

What happens before, during and after my surgery?

Before the surgery

1. If you smoke, stop smoking for at least a month before surgery.
2. You will need to find someone to take over your responsibilities while you are in the hospital and after you go home to recover from the surgery (for example, taking care of the children, managing your business, etc.).
3. **MAKE SURE YOU FOLLOW YOUR OPTIFAST VLCD DIET BEFORE SURGERY**
4. Be certain to follow our instructions regarding any medications you may be taking to control other health conditions.
5. You will be given several communications prior to your surgery date as to what to do, where to go and what time to arrive at our private hospital (CMCP).
6. You should also make plans for someone to bring you to and from the hospital.

Where do I go?

All our private surgeries are performed at the Centre Métropolitain de Chirurgie located at 999 Salaberry W. Montreal, Quebec, H3L 1L2.

It is very important that you follow the instructions given to you precisely especially the arrival time at the hospital.

You should not eat or drink anything after midnight the night before your operation.

What do I bring with me?

You will be given detailed instructions by our office. In general, bring supplies from home for a 2-day hospital stay.

If you use special equipment for sleep apnea, you should bring your machine to the hospital.

Bring all your medications with you to the hospital.

Also, bring the “Weight Loss Surgery Information” folder given to you by Dr. Christou at the office consult.

Admission to Hospital

You will be admitted to the hospital and the staff will verify all your case history forms and medications, secure your belongings and ask you to sign the informed consent form appropriate to your operation. You will then be brought to the operating room and prepared for surgery.

After the Operation

Your operation will last from 40-90 minutes depending on your BMI, the type of surgery chosen and previous surgeries if any. After the operation you will be brought to the recovery room, where you will slowly wake up from the anaesthetic. The nursing team in the recovery room will be checking you closely during this period.

From the recovery room, you will be transferred to your room where you will be given oxygen for the first 24 hours and your blood oxygen level will be continuously monitored using an oxygen saturation monitoring device. This is just a precaution because up to 40% of morbidly obese patients have Obesity Hypoventilation Syndrome or Sleep apnoea. This, together with the anaesthetic can result in low oxygen levels in the blood which can be harmful.

Pain Control

With the laparoscopic approach used in all our patients, pain and discomfort are minimized. Immediately after the operation you will experience some abdominal discomfort from the carbon dioxide gas used to blow up your belly for the surgery. Most of this gas is removed at the end of the operation. The remaining gas will be absorbed into your blood and removed by breathing it out your lungs over the next 36 hours. Even though your nurse may give you very strong pain medicine, this discomfort will be a bit unpleasant the night of your surgery.

The only pain medication you will need when you go home is acetaminophen (Tylenol). If pain is not relieved with Tylenol you must call for further instructions.

Dressings and Tubes

The dressing covering the incision sites will be removed the day after the operation. You can have a shower that day and as many as you want afterwards. The cuts are closed with surgical staples that will be removed 2 weeks after the surgery. We ask that you leave the cuts uncovered and open to the air. Do not put any creams or ointments over the cuts. Bacteria cannot grow in a dry environment.

Our patients have no tubes coming out of their noses or their bellies. In special circumstances (say difficult anatomy we find in less than 0.5% of cases), a small tube may be placed in the belly and come out next to a cut with a small bulb attached to it. This is a precaution to catch any leakage that may occur from your new stomach stitches. The tube will remain there for the first 3-4 days to help drain any infection that may occur after the surgery. The nurse will clean the site daily and empty the drainage regularly. The tube may be removed before you go home or in Dr. Christou's office at the 2 week visit.

Exercise

After surgery you must participate in your care. You need to take an active role in preventing complications and promoting the natural healing that will occur. As soon as you are awake we will encourage you to do breathing exercises at least every hour. Deep breathing and coughing is necessary to clear the lungs of the mucus that develops after you have been under an anaesthetic.

The day of your surgery, the nurse will help you get up and sit in a chair. You will be assisted when walking more frequently and for longer distances in the following days. Getting out of bed is important to help your circulation, as well as to help expand your lungs and get rid of secretions. When you are getting up for the first time, it is normal to feel dizzy and weak as well as to feel some pain. These symptoms will be lessened by moving slowly; they will diminish with time.

What will I eat?

Eating properly after the surgery is very important. Follow the detailed eating plan in your Weight Loss Surgery Information folder. Stages 1-2 are in the hospital. You will start on Day 2 when you go home.

When do I get discharged from the hospital? Can I go directly home?

Laparoscopic adjustable gastric band patients are discharged the same day after their surgery. Laparoscopic gastric bypass or laparoscopic vertical sleeve gastrectomy patients go home 2 days after their surgery.

Dr. Christou will see you before your discharge from the hospital. He will answer any last minute questions and review your diet plan one more time. He will give you an envelope with follow-up information and a prescription for your vitamins and supplements. You will start your vitamins about 10 days after your surgery.

If you live within 2-4 hrs drive from the hospital you can go home directly. You should have someone drive you. Take a 15-30 minute rest from driving and walk around the car to keep good circulation in your legs.

We ask our out of town patients to stay in the Montreal for a few days after they leave the hospital and before they fly home. Flying too soon causes the carbon dioxide gas to expand and this can be uncomfortable.