



Sandy Baker before gastric bypass surgery three years ago.



Today, Sandy has lost 130 pounds and hopes to lose a total of 145.

Managing Weight Gain During Menopause

**By Sandy Baker
Gastric Bypass Patient**

■ Let's face it, some of us in this weight battle are not spring chickens. We have lived with obesity for more years than we care to remember. After we work so hard to lose our weight, we run into hormonal issues that slow our weight loss or bring it to a screeching halt. When this happened to me, I thought I must be the one person whose weight loss would not endure the test of time, even though I ate well and exercised.

I had Roux-en-Y gastric bypass surgery three years ago and lost 130 pounds. I was still losing until I had a hysterectomy and my weight started climbing. For several months after the hysterectomy, I tried to regulate my hormones. At the same time, I followed the post-surgery eating rules. Unfortunately, the scale seemed to climb higher each day.

—continued on page 3

Support Group Changes

Ashley Burroughs, R.N., at Memorial Health Bariatrics, is making some great changes in our support groups. Over the summer, Burroughs attended training in Washington, D.C., with Bariatric Support Centers International. She brought back new ideas and lesson plans and has redesigned our support programs.

Beginning in October, the Monday night bypass support group will be moved to the first Thursday of the month. Please mark the following dates on your calendar.

Post-Op Bypass Support Group: First Thursday of every month, 6 p.m., in the Medical Education Auditorium at Memorial University Medical Center. On October 2, we will have a protein tasting at the meeting.

Post-Op Band Support Group: Second Wednesday of every month, 7 p.m., in the Medical Education Auditorium at Memorial University Medical Center. On October 8, Oliver Whipple, M.D., will speak.

—continued on page 3



Memorial Health

Bariatrics

Help is here.

bariatrics.memorialhealth.com 912-350-DIET (3438)



Understanding Sleeve Gastrectomy

By **Oliver Whipple, M.D.**
Bariatric Surgeon

■ In addition to the Roux-en-Y gastric bypass and laparoscopic adjustable gastric band (lap band), Memorial Health Bariatrics now offers sleeve gastrectomy for weight loss.

Like the lap band, the sleeve is a purely restrictive procedure. The stomach is remodeled and a large portion is removed. The remaining stomach is shaped like a thin tube with a pouch at the bottom. The pouch holds the same amount of food as the pouch created by the lap band or the bypass. The stomach remains attached in its normal fashion to the intestines. The pylorus, a muscular valve at the bottom of the stomach, is left in place. This helps to prevent “dumping.”

Sleeve gastrectomy removes the portion of the stomach that stretches the easiest. However, the remaining portion can still be stretched over time, so measuring food portion is essential. As is the case with other forms of weight-loss surgery, careful eating habits and exercise patterns are vital for long-term success.

Sleeve gastrectomy does have some distinct advantages, including:

- Sleeve patients do not require adjustment after surgery.
- There is no implanted device to fail or become infected.
- Intestinal obstruction is very rare.
- There are not many issues with vitamin deficiency. The exception is that sleeve patients cannot produce enough intrinsic factor to process vitamin B12, so those supplements are necessary for life.

As with any procedure, there are some risks to consider. Sleeve gastrectomy is irreversible and does carry a small risk of leaking in the early post-operative period.

Sleeve gastrectomy is not a new procedure. It is actually the first step in duodenal switch. However, duodenal switch patients had such great initial weight loss that the second stage of the procedure was often abandoned. This gave rise to the idea of using the sleeve as a stand-alone procedure.

Many insurance companies still consider it to be an unproven procedure, just as the lap band was considered unproven several years ago. Unfortunately, this means it is not currently covered by most policies. However, as more long-term data becomes available, I’m confident the sleeve will acquire the coverage now seen for lap band and gastric bypass. We’re pleased to offer this additional weight-loss option. ❧

How to Start Strength Training

By **Khristine Hammond, M.S., CSCS*®**
Exercise Physiologist

■ Strength training (lifting weights) is an important part of your overall fitness routine. It can increase lean body mass, boost metabolism, and increase bone density. Stronger muscles will also make your life a little easier each time you carry your groceries or lift a child. Here are a few tips to get started.



- Visit a fitness center and ask for instructions. You need to learn proper techniques to avoid injury. Many gyms will set up a basic program for you and teach you how to use the equipment when you purchase a membership. You can also hire a personal trainer to teach you.
- Lift the proper amount. Each time you lift a weight it’s considered a “repetition” or “rep.” A group of 12 to 15 reps is a “set.” Pre-operative and post-operative bariatric participants should do one set of 15 reps every day. People in the maintenance phase should complete two to three sets of 15 reps, three days a week. Completing a set should be challenging, but not overwhelming. If you can’t do at least 12 reps, the weight is too heavy. If you can do more than 15, it’s too light.

–continued on page 4

I was afraid that one day I would wake up at my pre-surgery weight with no options left.

One of my favorite foods was edamame – boiled green soybeans. Edamame is the only vegetable that contains as much protein, fat, and carbohydrates as fish and meat. It also has a high level of vitamins and minerals. I was eating a 12-ounce container of edamame every day as a snack. It had 125 calories, 11 grams of protein, and good fiber, but I was still gaining weight. Finally a friend suggested that the weight gain could be from the soy in the edamame. I did some Internet research and checked with my pharmacist who was compounding my bio-identical hormones. He confirmed that the amount I was eating could have pushed my estrogen levels into excess, which caused the weight gain. I now only eat the edamame occasionally, like a normal person would.

One cup of edamame is similar to one tablet of the estrogen replacement Premarin, so menopausal women need to be careful. If you are pre-menopausal, do not stop eating soy beans because you have the natural progesterone and other hormones to balance you. But for those menopausal women taking hormones and eating edamame as much as I was, it can affect your weight. If you are menopausal, practice moderation and watch for signs of excess estrogen.

Before I realized the edamame was the culprit, I visited with Helen Hussey, the Memorial Health Bariatrics dietitian. She showed me that although my food choices were good and within the correct calorie range, I was consuming too many good carbs and good fats. I was eating for maintenance and the hormones were forcing me to gain rather than maintain. It was a good thing to learn, because even before my edamame encounter I wasn't losing and thought it was my metabolism. It turns out I just needed to go back to some diet basics. My water, protein, and exercise were all good. But sometimes the little things we don't even realize can make a big difference.

I'm very relieved now. There is hope, even after menopause! I've lost nine of the 13 pounds I'd gained while riding the hormone roller coaster. It's good to be back on track. I couldn't do it without the encouragement and support of others. This is a life-long journey and it's always better with friends by our side. 🌸

Back on Track Program Coming Soon

■ If you've had weight-loss surgery but you're struggling with an extended plateau or have regained weight, we have a program for you. Memorial Health Bariatrics is partnering with Bariatric Support Center International (BSCI) to offer the Back on Track Program.

Back on Track is a BSCI education and motivation program. It is designed to help you overcome a plateau or re-gain and reach your optimum weight-loss goal. If you participate in Back on Track, you'll receive six weeks of telephonic classroom instruction at the Memorial Health Bariatrics office. You'll also receive the following booklets: Goal Getting, Exchanging Habits, Strength-n-Sculpt, Kick Start, and Maintenance Mentality.

For more information, call 350-3438. 🌸

Pre- and Post-Op Support Group: Third Wednesday of every month, 7 p.m., in the Medical Education Auditorium at Memorial University Medical Center. On October 15, Helen Hussey, R.D., will speak.

Information Sessions: Every Wednesday, 6 p.m., in the Medical Education Auditorium at Memorial University Medical Center.

Upcoming Events: Annual Bariatric Workshop, Saturday, October 11, Mercer Auditorium at Memorial University Medical Center. Support Group Holiday Party, Thursday, December 4, Mercer Auditorium at Memorial University Medical Center.

B-12 Injections: Call 350-3438 to schedule an appointment.

Important Note: We have made several changes in our program that will impact office visit fees for cash-paying patients. Call 350-3438 for more information. 🌸

–continued from page 2

- Start with multi-jointed exercises to save time. Multi-jointed exercises work more than one joint and muscle group at a time. For example, the bench press works the chest and the triceps, the squat or leg press works the entire lower body, and the row works both the back and the biceps.
- Always breathe properly while doing reps. Exhale during the lifting part of the exercise. Inhale when you are lowering the weight.
- Take it slow. Count to two while lifting the weight and count to four while lowering it. Slow movements ensure that you use your strength and not momentum to do the work. It also helps prevent injury.

If you have questions about strength training, please feel free to contact one of the trainers at FitnessOne. Patients and graduates of the Memorial Health Bariatrics program can join FitnessOne for a discounted rate. In addition to strength training, FitnessOne has a variety of services and classes to meet your needs. You can reach FitnessOne by calling 350-4030. Or send me an e-mail at Hammokh1@memorialhealth.com.

FitnessOne is located on the third floor of the Center for Advanced Medicine on the Memorial University Medical Center campus. 🌸

Shared Medical Visits

■ Memorial Health Bariatrics now offers optional shared medical visits included in your program fee. You'll receive a regular private visit with the practitioner. Then, you'll have a shared meeting with the dietitian and counselor. You'll be grouped with other patients based on surgery type and post-op time. We will have groups for:

- One month post-op
- Three to six months post-op
- One year or more post-op

Visits will be scheduled on Monday afternoons. Remember, band patients should follow-up every two to three months for the first three years. Bypass patients should follow-up at one month, three months, six months, and annually. Please call 350-3438 to schedule your shared medical visit. 🌸

Memorial

University Medical Center

P.O. BOX 23089 | Savannah, GA 31403

NON-PROFIT ORG.
U.S. POSTAGE

PAID

Permit #499
Savannah, GA