Intra-gastric balloon procedure

Information for patients
Sheffield Centre for Weight Loss Surgery
Introduction

The intra-gastric balloon is designed to provide short term weight loss therapy. It is a temporary solution to kick-start your weight loss and help you learn healthy ways to maintain your success.

Is the intra-gastric balloon for me?

The intra-gastric balloon is sometimes used for people who are too obese for other types of weight loss surgery and need to lose some weight before a weight loss operation can be considered.

How is it placed and how does the intra-gastric balloon work?

It is a soft silicone balloon that is passed endoscopically (through the mouth and down into your stomach under sedation) using an endoscope (a thin flexible tube that has a light and a camera on one end). Once in place it is filled with liquid so it takes up some of the space in your stomach. This means you do not need to eat as much before you feel full.
This procedure is only temporary, and the balloon is usually removed after 6 months.

The intra-gastric balloon is a tool for you to work with. If you use it properly i.e. follow a low calorie diet, reduce your portion sizes, adopt a healthier lifestyle and maintain close contact with your health care team, you will lose weight.

What diet will I have to follow once I have had the procedure?

The dietitian/specialist nurse will give you written dietary advice and explain the dietary changes you will need to make to have a successful weight loss.

It may take a few days for your body to get used to the balloon.

For the first 2 days you will be on fluids only.

From day 3 a meal will consist of 2 - 3 tablespoons of pureed foods.

From week 3 - 4, you will then move onto a soft, mushy, crispy diet.

Approximately 8 weeks after your balloon is placed you will be able to eat a normal textured diet (up to a tea plate sized portion).

You should avoid all fizzy drinks, as they can cause heartburn and make you feel bloated.

All fluids will need to be taken 30 minutes before and 30 minutes after meals to avoid vomiting.

You should eat slowly, cut food up into small pieces and chew well.

Avoid snacking in between meals as this will slow your weight loss and possibly increase your appetite. Stop eating as soon as you feel full, otherwise you may be sick.
You will be advised to eat 3 regularly spaced, tea plate sized portions of textured food 3 times per day.

**What are the benefits of having an intra-gastric balloon?**

This procedure helps you to achieve short term weight loss. It also helps to reduce health related problems:

- Type 2 diabetes
- Osteoarthritis
- Hypertension (high blood pressure)
- Coronary heart disease
- High cholesterol level

**What are the risks associated with having an intra-gastric balloon?**

Whilst most people do not experience any complications, there are several risks associated with the procedure:

- should the balloon deflate spontaneously, intestinal obstruction by the balloon (when a partially deflated balloon passes into the small bowel) may occur. Surgical or endoscopic removal would be required.
- bleeding or perforation could occur as a result of injury during insertion or removal of the balloon, requiring surgical correction.
- feeling of heaviness in the abdomen, abdominal or back pain.
- acid reflux and indigestion. (You will be prescribed medication to reduce the production of stomach acid whilst the balloon is in place.)
- gastric discomfort, nausea and vomiting are common for the first few days following balloon placement, but rarely continue for long. In a small number of cases, patients may not be able to
tolerate the balloon for the full six months period and when this happens, it will be removed.

The chance of these risks occurring is small, but it is important that you are aware of them and that you have all the information you need before agreeing to the procedure.

There is always the option of not receiving treatment at all. The consequences of not receiving any treatment are:

- further weight gain
- shortened life span
- increase in obesity related diseases (as listed under the benefits above),
- low self-esteem / depression.

If you would like more information please speak to your consultant or the dietitian / nurse looking after you.

If you would like more information on counselling or weight management programmes please speak to your GP.

**What happens on admission to hospital?**

You will book in at endoscopy reception and be seen by an endoscopy nurse who will take your blood pressure, temperature, pulse and oxygen levels. You will be asked questions about your medical history and any medications that you may be prescribed. The procedure will be explained to you again and the doctor will ask you to sign a consent form. Your throat will be sprayed to reduce sensation.

**Will I be asleep?**

A cannula (a thin tube through which fluids can be given) will be inserted into one of your veins. You will then be taken into the
procedure room where you will be given some sedation to help you relax whilst the procedure takes place.

**What should I expect after the procedure?**

You may feel sleepy for a while after the procedure and may be given oxygen via two little prongs in your nose until you are fully awake. The nursing staff will check your pulse, blood pressure, temperature and breathing. You may experience a sore throat as a result of the endoscopic equipment.

**Will I feel sick?**

Many people feel very sick and do vomit after the procedure and for some time afterwards. You will be prescribed anti-emetics, which are drugs to help relieve the nausea and vomiting. The sickness should settle once your stomach has become used to the presence of the balloon.

**Will I be in pain?**

You may have a feeling of heaviness in your abdomen and experience discomfort in your abdomen / back.

**Will I be able to get out of bed after the procedure?**

You will be encouraged to get up and move around as soon as possible after the procedure. This is to reduce your risk of developing a blood clot.

**When will I be able to go home?**

You will usually be able to go home the same day of your procedure. Occasionally some people need to stay in hospital overnight.
Will I need any different medication?

Yes. You will be prescribed:

- anti sickness tablets
- acid reducing drugs to help with reflux and indigestion.
- painkillers to reduce spasms in your gut.

Will I have to come back to hospital?

Yes. You will be sent an appointment to see the dietitian / specialist nurse in the outpatient department, approximately 4 weeks after going home. You will then be seen regularly whilst your balloon is in place.

Is there any additional support?

You will have the contact number for the dietitian / specialist nurse who you can call with any queries or concerns.

Who will be looking after me?

Consultant Surgeon: Mr Roger Ackroyd
Consultant Surgeon: Mr Kirt Patel
Specialist Dietitian: Mrs Nerissa Walker
Specialist Nurse: Miss Liz Govan
Consultant Radiologist: Dr Fred Lee

Useful contacts

Della Oldham (secretary to Mr Ackroyd and Mr Patel)
Tel: 0114 305 2411

Liz Govan (Nurse Specialist)
Tel: 0114 226 9083

Nerissa Walker (Specialist Dietitian)
Tel: 0114 226 9083

Northern General Hospital
Tel: 0114 243 4343

Useful websites for further information:

www.bospa.org (British Obesity Surgery Patients Association)
www.wlsinfo.org.uk (Weight Loss Surgery Information and Support)
www.british-obesity-surgery.org (British Obesity and Metabolic Surgery Society)