

Bariatric Article

“A Battle Worth Fighting”

Nothing about bariatric surgery is ‘easy’, especially the long road traveled getting there. The journey is filled with countless weight loss attempts, some small successes, and even more failures. Fighting weight loss is often a life-long battle of emotions, a strong sense of failure and a weak sense of self-worth. When people decide to have weight loss surgery, the decision comes after a struggle with most diet programs, only to lose a little and then watch as the pounds find their way back; plus a few more. The one thing you can say about bariatric patients is that they are expert dieters.

In this special issue of after40, we are so proud to introduce you to three bariatric patients who were ready for change. They found themselves at an important crossroads, and their health and happiness depended on making the right decision. Choosing weight loss surgery meant they were taking control of their mortality and were reclaiming their quality of life. For decades, they were being controlled by food and now they are the ones in control. By selecting them as our holiday makeover winners, we are helping them celebrate their accomplishments to date. These special holiday makeover winners epitomize the spirit of our **after40** mission, to celebrate women rediscovering life after 40.

The three women are in different stages of weight loss following surgery and represent different bariatric procedures. Joyce, Carolyn and Laura, were hand selected from three area hospitals. St. Vincent Bariatric Weight Loss Surgery Center of Excellence recommended Joyce, who had Roux-en-y gastric bypass surgery 2 ½ years ago. She has lost 175 pounds, and her success inspires us all. Laura comes to us from the Indiana Obesity Center at Riverview Hospital. She had gastric banding surgery on September 29, 2009 and has lost nearly 60 pounds, including 40 pounds from a pre-surgery weight loss program. Her commitment to weight loss, even before her surgery, shows the level of dedication Laura is giving to this life-changing course. Carolyn was selected by Community Health Network as their success story in progress. She also received the Roux-en-y gastric bypass surgery. Her surgery was in June 2009, and she has lost 80 pounds. She’s feeling healthier every day and now focuses on the joy in her life.

“There’s much to Gain from Weight Loss Surgery”

Did you know that a staggering 67% of Americans are overweight? More than half of that group, are considered obese. The Center for Disease Control considers you overweight if you have a body mass index, or BMI, between 25 and 29.9. Over 30 BMI and you are considered obese. Between 35 and 50 BMI and you are considered severely, morbidly or super obese. Your BMI is a calculation based on your weight and height. Basically, it is a measurement that provides a reliable indicator of your body fatness. This measurement is used to determine if you are at risk for weight related health conditions. Those conditions, or co-morbidities, may include: Coronary heart disease, type 2 diabetes, hypertension, sleep apnea, stroke, high cholesterol, osteoarthritis, gallbladder disease and a variety of cancers. To calculate your BMI, visit www.cdc.gov/healthyweight/assessing/bmi

If you have a BMI above 40, or above 35 with co-morbidities, you are a candidate for bariatric surgery. Having the procedure covered by your insurance is less about the insurance company and more about your employer. Most insurance companies will cover the procedure. It is up to your employer to

include the surgery as part of the employee benefit plan. There are a variety of bariatric procedures available. We are focusing on the two most common procedures in this issue: the gastric banding and gastric bypass surgeries. LAP-BAND® and the REALIZE™ band are the two types of gastric bands on the market today. With this procedure, a band (or collar) is placed around the upper portion of the stomach creating a small, 1 to 2 ounce pouch, or smaller stomach. This greatly reduces the amount of food required to feel full, aiding in weight loss. A portal is connected to the band and placed in the muscle wall or around the diaphragm, well below the skin, during surgery. During an office visit, the portal is used to inflate the band with saline solution (known as a 'fill'). Each patient's fill is customized for maximum weight loss. Some pros of this bariatric procedure include: minimally invasive as it is performed laparoscopically; no intestinal re-routing; can be performed as outpatient surgery; lower risk of nutritional deficiencies; no elimination of certain foods or food groups; and the procedure is reversible. Some cons include: slower weight loss compared to gastric bypass; a foreign object is surgically placed in your abdomen; and other risks associated with any gastrointestinal surgery.

Roux-en-y is a type of gastric bypass technique and one of the most common bariatric procedures performed in the United States. With Roux-en-y, a 1 to 2 ounce pouch at the top of the stomach is created, permanently closing it off from the remaining portion of the stomach. The new, smaller stomach is connected directly to the middle portion of the small intestine, completely bypassing the rest of the stomach and the upper portion of the small intestine. The smaller stomach gives the patient a feeling of fullness on less food, and because food bypasses part of the intestine, fewer calories are absorbed, resulting in weight loss. Some pros of this procedure include: rapid weight loss; smaller chance of patient dying from co-morbid conditions such as heart problems, diabetes or cancer; and it may eliminate the need for many medications. Some cons include: a risk of vitamin deficiency; a need for permanent vitamins and supplements; decreased ingestion or elimination of simple sugars as they may cause 'dumping syndrome', resulting in pain and gastrointestinal discomfort; and other risks associated with any gastrointestinal surgery.

What should you do if you are considering weight loss surgery? "It is important not to feel desperate and down on yourself. Know that there are options out there, so doing your homework and becoming educated on what your options are is key" says Dr. Keith McEwen of the Indiana Obesity Center practicing at Riverview Health Pavilion. "Talk to more than one surgeon, and don't be afraid to ask questions about their background in bariatrics; their success stories, risks, etc. Finding the right surgeon and program is important to your success." Dr. McEwen offers gastric banding procedures utilizing the LAP-BAND® System and the REALIZE™ Band System. His team of highly trained nurses, nutritionists, exercise therapists and psychologists, are able to provide patients with a comprehensive weight loss program including pre- and post-operative education and ongoing aftercare.

"Patient support is so important," says Dr. Berghoff of Community Hospital's Bariatric Center. "When a patient comes to see us having made the decision to have surgery, they generally want the surgery right away. We provide a series of pre-operative evaluations, meetings with our staff psychologist and nutritionist. We make sure the patients have made the necessary behavioral changes which are critical to their post-op routines. Following surgery, we provide lifestyle support groups for their continued success." Community Health Network Bariatric Services perform gastric banding procedures utilizing the LAP-BAND® System and the REALIZE™ band System. They also perform Roux-en-y gastric bypass surgery. They report the percentage of gastric banding surgeries vs. gastric bypass surgeries to be about 50%-50% at Community Hospital System.

Determining the right surgery option should be a decision between the patient and their surgeon. Surgery is life changing and requires life-long commitment and dedication. "Realizing that surgery is a tool to help the patient with their weight loss is critical to their success," says Ted Eads M.S.N., R.N., executive director of bariatric services at St. Vincent Carmel's Bariatric Center of Excellence. "We help patients see that surgery is part of the overall plan. A patient must still exercise and make proper food choices for maximum success. It is certainly not an easy fix." St. Vincent Bariatric Center offers a variety of weight loss options including Roux-en-y gastric bypass, gastric banding with the LAP-BAND® System, gastric sleeve, duodenal switch and StomaphyX.