

Mexico Bariatric Center® Expands Portfolio with New Ileal Metabolic Surgeries: SASI and Intestinal Bipartition

Mexico Bariatric Center's new procedures offer up to 90% excess weight loss and high diabetes remission at a fraction of North American costs.

TIJUANA, BAJA CALIFORNIA, MEXICO, August 17, 2026 /EINPresswire.com/ -- Mexico Bariatric Center® (MBC), a leader in medical tourism and high-volume metabolic surgery, today announced the formal expansion of its surgical offerings to include next-generation ileal metabolic procedures, specifically Single Anastomosis Stomach-Ileal Bypass ([SASI-S](#)) and Transit / [Intestinal Bipartition](#) (IB).

These innovative hybrid techniques represent the latest evolution in bariatric care. By combining the proven restrictive mechanism of a sleeve gastrectomy with a direct connection to the lower small intestine (the ileum), ileal procedures offer potent metabolic restoration while minimizing the severe long-term nutritional deficiencies historically associated with traditional bypasses.

Redefining Bariatric Outcomes
Through Ileal Stimulation

Traditional weight loss procedures rely heavily on either restriction (shrinking stomach size) or



Get Sassy with SASI-S



Mexico Bariatric Center

severe malabsorption (bypassing large sections of the digestive tract). In contrast, next-generation procedures focus on early ileal gut-hormone activation.

When food reaches the distal ileum faster, it triggers a powerful surge of metabolic hormones, including GLP-1 and PYY. This neurohormonal response rapidly suppresses appetite, improves glycemic control, and supports sustainable, long-term weight reduction.



Key Clinical Advantages of SASI & Bipartition Procedures:

“

Bariatric surgery is no longer just about shrinking the stomach; it's about optimizing metabolic chemistry”

*Dr. Jacqueline Osuna,
Bariatric Surgeon at Mexico
Bariatric Center*

- Dual-Pathway Digestion: Intestinal Bipartition and SASI retain the natural pylorus valve and preserve a pathway through the duodenum. A portion of nutrients continues through the normal intestinal tract, significantly lowering the risk of iron, calcium, and fat-soluble vitamin deficiencies compared to traditional Roux-en-Y or classical Duodenal Switch procedures.
- Exceptional Diabetes Remission: Clinical studies show that SASI-S achieves diabetes remission rates between 70% and 90% within one to two years post-surgery.
- Single-Anastomosis Precision: SASI-S requires only one

surgical joint connection (anastomosis), reducing time under anesthesia and lowering the risk of internal hernias, leaks, and operative complications.

- Preserved Endoscopic Access: Because the natural digestive route remains intact, clinicians retain full endoscopic access to the stomach and biliary tree post-operatively.

Medical Leadership Insight

"With SASI and Intestinal Bipartition, we can offer patients experiencing severe metabolic disease or sleeve weight regain an option that delivers the power of a Duodenal Switch with fewer complications, simpler anatomy, and a drastically reduced risk of chronic malnutrition," said Dr. Jacqueline Osuna, lead bariatric surgeon at Mexico Bariatric Center®

"Patient safety is the step-one rule for everything. For every patient with super obesity, I recommend a gastric sleeve, go down 100 pounds, and then I will perform an Intestinal

Bipartition. It's two surgeries, but it is the safest way to get to your ideal weight." -Dr. Fredy Loepz, bariatric surgeon at Mexico Bariatric Center®

Comparison: Traditional vs. Next-Gen Ileal Surgery

Traditional bariatric options like the Standard Gastric Sleeve rely purely on restriction to yield 60% to 70% expected excess weight loss, maintaining an intact duodenal route without surgical connections and keeping nutritional deficiency risks low. Meanwhile, Roux-en-Y Gastric Bypass (RYGB) pairs restriction with malabsorption using two surgical connections, bypassing the duodenal route to achieve 70% to 80% excess weight loss at the cost of a moderate to high risk for nutritional deficits.

Next-generation ileal surgeries, including Single Anastomosis Stomach-Ileal Bypass (SASI) and Intestinal Bipartition (IB), introduce an advanced dual-action mechanism combining restriction with early ileal GLP-1 release. By preserving the duodenal route using either a single connection (SASI) or dual pathways (IB), these modern procedures mitigate nutritional risks to low or moderate levels while driving clinical performance up to 90% expected excess weight loss.

Making Advanced Metabolic Care Accessible

While new procedures like SASI-S can cost upwards of \$30,000 in the U.S. and Canada without insurance coverage, Mexico Bariatric Center® makes these specialized procedures accessible. Operating out of fully accredited facilities in Tijuana and Guadalajara, MBC provides all-inclusive patient care packages starting at \$6,495*. Packages cover board-certified surgical fees, dedicated ICU availability, hospital stays, ground transportation, pre-op evaluations, and ongoing nutritional support.

Patient Qualification

Candidates for SASI and Intestinal Bipartition include adults with a BMI of 35 or higher, patients struggling with uncontrolled Type 2 diabetes or metabolic syndrome, and individuals seeking revision surgery following previous sleeve gastrectomy.

To evaluate eligibility or learn more about bariatric surgery in Mexico, visit www.mexicobariatriccenter.com or call (855) 768-7247.

About Mexico Bariatric Center®

Founded in 2012, Mexico Bariatric Center® (MBC) is a premier medical tourism platform providing safe, affordable, and high-quality weight loss surgery in Mexico at their brand-new facility, [Hospital Azar®](#). Having assisted over 30,000 patients across North America, MBC collaborates with board-certified bariatric surgeons, nutritionists, and patient coordinators to deliver end-to-end compassionate care.

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