



British Obesity Surgery Patient Association
Registered Charity 1110041

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**WEIGHT LOSS SURGERY DOUBLES IN 2005 BUT STILL
WOEFULLY INADEQUATE SAYS LEADING PATIENT CHARITY**

As bariatric surgeons from around the world gather at their world congress (IFSO 2005) in Maastricht this week, a survey conducted amongst UK bariatric surgeons shows that the number of weight loss surgery procedures performed in 2005 will be almost double that of 2004 (4,341 vs. 2,287). Whilst this sounds like good news, less than half of these (46%) are funded by the NHS and fall woefully short of the number of patients that need treatment.

“Obesity surgery is definitely becoming more widespread,” said Janet Edmond, Director of British Obesity Surgery Patient Association (BOSPA), the patient charity that conducted the survey “and the good news is that more surgeons are being trained in this specialty and so patients do not have to travel such large distances to seek help.” Over 70 surgeons are now doing some sort of bariatric surgery, more than 5-fold the number of just 2 years ago. “However, the NHS has been very slow to provide funding in a consistent and fair way, although this is one of the most cost-effective of all treatments available on the NHS today and has been recommended in NICE guidance since 2002. Obese patients are being stigmatised by a health service that is not catering for their needs and many desperate patients have resorted to begging their PCTs for funding for treatment or seeking the support of their MPs,” she added. “BOSPA receives 3-4,000 enquiries each month from patients seeking information about surgery or assistance in obtaining funding.”

The most poorly served area of the country is Northern Ireland, where there is an experienced bariatric surgeon and willing multidisciplinary team unable to practice because the Health Boards will not provide funding to establish the service. But the irony is that they are willing to pay for patients to travel to England for complex obesity surgery and then return home to an environment totally lacking in specialist care and support. “Health providers thinks this ‘ticks the box’ of providing the service to patients,” said Edmond, “but at what price? This is a ridiculous situation

and one into which MPs should take a closer look.” In other areas of the country where some of the biggest specialist centres are located, services have also been stopped by the NHS and the only surgery performed is done so privately. “Again a ridiculous situation where the most experienced surgeons we have in Britain are being prevented from treating NHS patients.”

“Unfortunately one of the biggest barriers that persists is the stigma with which this condition is regarded, even in the modern health service and with the huge publicity about the epidemic proportions of this disease. The risk of dying from obesity is actually higher than that for some cancers, and yet no-one would question a cancer patient being offered an appropriate treatment.”

Some patients who cannot get NHS funding, take out a loan to pay for surgery privately. “We are worried because patients are opting for the cheapest operation, either having a procedure which is not best suited to their health status, or opting to go overseas to seek a cheaper deal.” Edmond warns, “BOSPA is receiving an increasing number of calls from patients who have regretted this decision as costs can mount up enormously if things go wrong. Or they are disappointed not to achieve the anticipated result from their surgery. The only way we can see to solve this problem is to have services better supported by the NHS so that patients can be treated comprehensively, and locally.”

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