

Expectations of bariatric surgery: myths and reality

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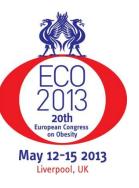
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Abstract Template

ABSTRACT TEXT

Arial 10 font, left aligned, maximum 250 words (excluding title but including graphs/figures and references) – please note that word counts will be checked and abstracts that do not adhere to these guidelines will be automatically rejected.



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Title: (do not	Expectations of Bariatric Surgery: Myths and Reality
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Abstract:	Introduction:
	Obesity is a chronic condition. Demand for surgical weight loss procedures funded by the NHS is increasing. Surgery is a recommended cost effective treatment and is often viewed 'as a quick fix'. However through surgery alone, commissioners and clinicians are struggling to resolve the complex behavioural, social and metabolic problems linked to obesity.
	The literature on bariatric surgery is mainly quantitative in nature, focussing on clinical and quality of life outcome measures. The social narratives, experiences and influences of an obese person undergoing weight-loss surgery are rarely investigated. Existing qualitative research is mainly non-UK based and uses conventional methodologies to capture experiences.
	This study seeks to highlight the myths and realities of patient experience to inform clinical and commissioning professionals and future surgical pathways. This paper presents findings from the first stage of a longitudinal study.
	Methods : A qualitative longitudinal study using in-depth semi-structured interviews, Photovoice and framework analysis techniques. 15 patients interviewed pre and post bariatric surgery.
	Results: Themes focus on the negative impacts weight has on the quality of life for the participant and close family. Behaviours, life events and lack of self-control were suggested causes of obesity. The anticipated health benefits are the main motivation for undergoing bariatric surgery. Levels of knowledge and expectation vary between participants. Photovoice methodology is proving to have a unique role in capturing insight into the lived experiences of participants.
	Conclusion: Findings will provide insight to inform the implementation of NCEPOD recommendations and NICE Guidance for weight loss surgery.
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