



Gastric Bypass Surgery For Morbid Obesity

Obesity continues to grow at epidemic proportions in the United States. It is estimated that 50% of the US population is overweight and approximately 25% are obese. The definition of morbid obesity is commonly defined as a body mass index (BMI) of greater than 40 or greater than 35 with an associated comorbidity like diabetes or coronary heart disease. Professional football players, active or retired, are in general a group of large men with a high prevalence of overweight individuals. In active players, some believe that the more muscular and better- conditioned bodies promote a body composition that is “protective”. Regardless, with retirement and the aging process, some muscle turns to fat and player’s body composition becomes more like the average male. Studies in the general population have shown that long- term obesity is the second most common risk factor associated with death in the USA.

Diet, exercise and weight loss medications are the first and by far the most common forms of treatments to combat obesity. In the general population, such therapies often reduce body weight by some 5% to 10%. While this kind of weight reduction reduces the degree of associated comorbid health problems and may reduce mortality, it is probably less than needed for large retired players over the long term. Consequently, more vigorous and sustained weight loss is necessary, but hard to maintain for 5 or more years.

On the other hand, gastric bypass surgery (also called bariatric surgery) for those seriously obese, utilizing one of several surgical techniques currently available, reduces body weight by 25% to 30 % initially. In addition, about fifty per cent of excess weight lost initially remains gone some 5-10 years later. However, this surgery and the need for careful long-term follow-up is a major undertaking. The mortality rate of gastric bypass surgery is around 1-2 % and 35% of patients develop some complications of the surgery in the first six months postoperatively.

This weight loss surgery costs about \$25,000.00, but when performed at a Center of Excellence, is reimbursed by most insurance companies. Curiously, only about 1% of the eligible population in the USA undergoes this gastric bypass procedure. This low acceptance rate probably relates to a societal trend accepting the state of obesity. While earlier bariatric surgery was more complicated, recent techniques involve relatively less invasive laporoscopic gastric banding that may even be adjustable over time following the initial surgery. Nevertheless, weight loss surgery involves a life-long commitment for the patient and the physician, since metabolic, nutritional and psychological problems may persist long after the operation.

The Living Heart Foundation (LHF) suggests that all former NFL players, especially those weighing more than 280 pounds, consider weight reduction a major priority. The sooner needed weight loss can be achieved in a significant fashion, the better for sustained quality of life. Initial efforts should involve intense diet changes and appropriate exercise plans. Ideally, these initial efforts should be medically directed, prolonged and uncompromising. If this intense lifestyle program can be undertaken and shared

with a friend or a group of people, the chances of success are improved, as the player competes to achieve a goal that is measurable and obtainable.

If the former player, in consultation with his doctor, is unable to achieve significant sustained weight loss, a careful evaluation for specific weight loss medication should be undertaken. It is possible that newer dietary management & pharmacologic treatments together may achieve the desired result. Finally, if all treatment plans discussed above fail over the course of 1-2 years, an assessment for gastric bypass or bariatric surgery is necessary and can be life saving. This should be done at a known Center of Excellence where the diagnostic work up is complete and the reported surgical results, in terms of morbidity and mortality, are superior by national standards. The LHF is available to discuss individual player needs in a confidential manner.