

The Path

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Barbara Bailey with her grandchildren before undergoing adjustable gastric band surgery.



Barbara Bailey at the Bariatrics Gala in August 2007, less than six months after her surgery.

A Change for the Better

**By Barbara Bailey
Adjustable Gastric Band Patient**

■ Over a 30-year period, I gained between five and 10 pounds a year. I tried to take the weight off with diet and exercise, but I always regained whatever I lost. In 2006, several things happened to me that changed my life:

1. My daughter told me about the adjustable gastric band for weight loss.
2. I took on a new nursing job in the cardiopulmonary rehabilitation department.
3. At my annual physical, I weighed in at 260 pounds.

When I became a cardiac rehabilitation nurse, I knew I could not help my patients live a healthy lifestyle if I was not healthy myself. That's when I started investigating the lap band surgery my daughter had mentioned.

On November 1, 2006, I attended an informational session with Memorial Bariatrics. When I walked in and saw the other people there, I thought, "This is not for

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Support Groups and Office Hours

Post-Op Bypass Support Group: January 7, February 4, and March 3 at 6 p.m. in the Medical Education Auditorium at Memorial University Medical Center.

Post-Op Band Support Group: January 16, February 13, and March 12 at 7 p.m. in the Medical Education Auditorium at Memorial University Medical Center.

Pre- and Post-Op Support Group: January 23, February 20, and March 19 at 7 p.m. in the Medical Education Auditorium at Memorial University Medical Center.

Information Sessions: Third Thursday of every month at 6 p.m. at Ogeechee Technical College in Statesboro, and every Wednesday at 6 p.m. in the Medical Education Auditorium at Memorial University Medical Center.

Office Hours: Monday through Thursday, 8:30 a.m. to 5 p.m. (closed for lunch from 12 noon to 1 p.m.), Friday, 8:30 a.m. to 12 noon. Tuesday and Friday mornings from 8:30 a.m. to 12 noon are reserved for patient weigh-ins and vitamin purchases.



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Here We Grow

**By John Angstadt, M.D.
Bariatric Surgeon**

■ Paul Wellstone said, "The future does not belong to those who sit on the sidelines." I can honestly tell you that the entire bariatric team is in the game.

We have been very busy in recent months. In April, we completely revised our workflow processes and have seen a significant increase in our program volume. You may have noticed that our waiting room, our Wednesday sessions, and our classes are now full. The advantage to you is that as our program volume grows, we can begin to offer new classes and support for you. We have already added a series of postoperative classes for band and bypass patients focused on diet changes that are required for success after surgery. We've found these classes are more useful when given after patients have completed their surgery. We have split our band and bypass support groups so we can focus on issues related to each procedure.

We have a number of new faces in the office. Leigh Ann Pack joined us in the spring as our bariatric coordinator. Amber Morrison is our new face up front greeting you when you come into the office. Ashley Burroughs has joined our clinical staff as a behind-the-scenes work horse. Finally,

Dolores Gamble has just joined us as our new financial/registration coordinator. It is an awesome team devoted to your success.

The remainder of this year will see us focusing on achieving Center of Excellence status. This designation is given to outstanding bariatric programs by the Surgical Review Corporation. We anticipate completing our application in the next six weeks. Two months after submission, we will have our site visit. We have all the elements in place that are needed to meet the guidelines, but our team will be hard at work assembling documentation for the site visit.

We will be updating our office waiting room with some new furniture in the next two months. We are finalizing the layout of that space, so expect to see those changes soon.

We think the next year will be an exciting time for us as we continue to grow. We appreciate all your support and comments. 🍷

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Surviving the Holidays

- Don't let holiday temptations ruin your healthy eating plans. Remember to enjoy what really matters during the holidays – traditions, friends, and family. Here are some tips to keep in mind:
 - Don't waste calories or space on anything mediocre. Be selective and only eat what you truly enjoy.
 - Avoid carbohydrates and starches. Make substitutions if you can, such as eating mashed cauliflower instead of mashed potatoes.
 - Make your shopping into exercise. Stay in motion, walk quickly, and cover a lot of territory. Maintaining a quick pace may end up saving you money too.
 - Focus on having fun. Plan activities with family and friends that don't revolve around a big meal or fattening snacks.
 - Relax, take a deep breath, and enjoy the holiday season. 🍷

me. I am not that big.” But, I had already driven to the meeting so I decided to stay and hear what they had to say.

I remember Dr. John Angstadt saying that diets do not work for morbidly obese people. I listened as he and the nurse practitioner talked about eating food in a certain order, not drinking fluids while eating, taking small bites, chewing food thoroughly, and setting the fork down between bites. I heard a woman talk about forgetting to eat lunch and having a “shake” in the afternoon. I wondered what a shake was, did she mean a McDonald’s shake?

When the information session was finished, I stayed and filled out the paperwork to become a bariatrics candidate. Later, I was told my insurance would not cover my surgery. If I was going to shell out \$15,000 for this surgery, I needed to know I could follow the plan successfully. To practice, I purchased some Slim Fast protein shakes. They weren’t bad. I began to eat what I call the “bariatrics way” — protein first, vegetables second, fruit third, and carbohydrates only if I was still hungry. I stopped drinking with meals, took small bites, and placed my fork down between bites.

I began to feel satisfied. I stopped craving sweets and salty food, and I started losing pounds. I became more aware of how the different foods tasted and began to savor the flavors and enjoy what I was eating.

In October 2006, when I started my new job, I also started to walk on the treadmill that was in my department. At first, I could only walk for 10 minutes. Now, 11 months later, I can walk 45 to 60 minutes without any problems.

I completed all of my pre-surgery classes. On March 2, 2007, I had adjustable gastric band surgery. When I woke up in my room at Memorial, I felt good. Within three hours, I began walking in the hall. While out walking, I met a woman named Linda who had also just had band surgery. We became good friends and still support each other today.

My weight has steadily dropped. Within six months of my surgery, I had lost 100 pounds. Before surgery, I would go shopping and I could not get into a pair of size 26 jeans. I used to wear size 5X scrubs at work. Today, I can wear a size 10 and medium scrubs. I have a lot of energy and I feel great.

Weight loss surgery is the best thing I have ever done for myself. I am forever grateful to Dr. Angstadt and Dr. Whipple for perfecting the surgery process, to Memorial University Medical Center for making the program available, and to the entire team at Memorial Bariatrics. My life is now very happy and exciting and I love my new attitude and relationship with food. ❀



Why Gastric Bypass and Smoking Don't Mix

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

■ Ulcer formation after gastric bypass surgery affects about 5 percent of patients. The ulcer can be in the gastric pouch itself, but occurs more commonly on the small intestine side of the anastomosis. Ulcers can form immediately after surgery, but usually this problem shows up months to years after the surgery.

The most common cause of marginal ulcers after gastric bypass surgery is a change in behavior. Smoking is the most common habit that reemerges and results in ulcer formation. Smoking and gastric bypass are a particularly harmful combination. Smoking can result in gastritis and contribute to ulcer formation in anyone, but gastric bypass patients are very susceptible to this. The use of over-the-counter or prescription anti-inflammatory medications may also lead to ulcer formation. Drugs such as prednisone, ibuprofen, naproxen, aspirin, and other NSAIDS all rob the stomach of its natural defenses against acid. This, combined with a gastric bypass, puts patients at very high risk for ulcer formation.

The ulcers cause intense pain just below the ribs. The pain is severe and bores through to the back. Once an ulcer forms, if you continue to smoke or use NSAIDS, the pain will only worsen. It can eventually lead to a perforation and emergency surgery. It is imperative that you associate smoking with the intense pain in your pouch. Smoking cessation, combined with acid reducing medications, will allow the ulcer to heal.

In summary, unless you enjoy intense pain and emergency surgery, avoid cigarettes and NSAIDS after gastric bypass surgery. ❀

Barbara's Egg Custard

4 large eggs

1 cup skim milk

1 1/2 cups evaporated low-fat milk

1/2 cup Splenda granular

2 teaspoons vanilla extract

Pinch of Kosher salt

Freshly grated nutmeg

Preheat oven to 325 degrees. Place 6 custard cups or ramekins in a large roasting pan and set aside. Whisk together the eggs, milk, evaporated milk, Splenda, vanilla, and salt. Pour through a fine mesh sieve into a large measuring cup. Divide evenly among the custard cups and grate a generous amount of nutmeg over each one. Pour enough hot water in the roasting pan to come about halfway up the sides of the custard cups. Bake 25 to 35 minutes, until the custards are just set in the center. Carefully remove the custards from the water bath and transfer to a wire rack to cool. Serve chilled.