold increase in mortality
3. (C) Major depression
4. (A) Decreased hepatic metabolism of fat
5. (E) Tachycardia in the absence of fever or leukocytosis is likely due to pain and may be treated by patient-controlled analgesia
6. (E) Up to 20% of patients may experience complications after surgery

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