

Food for Thought Resource
Center, Inc.
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SILHOUETTE

Vol. I Issue 2

Food for Thought Resource Center

Relationship Changes & Stress Following Bariatric Surgery

Melodie K. Moorehead, Ph.D.



Dear Reader:

Bariatric Surgery Centers of America believes very strongly in playing an integral part in the post-operative process a patient goes through on the way to health and happiness. As the founding partner of Drs. Moorehead, Parish and Associates, the psychological arm of BSCOA, I was asked to address you directly about relationships in our lives and how many of these relationships are affected following gastric bypass surgery.

Before I begin, please allow me this opportunity to thank Dr. Marema for his kind words offered in the first edition of *Silhouette*. His comments regarding my reputation and service in the field of Bariatric Surgery were indeed touching. Next, I would like to communicate the depth of my delight in having the privilege to work with Dr. Cynthia Buffington. She helps to underscore the mission statement of Dr. Marema's practice: "Committed to restoring health in individuals suffering from morbid obesity and its devastating consequences by providing a devoted and exemplary program that portrays medical excellence and offers quality care, education, guidance and support." We have every reason to be very proud to have her as a member of our team. Welcome Dr. Buff!

Let's get back to the matter at hand: relationships. If you think about it, the relationships we have monopolize most of our lives. From relationships with loved ones to relationships with co-workers, bosses and even ourselves, there really isn't much time for anything else. We even have relationships with inanimate objects such as food and money. When people elect to undergo bariatric surgery to control the disease of morbid/super obesity, they often discover that many of the relationships in their lives change. The relationship with food changes drastically. Previously, much more than nutrition alone, food to a bariatric patient must now be regarded as nourishment and nothing more – not a companion, not an escape. For some, this is very difficult to do; the absence of food is perceived as the loss of a best friend. Feelings of 'mourning' are often experienced. In contrast, others may feel a sense of relief --- relief because they have been released from the obsessive, all-consuming thoughts with regard to food.

For those of you who are experiencing a sense of loss, attendance at your monthly resource meetings can be very useful in helping you work through these difficult and lonely feelings. When relief is experienced, it is a wonderful time to learn new ways of handling stress so that as those feelings of craving reemerge, old ways of handling the feelings (binge or graze-eating) are changed.



Michael Parish, Psy.D., Diane Propis, L.C.S.W., Jan Blackburn, L.C.S.W., Richard Garvine, Ph.D., Mary Centrone, Ph.D., Melodie Moorehead, Ph.D. and Sweet Dondi

For the most part, following surgery, the patient begins to experience many valuable improvements in quality of life that in turn impact the relationships present in the patient's life. Relationships with family members can change dramatically. Whether it is husband/wife, sister/brother, son/daughter, the relationship is very often improved with the increase in one's physical ability to move about more comfortably. Possibly even more important, as hope is restored, is the willingness to participate in

social events with loved ones. However, our patients have also taught us that following the return of a healthy self esteem and hope for a new way of life, difficult or abusive relationships

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SILHOUETTE

Silhouette was created as an informative and supplemental tool for gastric bypass patients to utilize along their post-surgical journey to health and happiness.

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Dr. Marema



I would first like to thank all of our volunteer patients for their assistance with the Health Expo at Boca Town Mall and the Health Fair at Florida Atlantic University, Davie campus. These events served to increase community awareness regarding the advantages of bariatric surgery. I would also like to thank all who participated in our picnic to promote the Help-n-Hand Foundation. It was great to 'greet and eat' with so many of our patients and their families. I sincerely hope that all of our patients continue to support our efforts to educate the community.

There is exciting news to report regarding our efforts to improve access to bariatric surgical care within the state of Florida. We are proud to announce the opening of our Orlando office, located on the Florida Hospital Celebration campus in the community of Celebration, adjacent to Walt Disney World. The office is scheduled to open for patient care during the month of April and we anticipate being able to provide surgical services beginning in May. Florida Hospital at Celebration is committed to offering a comprehensive bariatric surgical multidisciplinary program.

By establishing a close association with our Ft. Lauderdale office, we will be able to provide this new facility with the entire complement of program services currently available in our South Florida center. With the assistance of my associates, I will be selecting a full-time office staff. By opening day, this location will be fully functional, offering the educational support and guidance that is such an integral element of our program and something our patients have come to rely on. Our weekly free public information session will be available starting March 10. We look forward to seeing all of our Orlando area friends – old and new!

March 1, 2002 marks the association of Dr. David Diaz with our practice. I have known David since our years together in medical school at the University of Miami. He is a well-known and respected surgeon in the Miami area and will be working with us in Ft. Lauderdale providing bariatric surgical care.

Finally, we are honored to have Jackie Smierkta, R.N., editor of Beyond Change Magazine and a member of American Society for Bariatric Surgery, visit our practice in March. She will present her fun and informative workshop on bariatric surgery and the lifestyle changes experienced by bariatric surgery patients. The presentation will be given during our resource meeting on March 26th in Ft. Lauderdale at the Sister Innocent Conference Center. I hope you can make arrangements to attend – you'll be glad you did!

Sincerely yours,

A handwritten signature in black ink that reads "Robert T. Marema". The signature is written in a cursive style.

Robert T. Marema, M.D.

DOCTORS' PAGE

Ask the Doctors



MICHAEL PEREZ, M.D.

What is a hernia and how can I avoid getting one?

A hernia is a weakness or tear in the wall of the abdomen, sometimes referred to as a rupture. Hernias can occur in men, women, and children of all ages. They are most commonly found in the groin, navel (belly button) and in areas of previous surgical incisions. Because these areas are naturally weak, they are more susceptible to wear and tear than other areas of the body. In obese patients there is a great deal of stress on the abdominal wall and therefore a higher incidence of all types of hernias -- both before and after weight-loss surgery.

Hernias can sometimes cause pain as the lining of the abdomen pushes through the defect. While there is nothing specific that one can do to prevent a hernia, achieving a goal of near ideal body weight and maintaining it, is helpful. One should not avoid physical activity or exercise in hopes of preventing a hernia. Doing so will not prevent a hernia from occurring.

In general, a patient is a much better candidate for a definitive hernia repair when he or she is no longer obese. This decreases the chances of having a reoccurrence of a hernia after repair.



DOUGLAS KRAHN, M.D.

Why are gall bladders removed during all open gastric bypass procedures but only in a select few of laparoscopic gastric bypass procedures?

During weight loss, patients have a propensity to develop gall stones due to stasis (lack of emptying) of the gall bladder and due to alterations in the concentration of bile salts within the bile itself.

During open gastric bypass, we remove all gall bladders because a second surgery following open gastric bypass is made significantly more difficult by the scar tissue formed within the abdomen, and this would require another open, potentially risky surgery. Following laparoscopic gastric bypass, on the other hand, minimal scar tissue is formed, making a subsequent laparoscopic cholecystectomy fairly straightforward. Further, removal of the gall bladder along with laparoscopic gastric bypass is very difficult because of the location of the incisions necessary for the gastric bypass. Hence, the risks to the patient in performing a second surgery (cholecystectomy) after open gastric bypass outweigh the risks of cholecystectomy during open gastric bypass, whereas the risks of performing laparoscopic gastric bypass along with cholecystectomy outweigh the risks of a laparoscopic cholecystectomy subsequent to the laparoscopic gastric bypass.



LEONARD BENITEZ, M.D.

Is pregnancy possible after surgery?

By and large pregnancy is possible and safe after gastric bypass surgery. The pregnant bypass patient needs close follow-up with both her obstetrician/gynecologist and bariatric surgeon. It is important that the Ob/Gyn and surgeon have established a good line of communication since the former may be unaware of the special needs of the pregnant bypass patient.

It is critical, however, that pregnancy be avoided at all costs for at least twelve months after gastric bypass surgery. This one-year period is the active weight loss period -- when the body is in a state of decreased nutrient availability. Pregnancy during this time would place a tremendous strain on both mother and fetus. Fetal development during periods of decreased caloric and protein intake can lead to increased stillborn rates, decreased mental ability in the newborn, increase in the small for date newborn, intrauterine growth retardation and increased fetal abnormalities (birth defects).

Similar to a 'normal' pregnancy, a post-gastric-bypass pregnancy should result in weight gain of approximately 25-30 pounds. It is very important that the patient receives proper prenatal care and is monitored closely to insure adequate weight gain.



DAVID DIAZ, M.D.

Which over-the-counter medications can I take for pain? Are there any restrictions to the medications I can take?

The management of pain after gastric bypass surgery can be divided into two areas: immediate post-op hospital course and post-discharge course. Immediately after surgery, pain can be treated with injectable narcotics such as Demerol or Morphine. These are powerful pain relievers and can usually be delivered by the use of a PCA (Patient Controlled Analgesia).

Additionally, post-op pain management in the hospital can include oral medications once the patient is eating. Oral medications are also the mainstay of pain management after discharge. Numerous oral narcotics are available including Darvocet, Percocet, Vicoden, Demerol and Tylenol #3.

There are certain medications a gastric bypass patient should not use to treat pain. Medications that contain aspirin or aspirin-like products such as Motrin, Nuprin, and Aleve should be avoided because of the risk of bleeding and ulceration in the stomach pouch. Mild to moderate pain can be safely treated with regular or extra-strength Tylenol. For pain that is more severe, patients are strongly advised to consult a doctor.

NURSES' PAGE

On the Lookout for Gastritis

Teresa Eaton, R.N. and Whitney Wilhide, R.N.



What is gastritis?

Gastritis is the medical term for an inflammation of the mucus membrane that lines the stomach, pouch or esophagus (esophagitis). This is brought on by either a bacterial infection (H-pylori) or an irritation resulting from the ingestion or use of certain medications or substances.

What are the symptoms of gastritis?

As the inflammation develops, patients may experience pain in the stomach and or esophagus, particularly after ingesting food or fluids. The discomfort can present itself as a dull ache or a sharp pain. Additionally, nausea and vomiting often accompany the pain or discomfort.

Who is at risk for gastritis?

Post-operative gastric bypass surgery

patients, particularly, need to be aware of gastritis.

Approximately 10 % of gastric bypass patients will develop gastritis at some point following surgery. This condition is quite common in the non-bypass-surgery population as well.

Why is gastritis a possible side effect of gastric bypass surgery?

After surgery, the surface area of the stomach is dramatically decreased, making patients more susceptible to this condition.

How can the chances for developing gastritis be decreased?

It is very important that patients follow the regimen given to them by their doctors following surgery. This alone will help to prevent the development of gastritis. Nutritional balance is critical to gastric harmony. By avoiding coffee, alcohol, nicotine, aspirin, ibuprofen, and all non-steroidal anti-inflammatory agents (naproxen), the chances for gastritis will decrease even more significantly.

How is gastritis treated?

Patients who develop gastritis are typically treated with a course of Zantac, or similar medication until the symptoms dissolve. All patients, particularly those diagnosed with this condition, are strongly recommended to limit the intake of the contributing products mentioned above.



Nutritional Supplements

Abbe Breiter, MS,RD,LD/N

Why are Vitamins and Minerals Important to Gastric Bypass Patients?

Vitamins are organic substances required to regulate the functioning of cells. They are essential to life. Minerals are inorganic chemical elements not attached to a carbon atom. They participate in many biochemical and physiological processes necessary for optimum growth, development and health. What we call a multivitamin is really a combination of vitamins and minerals that our body needs to function properly. The average individual can usually get most of the necessary vitamins and minerals from food sources, but a person who has undergone gastric bypass surgery cannot. This is why each patient is instructed to take a multivitamin/multimineral supplement after surgery twice a day.

Why Take 2?

The Roux-en-Y surgical procedure creates a small pouch that limits how much food a person can ingest at any one time. At the same time, the first section of the small intestine, called the duodenum, is bypassed, resulting in the malabsorption of food. In a non-surgical patient, most of the vitamins and minerals are absorbed in the duodenum. Since that section is bypassed, the

body has less opportunity to absorb the vitamins and minerals in the pill so you are instructed to take two pills per day to make sure you are getting an adequate amount.

What Kind to Take?

It is wise for all patients to begin taking a chewable vitamin and mineral supplement after surgery for the first three months. The new openings made at the beginning and end of the pouch are very small in diameter and it is important to avoid blocking the outlet of the pouch. When purchasing a multivitamin/multimineral supplement keep the following tips in mind:

- If you pay more than a few dollars for a month's worth of supplements, you are paying too much. Price is no indication of quality.
- Does the supplement meet USP standards, meaning does it meet the standards of proper dissolution time in the body? The longer it takes for a supplement to break down, the less likely that the vitamins and minerals contained within will have a chance to enter the bloodstream and be used by the body.
- Does the product describe itself as natural? Keep in mind that the body cannot recognize which nutrient was synthesized in a lab and which was taken from nature.

RESEARCH

Obesity-Related Depression

Cynthia Buffington, Ph.D.



Morbid obesity not only increases the risk for health problems but for psychological distress as well. Studies have found that as many as 90% of morbidly obese pre-surgical patients are clinically depressed and that such depression not only causes relationships with family and friends to suffer, but also leads to further weight gain and disease.

Depression associated with morbid obesity is known to alter the production and activity of specific regulators of appetite and food preference, causing an increase in

the desire for carbohydrates (particularly sweets) and contributing to emotional overeating, binge eating, and other aberrant eating patterns. The net result is increased food intake and increased body weight. Voluntary muscle movements and the desire for physical activity are reduced by depression, resulting in decreased energy expenditure and number of calories burned.

Depression affects health status, increasing significantly the risk of all obesity-related diseases, as well as the risk of surgical complications and lengthened hospital stay. Additionally, depression has even been found to reduce weight-loss success following diet or surgery.

Surgery resolves or improves depression and many of its causes and effects, (i.e. health problems, reduced mobility, low self-esteem, social discrimination.) Over time, however, some patients will have a reoccurrence of their depression, along with the associated eating abnormalities (high carbohydrate craving, binge eating) and weight gain.

The research program at Bariatric Surgery Centers of America plans to take a multidisciplinary approach in determining the most effective tools for resolving depression, pre- and post-operatively. Our associate psychologists will be studying the incidence and effects of depression among the morbidly obese population, as well as identifying and addressing causative factors. Our exercise physiologist will determine the most appropriate exercises for reducing depression and anxiety, and nutritionists will study the associations between nutritional status and mood. In addition, we will examine and report on the effectiveness of a variety of other services offered to our patients to reduce their psychological distress, (i.e. spiritual counseling, massage, hypnosis, positive imagery, wellness counseling, and a variety of FTTC classes designed to assist patients in improving their overall quality of life.)

Through our research and the excellent services provided at Bariatric Surgery Centers of America, we hope to resolve or significantly reduce psychological distress, and in so doing, provide our patients a lifetime of health and well-being.

PSYCHOLOGY

Continued from p.1

are no longer tolerated. Divorce and termination of negative relationships are quite common.

It is natural for change to occur in any relationship. Change is an important part of being alive. How we handle change can either promote or reduce stress in our lives. Teaching ourselves how to handle stress is often the key in the treatment of morbid/super obesity. Psychological stress has been sited in research as a major component in causing and/or contributing to this disease. As part of BSCOA's program, we want to offer you many methods to handle the stresses you face post-operatively, as well as the stresses you will naturally face in life. These new methods can strengthen your resolve for a "New Beginning." We want you to further educate yourself by taking advantage of the many, stress-reducing activities that our program provides.

Possibly this might mean setting time aside to take advantage of the many support programs offered by Food for Thought

Resource Center or the hypnosis classes offered by Pam Shenk. Maybe it will include having a massage with Brenda Kiser or praying/consulting with Rev. Mike. For sure, the more we (whether living with this disease or not) learn to turn to new and healthy ways of releasing stress, the better off we will be.

Please give some thought to the relationships you have in your life and about the ways you deal with the stress brought on by any changes in these relationships. Tell us about your thoughts as you speak with us during your pre/post-op routine follow-ups at your surgeon's office. We feel so strongly about the importance of psychological involvement in the recovery process, that courtesy appointments will continue to be offered to all of you whose insurance does not cover mental health services. We want you to achieve optimum success, and more importantly, acquire the tools necessary to sustain your success for life.

Congratulations and God Bless America.

FITNESS

Tips and Techniques to Keep Your Family Active

Justine Clark B.S. Exercise Physiologist



Have you heard the saying, “A family who plays together stays together”?

Families who engage in physical activity together reap many more benefits than exercise alone. This quality time spent together also serves to strengthen relationships and build wonderful memories.

Exercising as a family helps kids learn that physical activity should be a fun, life-long experience.

As the adult in your family, it is up to you to be a positive role

model for your children in all aspects of life -- fitness included. You need to take the lead in establishing a lifestyle that includes healthy eating and regular exercise. The degree of importance you place on physical activity will be mirrored in your children’s own views about fitness, and it is these views that your children will carry with them into adulthood.

Turn the focus away from the television and video games. Make engaging in outdoor activities a family priority. When each member of the family understands the importance of regular exercise, it is much easier to incorporate physical activity into your weekly schedule.

Try these helpful hints to get in the routine of a regular exercise habit.

- Have a positive attitude about exercising that encompasses the whole family, and be a mutual source of emotional support for each other’s activities.
- In the trunk of your car, keep a gym bag filled with exercise clothing for each member of your family for those spontaneous physical activity opportunities.
- Walk with family members. Young children may prefer to ride their bicycles while you walk or jog.
- Plan robust family outings like a hike in a park, skating at the neighborhood rink, volleyball or Frisbee football at the beach.
- Watch your child’s group sporting event. Watching can be loads of fun and supportive to your child. Take the time to stay after and play as a family. After the kids’ soccer or football game, spend some extra time at the park with a pick-up game of flag football, kickball or soccer.

You know that exercise is good for you, so make it a part of your family’s schedule. With a little effort, you can successfully balance the demands of exercise with other responsibilities. When a family conflict arises, work it out together, allowing input from all, to help solve the problem.

NUTRITION

Spice Up Your Meals

Abbe Breiter, MS,RD,LD/N



As a bariatric surgery patient, you are well aware that food and nutrition take on a whole new dimension following surgery.

It is critical to your health and your weight-loss success that you adhere to the nutritional regimen prescribed for you. This may not always be an easy thing to do, however, especially if you are responsible for cooking for your family (or other ‘normal’ eaters) in addition

to preparing your own ‘special’ foods. Whether you or somebody else actually does the cooking, meal planning for the entire family can be rather tricky. Even though your food choices have been limited, the rest of your family wants to eat a variety of regular, tasty foods. Surely, you have struggled to answer the age-old question: What’s for dinner?

Here are some tips to make your foods tastier and the meal-planning process a bit easier:

- Marinate your protein overnight so allow the flavor to be

absorbed. You can use a prepared marinade from a bottle or make your own from teriyaki sauce or lemon juice and spices.

- Cook the protein food in a sauce. Be sure to serve the sauce to the rest of the family, and not to yourself.
- Stir-fry the protein with vegetables such as onions, mushrooms and peppers that can be served to the family. You, of course, should eat only the protein.
- Open up the spice cabinet, utilizing anything and everything except white sugar, brown sugar and breadcrumbs. Try adding cinnamon to cottage cheese or red pepper flakes to your scrambled eggs.

Keep in mind that if you are uncomfortable eating your protein meal with the rest of the family because they are eating “forbidden” foods, it is okay to eat before or after on your own. Whether you eat by yourself or with your family, remember these few things:

- Take small bites
- Chew your foods well
- Eat slowly (approximately 20 minutes to eat)

HOLISTIC / SPIRITUAL ENRICHMENT

Do You Really Know Yourself?

By: Pamela Shenk, Pres. Professional Hypnotist. Center for Holistic Options



In a lifetime, many relationships come our way. The most important relationship, however, is the relationship you have with yourself.

If you were able to re-write the script of your life, how would it read? Would you change things from your 'real' life or would you decide that the familiar was safer and you'd rather stick with what you already have?

This may seem like a hypothetical question, but you actually have a lot more choices in life than you've probably ever thought about. Who are you? Not what you do for a living, but, Who are You? Is there a completely different person buried under that image you project to the world?

Often, we get so busy with work, family and friends that we lose sight of who we really are. We become so involved with trying to live up to others' expectations that, before you know it, we are living a compressed existence that cheats us out of being at peace and genuinely happy.

Ask yourself: Are you out of touch with your talents, skills, interests, abilities, and insights? Do you have a feeling of loneliness and emptiness that doesn't go away? Perhaps you try to fill that hole by smoking, drinking, or eating a chocolate cake. Perhaps an affair or incessant working is your escape. Do you sometimes feel that you will try almost anything to satisfy that emptiness in your heart?

Do you feel lonely and misunderstood? Do you find that friends and family ignore what is important to you? When you are alone with yourself, do you like the company you keep?

The time has come to let the real you come out of hiding. It is time to find happiness and success in all that you do. If you knew you only had 5 years to live, what changes would you make in your life? There are many choices available to you, but you must first choose to make a change.

Remember, the most important relationship in your life is the relationship you have with yourself. Get to know yourself and reveal your true self to the world. Live, laugh and love!

Loving Others

Rev. Mike Warthen

Since the devastating tragedy of September 11, it seems as though our nation has had a renewed interest in spirituality and religious pursuits. The chaos of this tragedy is common to us all. The renewed sense of patriotism that has engulfed our nation in a revival of red, white, and blue, has afforded us the opportunity to reach beyond the privacy fences in our neighborhoods, and meet the stranger fifty feet away. Priorities have been evaluated and the result is a renewed devotion to our children's future, rather than digging deeper to keep up with the Jones'. We finally met the Jones' across the street and decided that the stuff they have isn't that important. You may even discover that you actually like Mr. Jones.

The combination of spiritual renewal and concern for our neighbor feels good and gives us a sense of belonging to something so much bigger than ourselves. We wonder why we lived such a selfish life of solitude. The improved relational dynamics that we are living is not a new principle. We are simply in a unique position of dependence upon the timeless truth found in God's word. The Judeo/Christian scriptures



summarize this timeless, foundational premise of the relational dynamics God intended for us to practice and experience: *Love God with all that you are and love your neighbor as yourself.*

I hope that by living with concern and appreciation for others you are understanding the importance of loving yourself. Taking the initiative to improve your life through weight loss surgery is a giant step toward improving your physical, social, emotional and spiritual health. I hope you find that you like the person you have discovered beneath the surface.

We need only look to the beginning of time to see that God always creates something wonderful out of chaos. In our nation, we have embraced a deepened sense of community. In your life, God is creating a wonderful and unique person from the chaos rising from the abyss of obesity. May you experience love, joy, and peace in a new way, and may you find the courage and wisdom to share a similar experience with God and others, as you love him with all that you have become and love your neighbor as yourself.

WORKSHOPS & EVENTS

Informational Sessions

Intended for people interested in learning about surgical options for weight loss.

Ft. Lauderdale– Offered at Holy Cross Hospital Sister Innocent Conference Center every Tuesday evening from 6:00-7:00 p.m. and the 2nd Saturday of the month from 12:00-1:00 p.m.

*Informational Sessions will not be held March 19, April 16, July 16, October 15, or December 10, 24, and 31.

Ft. Myers– Offered the 3rd Friday of the month from 6:00-7:00 p.m. at HealthPark Medical Center located at 9981 HealthPark Circle, Ft. Myers, FL 33908. Hospital telephone: (941) 433-7799.

Orlando– Offered every Sunday from 2:00-3:00 p.m. at Celebration Health, located at 400 Celebration Place, Celebration, FL 34747.

Hospital telephone: (407) 303-4114.

*Informational Session will not be held March 3 and 31.

West Palm – Offered on the 2nd Thursday of the month from 6:00-7:00 p.m. at the Jewish Community Center, located at 3151 N. Military Trail, W. Palm Beach, FL 33409. Telephone: (561) 689-7700.

Resource Meetings (f.k.a. “Support Group”)

- Pre-operative patients, patients up to one year post-op, and those interested in our program.
- Veterans Meeting (post-op patients, 75% ideal weight or one year or more post-op). Only offered in Ft. Lauderdale.
- Young Adult Meeting (pre-operative and post-operative patients between the ages of 18-24). Only offered at the Tuesday meeting in Ft. Lauderdale.
- Resource meetings are also held the 2nd Saturday of the month from 1:30-3:00 p.m. in Ft. Lauderdale.

Ft. Lauderdale - Offered the 4th Tuesday of the month from 7:00-8:30 p.m. and 2nd Saturday of the month from 1:30-3:00 p.m. *Resource Meeting will not be held December 24.

Ft. Myers - Offered the 3rd Friday of the month from 7:30-9:00 p.m. at HealthPark Medical Center.

Orlando - Offered the 3rd Sunday of the month from 3:30-5:00 p.m. at Celebration Health.

West Palm – Offered on the 2nd Thursday of the month from 7:30-9:00 p.m. at the Jewish Community Center.

Please call Food for Thought Resource Center to get information or reserve a space in any of the following classes:

Eating Challenges

Intended for anyone with food/eating questions and concerns following weight loss surgery. Come and Share. You are not alone.

3/11, 4/8, 5/13, 6/10, 7/8, 8/12, 9/9, 10/14, 11/11, 12/9 on 2nd Monday of the month 6:30–7:30 p.m.

Addictions & Recovery

Open to anyone who wants solutions to the problem of cravings and the inability to control the urge to eat. This group is also intended for anyone finding themselves transferring addictions.

3/25, 4/22, 6/24, 7/22, 8/26, 9/23, 10/28, 11/25, 12/23, (no May meeting) on 4th Monday of the month 6:30–7:30 p.m.

Refresher Course

Intended for patients who may have gotten a bit off-track from their doctor's recommended diet.

3/14, 4/11, 5/9, 6/13, 7/11, 8/8, 9/12, 10/10, 11/14, 12/12 on 2nd

Thursday of the month 7:30–8:15 p.m.

Life Strategies

Based on a book by Dr. Phil McGraw, this workshop will motivate you and help you begin a new way of life. Everyone is invited to attend.

- Ft. Lauderdale Every Thursday 6:30–7:15 p.m.
- Ft. Myers 3/22, 4/26, 5/24, 6/28, 7/26, 8/23, 9/27, 10/25, 11/22, 12/27 on 4th Friday of the month 6:00–6:45 p.m.
- Orlando 3/24, 4/28, 5/26, 6/23, 7/28, 8/25, 9/22, 10/27, 11/24, 12/22 on 4th Sunday of the month from 3:30–4:15 p.m.
- West Palm 3/12, 4/9, 5/14, 6/11, 7/9, 8/13, 9/10, 10/8, 11/12, 12/10 on 2nd Tuesday of the month from 6:30–7:15 p.m.

Weigh-In

Intended for patients who feel they need to be more accountable in order to lose weight successfully. Patients may come to the Resource Center to be weighed any weekday during business hours (9:00-5:00 p.m.). This will provide motivation throughout the weight loss process. If you feel that you need some additional resources to help motivate you and keep you accountable, please call the Resource Center to make an appointment.

Employment Workshop

Intended for patients who may want to refresh their writing skills with regard to resumes, cover letters, and job applications. Obesity affects many people socioeconomically. This workshop is to help integrate them back into society with a friendly hand.

3/28, 4/25, 5/23, 6/27, 7/25, 8/22, 9/26, 10/24, 12/26, (no November meeting) on 4th Thursday of the month 10:00-11:00 a.m.

Food Shopping Tour

Label-reading at Publix. Learn how to figure out the nutritional content of the foods you buy.

- 3/1, 4/5, 5/3, 6/7, 7/5, 8/2, 9/6, 10/4, 11/1, 12/6 on 1st Friday of the month 6:30–7:30 p.m.

Restaurant Guidelines

Recommended for patients who are feeling more comfortable dining out again and would like guidelines and tips.

- Ft. Lauderdale 3/25, 4/22, 6/24, 7/22, 8/26, 9/23, 10/28, 11/25, 12/23, (no May meeting) on 4th Monday of the month 11:00–12:00 p.m.
- Ft. Myers 3/22, 4/26, 5/24, 6/28, 7/26, 8/23, 9/27, 10/25, 11/22, 12/27 on 4th Friday of the month from 7:00–7:45 p.m.
- Orlando 3/24, 4/28, 5/26, 6/23, 7/28, 8/25, 9/22, 10/27, 11/24, 12/22 on 4th Sunday of the month from 4:30–5:15 p.m.
- West Palm 3/12, 4/9, 5/14, 6/11, 7/9, 8/13, 9/10, 10/8, 11/12, 12/10 on 2nd Tuesday of the month from 7:30–8:15 p.m.

Sermon on the Mount

This is an ongoing spiritual based support group. Reverend Mike Warthen leads this discussion group open to anyone interested in spiritual guidance and fellowship.

3/ 4, 4/1, 5/6, 6/3, 7/1, 8/5, 10/7, 11/4, 12/2 (no September meeting) on 1st Monday of the month 6:30–7:30 p.m.

Something to Think About

Pamela Sherk is offering this class to anyone interested in the mind, body and spirit connection.

3/13, 4/10, 5/8, 6/12, 7/10, 8/14, 9/11, 10/9, 11/13, 12/11 on 2nd Wednesday of the month 6:00–7:00 p.m.

Building Blocks to Health

Open to anyone interested in increasing their understanding of health, nutrition and exercise. Justine Clark will lead these discussions and will teach you how to apply these facts and principles to everyday life.

3/5, 4/2, 5/7, 6/4, 7/2, 8/6, 9/3, 10/1, 11/5, 12/3 on 1st Tuesday of the

PATIENT PROFILE

Ronna Cole



Like so many obese people, weight issues have always been a part of my life. I was overweight by the time I was three years old and joined a weight loss program by the age of eleven. My parents traveled frequently during my childhood and I found myself alone much of the time. Food became my companion. Unhealthy eating habits stayed with me through adulthood and with each year that passed, I gained a few more pounds and lost a little more self-esteem. I even went to college and became a certified eating disorder counselor in hopes of improving my own eating behaviors.

Looking back now, I realize that I was even more depressed and unhappy than I was aware of at the time. I was always tired and I rarely wanted to partake in the activities my friends were engaged in. I was embarrassed and ashamed of my physical appearance and it kept me from doing so many things that I probably would have enjoyed. I think it hurts more now because I know I can never get that time back. We each only get one shot in the game of life, and I spent so much of mine sitting on the sidelines, afraid and unable to play.

When I learned about bariatric surgery, I knew that it was a medical miracle and the last hope for me. I didn't want to leave this earth without knowing what it was like to do so many of the things thin people take for granted: shopping for clothes in a normal store, buckling the seatbelt on an airplane, or walking without feeling short of breath.

My surgery and recovery period was no walk in the park. For about a five-month period (post-op) I felt sick and actually had regrets about having gone through with the surgery. I got the number of other bypass patients and they, along with the support group, gave me the encouragement I needed to get through those tough days.

As a result of my surgery, I have experienced many changes in my life. Losing more than 110 pounds is the most obvious change, but it is my mental transformation that has really had the greatest impact on my life. I feel happy and healthy and I feel that I have a worthwhile existence now. I am much more assertive and sure of myself. I truly feel prepared to handle anything that comes my way. I take one day at a time and don't worry too much about the future. I believe in taking life on life's terms and getting as much enjoyment out of it as possible. My immediate plans are to travel with my daughter and also to put my education to use by helping others with eating disorders.



Patient Profile: Ronna Cole
Date of Surgery: 10-26-99
Weight prior to surgery: 277 Lbs.
Current weight: 163 Lbs.

ANNOUNCEMENTS

Mark Your Calendars!

October 4-6, 2002 will be our 2nd annual conference at the Naples Registry Resort in Naples, FL where we will be conducting workshops on fitness and holistic / spiritual enrichment. Additionally, we will examine psychological topics including (but not limited to) body image, and cravings. Look for more information in the coming months.

Volunteers, We Thank You.

First, our deepest thanks to the following volunteers who gave their time during the month of January to reach out to the community: Rick Bruttell, Casandra Pyle, Sarah Gorman, Ellen Huxley, Ruby Hargrove, Abbey Koffler, George Delmont, Kathy Williams, Jane Registre, Shirley Kravitz, Beth Preston, Mary Levine, Catherine Paton, Fane Berman, Michelle Cox, Robert Brown, Ronna Cole and Shelly Cobb. With their help, we were able to introduce bariatric surgery to the public at the Boca Town Mall Health Expo and the Health Fair at FAU, Davie campus.

Special Event: "The Gimmicks, The Gadgets, The Fun"

Jacquelyn K. Smierkta, R.N. will be presenting "The Gimmicks, The Gadgets, The Fun" at the Resource Meeting on March 26, 2002. Her enjoyable and informative presentation is intended for patients who have had or are planning to have bariatric surgery. Topics such as hair loss, stomach and bowel functions, exercise, refrigerators, bones and even the high cost of 'gas' will be discussed.

Submit your own Patient Profile

If you are interested in sharing your own 'story' in a future edition of Silhouette, please contact FTRC for a patient questionnaire.

PATIENT PROFILE

Kathy Williams

“And this too shall pass.” My mother often said these familiar words to me regarding my obesity. She was one of the few people who looked beyond my weight to see the real person inside of me. She taught me never to give up hope and she made me believe that every problem has a solution if you search hard enough to find it.

Since my early teens, I struggled with my weight. It was a constant issue, a constant battle. I was the fat one in the family and behind my back I am sure people said the dreaded “she has a pretty face...if only she could lose some weight.” I was depressed, tired and lacked motivation. I worked the second shift at my job just so I could sleep late. Like most overweight people, I tried several diets, but none ever worked. I figured I was doomed to be fat forever.

Gastric bypass surgery changed that way of thinking. As my mother promised, my weight problem had found its solution. More importantly, though, the post-operative support I have received has improved so many other areas of my life. The hopelessness has been replaced by euphoria, embarrassment by self-esteem. It is such a wonderful feeling to be out in public and know that people aren't staring at me because of my weight. I am treated with so much more respect now. For instance, when I go to my dry cleaner, he actually takes the clothes out to my car. Before my surgery he never extended such a courtesy to me.

Life now is about living. Gone are the days when I would sit back and let the world go around without me. From riding on my husband's Harley (something I previously couldn't do because of my weight) to shopping for clothes, I find enjoyment in everything. Activities that were once a chore now seem pleasurable.

I won't say that the whole process has been easy. There were certainly some low points along the way, especially right after my surgery. Luckily, though, I was quickly able to break away from those negative feelings. I wasn't afraid of the pain because I knew it was only temporary. In fact, many people I know consider gastric bypass surgery to be drastic. I feel that morbid obesity is drastic, and so I was willing to endure whatever I had to in order to conquer it.

Without my husband's infinite support and the support I receive from everyone at BSCOA and Food For Thought Resource Center, achieving my goals would have been virtually impossible. I thank them and I wish all pre-op patients equal success. Enjoy the ride!



Patient Profile: Kathy Williams
Date of Surgery: 9-28-99
Weight prior to surgery: 303 Lbs.
Current weight: 155 Lbs.



ANNOUNCEMENTS

Hospital Volunteer Program

We are in the process of implementing the Hospital Volunteer Program and are looking for volunteers. Several of you have responded to previous requests and we thank you, but we need more volunteers. This is your opportunity to give back what you received (or would like to have received) while in the hospital. Volunteers will visit with patients, encouraging them to get out of bed and walk the halls, do their breathing exercises or just keep them company until a family member arrives. We ask that volunteers commit to weekly 4-hour shifts. Please call FTTC if you are interested in donating some of your time.

Massage Therapy

If you haven't yet treated yourself to a relaxing massage, you owe it to yourself to do so! Brenda Kiser, Licensed Massage Therapist is available in the office weekdays by appointment only. Please call (954) 223-7814 to make an appointment. She is also available for chair massages at the Ft. Lauderdale Resource Meetings.

Questions? Concerns?

If you have any questions or concerns, please email FTTC or BSCOA. Please be sure to include your name, email address and telephone number in the email so that we will be able to respond to you as soon as possible.
FTTC: foodforthought4u@aol.com BSCOA: precert@browardobesitysurgery.com

Picnic Fun

We are pleased to report that January's Foundation Picnic was a success! We would like to thank everyone for coming out and supporting the Foundation. It was a lot of fun and we hope to plan another picnic in the future.



SILHOUETTE

Is Bariatric Surgery for you?

- Are you 100 pounds or more overweight?
- Do you find yourself jumping from diet to diet with little or no success?
- Can you walk up 10 steps without stopping to catch your breath?
- Do you choose a restaurant according to the size of its seats?
- Was your last automobile purchase based on a car that fit you rather than the car you actually wanted?
- Are you unable to participate in most of the outdoor activities your family and friends engage in?

If you answered 'yes' to one or more of these questions, Bariatric Surgery might be for you. Obesity affects more than one third of the adult population in this country. In fact, it is the most common form of malnutrition in the Western world.

This chronic disease, with its multiple and complex causes, involves much more than overeating alone. Controlling obesity is a lifetime physical, mental and emotional enterprise. Bariatric surgery, when combined with pre- and post-operative support, is an extremely effective way of restoring health to morbidly obese individuals.

We invite you to attend one of our informational sessions to learn more about our program. Please call 877-772-2008 for locations and times.



BEFORE:

Sarah Gorman

Date Of Surgery: 4/25/01

Weight before surgery: 250



AFTER:

Weight now: 138