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## At the bedside

### Why are psychological evaluation and preparation necessary for the patient candidate to bariatric surgery?

### Por que avaliação e preparo psicológicos são necessários para o paciente candidato à cirurgia bariátrica?

Obesity is defined as the abnormal accumulation of body fat resulting from the imbalance between energy intake and energy expenditure by the individual, representing a health risk, as it increases the possibility of developing comorbidities that can lead to death. It is considered a chronic, multifactorial disease that encompasses a combination of genetic, organic, environmental, behavioral, and psychological factors.<sup>1</sup> Clinical treatment based on increased physical activity combined with a hypocaloric diet and medications is often insufficient for patients with grade III obesity, and thus obesity surgery is considered the most effective approach so far.

Bariatric surgery, which significantly restricts the amount of food intake and causes malabsorption of nutrients, interferes in only one of the factors leading to obesity, the metabolic factor. Regarding the psychological aspect, patients should be informed by the multidisciplinary team regarding the changes they will go through; mainly, their adaptation to new eating habits for life.<sup>2</sup>

Considering that obesity is a complex and difficult-to-manage disease, a multidisciplinary team, consisting of a surgeon, endocrinologist, nutritionist, and psychologist/psychiatrist, adequately trained to meet these patients' needs, is necessary. Since the year 2000, the Brazilian Ministry of Health, together with the Brazilian Society of Metabolic and Bariatric Surgery, has defined guidelines that make the assessment of these patients by a multidisciplinary team mandatory.

Grade III obese patients are sick individuals whose lives are threatened by excess weight and who need effective treatment, preferably in the short term, but the other consequences of this phenomenon must also be addressed. In this sense,

psychological support has an important role, as the attempt to control each factor alone may hinder a good overall result. The role of the psychologist comprises the preoperative evaluation as well as the clinical management, aiming at preparation and post-surgical adaptation.<sup>3</sup>

The psychological assessment investigates the patient's eating habits, and assesses symptoms and levels of anxiety, depression, and binge eating that may interfere in the etiology and maintenance of obesity, as well as the understanding and expectations about the surgical procedure. Moreover, the psychological evaluation seeks to understand how previous weight loss attempts were performed, the family posture, why the patient wants to lose weight, how obesity interferes with the patient's life, and to what the patient attributes the cause of their obesity.

Psychological interventions include: proposing assertive control and change strategies; providing information about the disease and surgical treatment, as well as an opportunity for the expression of feelings, doubts and fears; providing psychotherapeutic and psychosocial support; promoting treatment adherence; thinking, together with the patient, about adaptation to a new lifestyle; and verifying family support and how much the patient is aware of and involved with the treatment and its consequences.

Thus, the bond that is established between psychologist and patient, of trust and confidence, is extremely important during the course of treatment, as it can be crucial for the patient's recovery, especially when he/she is struggling to handle the new status after the surgery.<sup>4</sup>

In addition to all that has been mentioned, it must be noted that the psychological evaluation legally supports the surgical

procedure. Many legal problems have arisen mainly because some surgeons have performed bariatric surgeries without proper assessment by a multidisciplinary team. This can make the procedure illegal and inappropriate, and can also compromise the outcome of morbid obesity treatment.

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