NESTOR F. DE LA CRUZ-MUNOZ, MD, FACS: In the old days of bariatric surgery, we used to take out people's gallbladders when we operated on them. The reason was because these surgeries were done open, and some patients will get gallbladder attacks after surgery. And it was much more difficult to return after surgery to do another open procedure to take out the gallbladder, so it is worth taking out the gallbladder.

Now, with the invent of laparoscopy, the problem, if you have to return to take out someone's gallbladder, is no greater than a normal gallbladder that needs to be removed. And it only happens in about 2% to 3% of the patients after surgery, so it's not worth it, because taking out normal gallbladders can cause diarrhea in patients with normal gallbladders in about 20% to 30% of the patients. So what we normally do is leave the gallbladders in place if there's no disease, take them out if they're already diseased, and then in the patients who still have their gallbladders after surgery, we give them medicine to try to reduce gallstones so that we decrease your chance of getting a gallbladder attack long-term.