

The Seven Deadly Sins in a Weight-Loss Surgeon and Why You Should Avoid Them

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1. Inexperience.

In the field of bariatric surgery, a surgeon's lack of experience with procedures can truly be a killer. Complications and patient deaths are dramatically more common in a surgeon's first several hundred weight-loss operations. Are you considering a nice young surgeon who's recently started his practice—perhaps someone who has a wonderful bedside manner and who has assured you that nothing can possibly go wrong? Let him practice on someone else. You want to find the doctor who has performed, as the primary surgeon, the specific procedure you are considering 500, even 1,000 times. Your health and your life are too precious to take a chance on anyone who has not mastered this art and science, no matter how confident he or she seems or how little he or she charges.

2. Arrogance.

No surgeon gets it right every time. The worst thing that can happen is for an arrogant surgeon to fail to admit that there might be a problem—say, a leak at the stomach—when evidence of a complication is beginning to mount. Delay in diagnosis and delay in action are the most common causes of serious complications in which patients suffer significant adverse outcomes or death. I have seen too many examples of arrogance in surgeons who've refused to admit their fallibility, delayed in acting to correct a problem, and allowed their patient to be harmed by inaction. Don't put yourself in the hands of an arrogant surgeon.

3. Ignorance.

Medicine and surgery are fast-moving, ever-changing fields. What's state-of-the-art today is always being replaced by tomorrow's better, safer methods. You can't afford to place your health in the hands of a surgeon who has not kept up with the latest information in the field. Every year articles are published that shed new light on techniques and practices that lead me to change what I do in practice. If your surgeon is not reading those articles, not attending the meetings, and not keeping abreast of this dynamic field, he or she is depriving you of the latest, "best practices" information that would maximize your safety and success.

4. Cowboy Mentality.

Every community has a surgeon or two who thinks that he or she can get away with variations on accepted standards and on-the-fly innovations that might actually endanger patients. There's a fine, but very serious, line between being a cutting-edge, state-of-the-art practitioner and one who may reach over the edge of acceptability and perform procedures in ways that are not supported by evidence or experience. Too often, the "cowboy" surgeon is also an ignorant surgeon, and he has not taken the time to learn that his or her "innovation" has been tried, and has failed, in 10 studies published over the last 10 years.

5. Unavailability.

These days, every surgeon who is skilled is a surgeon who is very busy. Good surgeons are in huge demand, and the need for their services is truly enormous. So don't expect long chats or philosophical discussions—but do expect that the surgeon will respond if there is a problem or if the nurse is worried. A surgeon who has a reputation for not answering when the nurses page him or when her office needs to reach her urgently is someone to avoid. If your bariatric surgeon is a solo practitioner, ask him or her who covers in an emergency or when he or she is not available.

6. Slowness.

Surgical speed is not a direct measure of technical competence, but you should raise an eyebrow if you learn that your surgeon has a reputation for taking an inordinately long time with routine cases in the operating room. Every surgeon has his or her own comfort zone in terms of the pace of the procedure, but nearly every surgeon who is highly skilled and successful learns to move the team forward together expeditiously to complete the surgery. Long operations are not good for you, since they lead to longer time under anesthesia and longer time to potentially develop venous stasis, blood clots, body temperature deregulation, and a host of potential adverse events. If you're considering a surgeon who has a reputation of being slow in the operating room, consider looking for someone else.

7. Abusive Behavior.

Years ago, surgeons gained fame and promoted their own bravado by throwing temper tantrums in the operating room. I have personally witnessed a few of these insufferable fools throw instruments and stomp their feet during surgery, so angry and out of control that they put both the patient and the rest of the medical personnel in danger. Nearly always, the target of an abusive surgeon's childish tantrums is the nursing staff in the operating room. Inevitably, yelling at people leads to poor performance and loss of team cohesion in surgery, and it puts the patient at risk. If you're considering a surgeon who has a reputation for yelling, throwing things, or just generally being a jerk, steer clear.