

# Baylor Clinic Healthletter



## Focus on Obesity

May 2007

Today's healthcare news is dominated by the subject of obesity. While historically the emphasis was on preventative medicine, today the focus has shifted to addressing the obesity epidemic our nation is now struggling with.

It was only 15 years ago that the National Institutes of Health (NIH) first declared obesity a disease. At that time, fewer than 10 percent of Americans were considered obese. By 2006, approximately 32 percent of Americans were suffering from the disease, with an additional 32 percent considered overweight.

The estimated annual cost of obesity in the U.S. has been placed at a staggering \$125 billion. Half of this amount is for direct medical costs, the other half accounts for the value of wages lost by those unable to work because of illness or disability.

Aside from the economic duress, why is obesity such a serious problem? Because of the dire threat it poses to our nation's health. Obesity causes numerous diseases and health conditions and is directly responsible for the upsurge of people suffering from diabetes. Obese people are at much greater risk of developing serious medical conditions such as heart disease, stroke, degenerative arthritis and certain cancers. Today, obesity is the second leading cause of preventable death after tobacco smoking, and is on the threshold of overtaking smoking as the leading killer.

Treatment for morbid obesity can be divided into two broad categories – medical and surgical. Medical weight loss includes dietary modification combined with specific medications. This method has been shown to be very effective, if only for a limited time. Many patients grappling with morbid obesity are familiar with the short-term success of diets, only to regain the weight once the diet is completed – sometimes reaching a heavier weight than before.

For these patients, surgical weight loss can be an effective alternative. The criteria to qualify for surgical weight loss includes a body mass index (BMI) greater than 40 or a BMI of 35-40 with associated co-morbidities. These include diabetes, hypertension, hypercholesterolemia, reflux disease, joint disease, sleep apnea, depression and cardiovascular disease. (Calculate your BMI:

<http://www.cdc.gov/nccdphp/dnpa/bmi/adult BMI/english bmi calculator/bmi calculator.htm>)

The two main surgical weight loss procedures performed are the laparoscopic Roux-en-Y gastric bypass and the Lap Band® procedure. In the Roux-en-Y procedure, the stomach is reduced in size and then rerouted to the intestines to decrease food absorption. This combination of restriction and malabsorption makes the gastric bypass the most powerful weight loss operation. In addition, the surgery results in a dramatic initial weight loss with long-term weight stability.

The Lap Band® procedure involves placing an adjustable band around the stomach to create a small pouch in the upper part of the stomach, which limits food intake. For many patients this is an attractive option because it's reversible and does not involve the stapling and division of the intestines. As a consequence, weight loss is not as dramatic as with the gastric bypass and proceeds at a slower rate.

While surgery provides impressive results, it must be emphasized that any weight loss surgery is a life-long commitment which leads to major changes in lifestyle. Patients experience a dramatic improvement in appearance as a result of significant weight loss, but the real goal is improving health. Amazingly, the majority of patients experience an improvement in their co-morbid conditions, with many even experiencing full resolution of diabetes, hypertension and high-cholesterol levels.

Baylor College of Medicine, in conjunction with St. Luke's Episcopal Hospital, has created the Comprehensive Bariatric Surgery Center to improve the health and well-being of those who are severely overweight. The surgeons, Drs. John Sweeney and Vadim Sherman, along with a team of nutritionists and psychologists, work closely with each patient both before and after surgery to ensure a successful weight loss, improvement in co-morbidities and overall change in lifestyle. Information sessions are held every two weeks at Baylor Clinic. For more information, please contact Monica Flinn, bariatric coordinator, at 713.798.5662.

[Visit the Bariatric Surgery Webpage](#)