



SIERRA BARIATRIC SURGERY

NEWS

“The Best Decision
I Ever Made”
By Lynn Shanley ... page 6

Scott Green, MD
Plastic Surgeon
6/15 SAFH Room A, 7pm

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Fueling Your Body for Optimum Performance

Auburn, CA – The Summer heat is rising and it's time to get out your walking shoes. Weight Loss Surgery patients of Jeffrey Jenkins, MD are wondering exactly how to fuel their bodies to delay fatigue and to stay hydrated during their regular physical activity routines this summer. Heading advice from sport drink companies may not be enough. What about the special needs of Weight Loss Surgery patients?



The task of staying hydrated during rigorous physical activity is at times more difficult after bariatric surgery. Add the common issues that previously obese people have with insulin sensitivity and malabsorption, and it becomes a major task to formulate exactly what, when, and how much to eat and drink for optimum physical performance.

Sports drinks such as Gatorade®, which include electrolytes and carbohydrates, are known to replace lost fluids and sodium that are lost in sweat, and provide an energy source (carbohydrates which triggers the fuel glycogen) to working muscles, which delays fatigue. Gatorade® contains 50 calories per 8 ounces which is reasonable and probably necessary if your activity warrants.

This balance of 6-8% of carbohydrates and added electrolytes is very effective, however volumes of research

has shown that there is one more thing you could add to the mix to speed up replenishment of muscle glycogen and prolong exercise. **PROTEIN** (amino acids).

The idea is that you want to keep the presence of insulin to keep glycogen in the muscles. Study after study has shown that given the same amount of calories, the same physical intensity for the same time, and all other variables matching, groups who take in a combination of carbohydrate, electrolytes and protein supplement exhibited longer endurance, had elevated insulin levels, and had a faster rate of muscle glycogen re-synthesis (recovery) compared to the group who consumed only carbohydrate with electrolytes or only protein.

Glycogen re-synthesis means that muscle tissue is accumulating the pieces to make new protein. More protein is taken up by the muscle when the protein is mixed with carbohydrate. All of this cellular level activity works to help you as the exerciser feel the energy you need to continue and also helps avoid symptoms of fatigue.

If you are one of those successful patients who are ready to get your walking shoes out and do some other fun in the sun activities, here are a few tips to keep in mind to balance your needs and fuel your body:

1. You need more than water for 30 minutes or more of physical activity.
2. Protein before and after physical activity is not just for use by strength trainers.
3. Supplement with protein soon after the activity and make sure you have plenty onboard in advance.
4. Find a sports drink that has a 4:1 carbohydrate /protein ratio to improve endurance and speed recovery after physical activity.

Be safe, have fun, stay hydrated, and fuel your body!

Jeffrey R. Jenkins, MD, FACS

SIERRA BARIATRIC SURGERY

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% Excess Body Weight Loss (%EBWL)

1. FIND IDEAL BODY WEIGHT (IBW)

How tall are you?

Females add 100 for 5 feet of height and 5 for every inch over.
Males add 106 for 5 feet of height and 6 for every inch over.

FEMALE: $\frac{100}{\text{height}} + \text{inches over 5 feet} = \text{IBW}$

MALE: $\frac{106}{\text{height}} + \text{inches over 5 feet} = \text{IBW}$

2. FIND EXCESS BODY WEIGHT (EBW)

weight at surgery: $\text{weight at surgery} - \text{IBW} = \text{EBW}$

3. FIND WEIGHT LOSS (WL)

$\text{weight at surgery} - \text{current weight} = \text{WL}$

4. & 5. $\frac{\text{WL}}{\text{EBW}} \div \frac{\text{EBW}}{\text{current weight}} = \text{before conversion}$
 $\frac{\text{WL}}{\text{EBW}} \times 100 = \text{%EBWL}$

How many pounds will you have to lose to reach 65%EBWL?

GOAL $\frac{\text{EBW}}{\text{current weight}} \times .65 = \text{lbs to achieve 65\%EBWL}$

How many pounds will you have to lose to reach 55%EBWL?

ALARM $\frac{\text{EBW}}{\text{current weight}} \times .55 = \text{lbs to achieve 55\%EBWL}$



1. Visit www.SierraBariatrics.com
2. Click on the eStore button.
3. Make secure purchases of vitamins, books and more! Items are shipped directly to your home.



1. Visit www.SierraBariatrics.com
2. Click to Join the discussion today!

Calendar of Events

ALL EVENTS HELD AT SUTTER AUBURN FAITH HOSPITAL UNLESS OTHERWISE NOTED

For EVERYONE: Patients, Family & Friends

(Participants are encouraged to maintain one another's confidentiality.)

June 15th, 2006 4:30-6:30pm (Thursday)
Hospital Preoperative Education Class
Call 530-823-0701 to register

June 15th, 2006 7pm (Thursday)
Support Group Meeting
Special Presentation By:
SCOTT GREEN, MD, PLASTIC SURGEON

June 24th, 2006 10 am – noon (Saturday)
**FREE Informational Seminar*
Call 530-823-0701 to register

July 20th, 2006 4:30-6:30pm (Thursday)
Hospital Preoperative Education Class
Call 530-823-0701 to register

July 20th, 2006 7pm (Thursday)
Support Group Meeting
Everyone is invited!

August 17th, 2006 7pm (Thursday)
Support Group Meeting
Special Presentation By:
DAVID BLACK, PH.D.

September 16th, 9am – noon
WALK FOR THE HEALTH OF IT
Support Group Meetings are held the third Thursday of each month at 7pm in conference room A at Sutter Auburn Faith Hospital.

Support Group Goers are SUCCESSFUL!

Sutter Hospice Thrift Shop – Clothing Exchange

To set-up a one-to-one clothing exchange arrangement, please request a letter to bring to Sutter Hospice Thrift Shop. The arrangement is for a one year period beginning anytime after you undergo surgery. The Thrift Shop is located at 13342 Lincoln behind KFC. You must present a letter to participate.

The Surgeon's Point of View

Jeffrey R. Jenkins, MD, FACS



Losing Weight Prior to Gastric Bypass Surgery

If I could lose weight, why would I need to be seeing a Bariatric surgeon?

This thought likely goes through many patients' heads when they are asked to lose weight prior to their surgery. I try to explain the rationale to people and I assume they understand, but I am sure there are some patients who still don't realize the importance of this (relatively) easy task.

For those of you who have not seen your surgeon, you may be surprised to find that you will be asked to lose approximately 10% of your excess body weight prior to undergoing surgery. Not all surgeons, however, require this step preoperatively. I used to feel that patients were coming to me for a reason, namely, they could not lose weight by traditional diet and exercise. Therefore, they shouldn't be forced to undergo mandatory weight-loss preoperatively. This philosophy worked fine and I did not have any upset patients because everyone was able to proceed on to surgery uninterrupted. Unfortunately, this backfired on occasion. Some patients saw the upcoming surgery as "a last chance" to eat whatever they want. As you can imagine, the results were disastrous in some who gained significant weight prior to their operation. This would make a difficult operation even more challenging.

You might ask, *what's the big deal with gaining a little weight before surgery?* Take it from me, it's a big deal. The most significant consequence of gaining weight just before surgery is the potential inability to perform the surgery laparoscopically (through the small incisions). The reason for this is the fact that the liver tends to be one of the first places an obese person will store extra weight. Because the liver tends to be large in obese patients, there is a potential for it to be so large that your surgeon will not be able to retract it out of the way enough to create the new gastric pouch. If this were to occur, an open procedure would be required in order to place large retractors in the abdomen and move the liver out of the way so the pouch can be formed. You get the picture?

The opposite of this is also true. That is, if an obese person were to lose weight just prior to surgery, one of the first places the weight disappears is from the liver. As a result, a previously large liver may become small enough to allow your surgeon to complete the operation laparoscopically.

Another reason for this weight loss requirement is more subtle. Despite being massively overweight, some patients do not have the motivation to lose even a small amount of weight prior to surgery. In fact, most people are only asked to lose between 10 and 20 pounds prior to surgery. For most, this represents an easy hurdle to get over. The majority of them have lost this amount of weight over and over again throughout their obese life, only to be followed later by gaining it all back.

In my opinion (and that of other surgeons who require preoperative weight loss) those patients who are unable to lose this small amount of weight before surgery are not good candidates for surgery. The reason is that these patients do not have the skills necessary to use their "tool" (gastric bypass) effectively after surgery and they are doomed to failure. These same patients frequently will not make the necessary lifestyle changes after weight-loss surgery and will continue to eat poorly and fail to exercise. As a result, they will slowly regain the weight they lost and become obese again over time.

So when you are asked to lose weight prior to surgery, deal with it in a positive way. Not only will it help your surgeon complete your operation laparoscopically, it will also serve as a predictor of your future success.

~ Jeffrey R. Jenkins, MD, FACS

Lori Cochrane's Book "SUCCESS TOOLBOX" -- \$22.95

NEW Zero Carb Isopure® Liquid (20oz) -- \$3.75

The purest, fastest, clearest whey. Liquid Protein. 40 grams. 20oz. No lactose, no aspartame.

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We sell a wide variety of Revival Soy products and all BARIATRIC ADVANTAGE products!

Who Can You Call?

FOR MEDICAL CONCERNS or TO MAKE AN APPOINTMENT:

*Call Dr. Jenkins' Office 530.823.0701

FOR SUPPORT (NOT FOR MEDICAL CONCERNS):

Jeffrey Jenkins, MD, Bariatric Surgeon
DrJenkins@SierraBariatrics.com (Call the office with medical concerns; Email may be checked infrequently.)

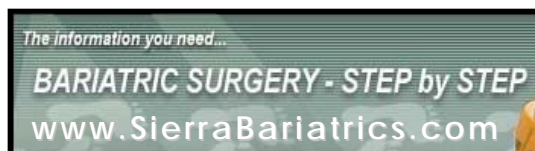
David H. Black, Ph.D.
Clinical Psychologist
916.922.8050

Jan Haemmig, Fellow Patient, Support Group Volunteer
530.265.2931 or Volunteer@SierraBariatrics.com

Lori Cochrane, Bariatric Behaviorist
Patient Education & Support
916.705.7309 or Lori@SierraBariatrics.com

Pam Kesler, MFT, Bariatric Therapist
Kesler, Elliott & Associates
530.888.7958

***DIRECT ALL MEDICAL CONCERNS TO THE OFFICE**



WLS Website Resources

www.SierraBariatrics.com

www.SierraBariatricsEstore.com

www.obesityhelp.com

For patients by patients

www.asbs.org

The American Society for Bariatric Surgery

www.BariatricBehavior.com

Learn more and become motivated about lifestyle changes required for long-term success

www.obesity.org

Information from the American Obesity Association

www.FitDay.com

Track your intake, exercise, weight loss and goals

www.MyPyramid.com

Information about food intake and physical activity

www.EatRight.org

Nutrition and health information from the American Dietetic Association.

www.AceFitness.org

The American Council on Exercise

WHILE THE INTERNET CAN BE AN EXCELLENT RESOURCE, BE CAUTIOUS OF ADVICE OBTAINED THROUGH UNKNOWN SOURCES.

EXERCISE FOR LIFE – article will return next month!



By

Kristin Jenkins
(530) 320-4376

ACE Certified Personal Trainer



Oh, BEHAVE!

By Lori Cochrane

Setting Targets for Positive Goals

THIS IS THE FINAL INSTALLMENT OF A SERIES OF “OH, BEHAVE!” ARTICLES REGARDING JOURNALING, ANALYZING YOUR BASELINE, AND USING THAT INFORMATION TO CREATE TARGET BEHAVIORS AND GOALS.

By now, if you've been following along with the plan, you have diligently journaled all of your food intake and physical activity and have analyzed the data you created to find the pattern of behaviors you exhibit (your baseline). If you are still at a crossroads as to which behavior exactly may be contributing to a weight plateau or a weight gain, bring your journal with you to a doctor's appointment and ask for help.

You've likely noticed a theme: The work you are setting out to do is to replace undesirable behaviors with more desirable ones that will be conducive to your success.

CONSIDER YOUR PLANNING AT THIS STAGE TO BE A TWO STEP PROCESS:

STEP ONE – SETTING THE GOAL: Have a clear understanding of your defined goal. Be sure you know what you want and that it is realistic. To lose additional weight may be realistic if you are on a weight plateau. Exactly how much weight do you intend to lose and in exactly how much time? Break it down into smaller time frames making sure it is realistic.

STEP TWO – SETTING THE TARGET: Define the behaviors you will have to exhibit to accomplish the goal. Exactly what behaviors will you have to exhibit to reach your goal? To lose weight you might consider increasing your physical activity and increasing your protein consumption (this will narrow down your options).

To combat the sensation of deprivation and to help solidify your opportunities to be successful, it's imperative to focus on the positive. In other words, each new behavior is going to be something to **add** to what you are already doing instead of taking something away. Isn't it easier to think of what we CAN have instead of what we can't?

Once you have figured out what behaviors to **add** to your repertoire, there are some important points to follow through with to complete your planning:

1. When setting the target behaviors, consider every detail such as the how often and how long you will perform a physical activity, and also how much protein ratio you will take-in per day.
2. Document and track all of your behaviors related to the goal in your journal. With attention to your physical activity and attention to your daily intake, you will want to continue to write down everything that passes through your lips including liquid, and every bit of purposeful physical activity, including length of time and frequency.
3. Reward yourself when you've been successful. First, reward yourself for small increments of success increasing the power of the reward as bigger accomplishments are met. Do not reward with food or treats.
4. Lastly, plan for continued success. For a weight goal it is a good idea to set an upper limit alarm to signal you to go back to square one.

I challenge you to work through any barriers and get this job done, because you are worth it!

TO READ MORE ABOUT THIS TOPIC, BUY LORI'S BOOK "SUCCESS TOOLBOX" AT SIERRABARIATRICSSTORE.COM.

The BEST Decision I Ever Made

By Lynn Shanley



My name is Lynn Shanley. I had gastric bypass surgery done on June 14th, 2005. I just had my one year anniversary. I have lost a stunning 146 pounds since starting this process.

I am 43 years old and was a miserable 300 pounds when I struggled with the decision to undergo surgery. I did go back and forth with deciding to go this route. My husband Micah had a hard time supporting me with this decision because he loved me even at that weight and didn't want me to take the surgery risk. He finally supported me to [go forward with gastric bypass surgery] when my mother passed away from pneumonia on January 9th, 2005.

It is hard to watch someone that you love so much die. My dad helped me with the financial end of the surgery and for him I will always be grateful.

I was having health problems at that weight. My asthma was out of control; I hurt all the time; I never got any sleep due to the snoring; and, having such pressure on my body was uncomfortable to say the least. I didn't realize then how bad I felt until I look back now. Now, I barely suffer from asthma and I have more energy than I thought possible.

God has been a big part of this process. I asked Him to put a lot of road blocks up for me if this wasn't right for me so I would change my mind. I had not one road block and in fact the pre-surgery process went rather quickly.

When I met Dr. Jenkins I was nervous at first. I did not feel judged by him about my weight. Most skinny doctors think it is so simple to "just cut back and exercise and the weight will come off!" Dr. Jenkins understood that I had tried it all to take off the weight and failed every miserable time.

Dr. Jenkins saved my life on the day of surgery. I have since found that I am a girly girl and enjoy things like makeup and hairdo's and nice clothing (a size 8/10 now instead of a size 26/28).

Through the support group I have met some wonderful friends – my "Slenderellas" Patty, Carol, Nancy and Debra (I love you wonderful ladies). I will do everything possible to follow the stipulations set before me, like not drinking and eating at the same time and attending the support group meetings when possible. I will maintain what God and Dr. Jenkins have given me. As the title of this article says, it was "THE BEST DECISION I EVER MADE."