

Is Weight-loss Surgery Right for My Child?

Children and teens with obesity need and deserve effective treatment options.

Most teens with obesity, especially those with more severe forms of obesity, have been working on lifestyle for most of their lives. However, for many teens, despite years of hard work, this is still not effective in preventing the harmful health effects of obesity. For these teens, treatment options in addition to nutrition and exercise, such as medications or weight-loss surgery, may be considered.

- **Weight-loss surgery has been shown to be safe and effective for pediatric patients who are experiencing obesity and its health consequences.** The most common weight-loss surgery in the U.S.—the gastric sleeve and gastric bypass—help people lose about 30% of their bodyweight and keep it off. Unfortunately, it is widely underutilized by those who could benefit from it most.
- **"Is Bariatric surgery right for my child?"** This question should be the primary focus in any shared-decision-making process; the decision to have any surgery—at any age—should be based on the risks of the surgery itself versus the risks of not having it.

The AAP recommends a team-based approach to care for children with chronic conditions such as severe obesity. Thorough evaluation and thoughtful, ongoing discussions about excess weight with primary care providers, specialists, and surgical teams—as well as mental health care providers and dietitians—are critical for making a shared decision on whether to have weight loss surgery.

In general, surgery is recommended for pediatric patients who have a BMI of 35 or greater (or 120%) with additional health complications of obesity, or patients who have a BMI of 40 or greater (or 140%) even if they do not have other health complications. There is no specific age cutoff for surgery, however we have the most scientific data on teens aged 13 and older.

When it comes to bariatric surgery for adolescents, there are careful considerations about whether surgery is the right option, whether this is the right time in life, and whether the teen really understands the risks and benefits so they can make this important decision for themselves, supported by their family and medical team. The main reason to do surgery is to improve long-term health into adulthood—a huge benefit!

- **When insurance is a problem.** Access to weight-loss surgery is a huge barrier across the United States; insurance coverage—or lack thereof—can play a large role. One study found less than half (47%) of children who qualified for weight loss surgery had insurance that covered the surgery; "Under 18 years" was cited as the most common reason for coverage denial. This includes both private and public insurance payment types. Parents should contact their insurance representative early when considering surgery, to find out more about the qualifications and coverage prior to starting down this path.

The Obesity in Action Coalition has great tips on the specific exclusion and inclusion language to look for in your insurance policy. Parents can also send a copy of the AAP policy statement to their insurance company.

- **Life after weight-loss surgery.** There are specific nutrition and activity recommendations that must be followed after surgery; many programs and insurance companies actually require patients to learn about these things before even being considered for the surgery. It's a big responsibility.

There is always uncertainty and variation at any age in terms of how people respond to bariatric surgery. Even patients from the same family can respond differently.

- **Adolescence may actually be the best time to have bariatric surgery; outcomes are encouraging.** One study found 95% of teens who had Type 2 diabetes saw their diabetes resolve after receiving bariatric surgery and nearly 80% normalized their high blood pressure. These turnaround rates are better than what is documented among adults. Another study found that up to eight years after surgery, teens typically lost about 30% of their original bodyweight and were seeing other incredible health benefits—including a higher sense of well-being and lower rates of depression and exclusion previously felt as a result of their weight.

<p>Parent to Parent</p> <p>"As a parent, it was important for me that my daughter really 'own' this surgery. It was 'her surgery.' Forever. I think that may be the key to this entire experience. I made sure she was ready to handle the responsibilities that came along with this surgery and educated myself so that if she slipped along her journey, I was there to help her be successful. It is imperative for parents to be educated about how the surgery actually functions. Parents have to be their child's biggest cheerleaders in this process; there is no room for doubt." —Shannon Newsome, mom to Faith, who received bariatric surgery in high school</p>	<p>Teen to Teen</p> <p>"Weight-loss surgery was challenging; it was not a quick fix. But it was the best decision I have ever made for myself and my health. I learned to view obesity as a medical condition, not a result of my own personal failings. Now I see eating healthy, exercising, and taking my bariatric vitamins as necessary steps to managing my condition—not a punishment. Surgery forever changed my life and the way I view my condition." —Faith Anne Newsome, high school recipient of bariatric surgery, current college student, and founder of OCEANS Support and Advocacy Group</p>
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Source: American Academy of Pediatrics Institute for Healthy Childhood Weight.

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