



BC Diabetes Foundation

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Bariatric Surgery

Bariatric or weight-loss surgery is the single most effective treatment for Type 2 diabetes. Within days, long before weight loss has occurred, blood sugar values drop significantly. The reason for this rapid drop is that the surgery itself reduces levels of gut hormones which otherwise tend to counteract the effects of insulin. By 3 months more than 50% of patients are off insulin and other diabetes medication with near normal blood sugars - these benefits are sustained over many years though in most patients with time there is a gradual requirement for reintroduction of medication including insulin. Weight loss in the order of 30% is sustained at ten years in more than 50% of patients.

Most diabetes specialists recommend that bariatric surgery be considered for patients with diabetes who are morbidly obese and who are struggling in any way with their diabetes control or have comorbidities such as heart disease or obstructive sleep apnea.

Bariatric surgery has been available at specialist centers in Europe and North America for more than 40 years. The last twenty years however have seen big improvements in technique and with those improvements much greater safety, fewer side effects and dramatically effective results. There are three highly recommended laparoscopic (key-hole) surgical procedures: Sleeve Gastrectomy, Roux-en-Y Gastric Bypass, and Biliopancreatic Diversion with Duodenal Switch. The first two are currently available in British Columbia at Richmond General Hospital under Drs. Sharadh Sampath & Nam Nguyen. Both are covered by the Medical Services Plan of BC in limited numbers.

A fourth, but less-effective laparoscopic surgical procedure [gastric banding](#) is available in British Columbia privately (not covered by the Medical Services Plan).

Dr. Elliott, the Chair of the BC Diabetes Foundation has two patients who have recorded video testimonials on sleeve gastrectomy shown [here \(#1\)](#) and [here \(#2\)](#) are representative of the experience that might be expected. The first describes a tough course while the other an easier one. Both patients highly recommend the procedure (sleeve gastrectomy).

To receive local (MSP-covered) treatment the following is required: a referral to Dr. Sharadh Sampath (#63698) or Dr. Nam Hoang Nguyen (#09882) of westcoastbariatricsurgery.com (207-6051 Gilbert Rd, Richmond BC, ph 604-276-0952, fax 604-231-0583, email rghsurgery@gmail.com). Referrals should include height, weight and a short medical summary including comorbidities.