Chairman of the JSSO guideline committee, Isao Kawamura

JSSO, as a body member of IFSO, had been formulating its guidelines for about 3 years in order to enact them. These were completed and released as Statement 2010 in 2010. The basis of the guidelines was established by complying with the IFSO guidelines 2008, in consideration of the state of affairs in Japan and characteristics of obesity patients. However it also takes account of the flexibility to handle future revision if necessary. The first feature of JSSO is the fact that surgeons should have an idea the treatment of morbidily obese patients lasts a lifetime, does not end with surgical treatment only. Those are compared to lines and points. In other words, the treatment of morbid obesity needs multidisciplinary treatment with a team which includes physicians, psychiatrists, dieticians, counselors and so on. Surgical indications characterize the second feature of JSSO. Indications for bariatric surgery is applied for the patients with BMI ≥ 35 , because the criterion of Japanese obesity is defined by BMI ≥ 25 . We have defined the indication for metabolic surgery by BMI ≥ 32 and have positioned it as clinical study. It obliges a through follow-up for the patients under the rigid registration system. Our report mainly consists of these details.