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Bariatric surgery has been transformed by its amenability to laparoscopic techniques, including intracorporeal suturing and modern laparoscopic stapling devices. Probably equally important is the adoption of enhanced recovery after surgery (ERAS) protocols, with preoperative education, avoidance of catheters, central venous and arterial lines and early mobilisation. Free access to fluids is routine immediately after surgery and, because of the relative lack of pain, patients can mobilise straightaway. It is usual for gastric bypass and sleeve gastrectomy patients to go home on postoperative day 2 or 3. Gastric banding patients can be treated as day cases or can go home within 24 hours. The main cause of death after surgery is DVT/PE rather than anastomotic leakage or bleeding; appropriate prophylaxis is usually used for at least a week.

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