

LAP-BAND

weight-loss surgery exceeds expectations

Just over five years ago, the FDA approved a revolutionary device to aid in surgical weight loss.

The INAMED LAP-BAND System has helped tens of thousands of patients across the country shed excess weight that put them at heightened risk for such serious illnesses as type-2 diabetes, hypertension, dyslipidemia, heart disease, stroke, gall bladder disease, sleep apnea, osteoarthritis, and some forms of cancer. People who are morbidly obese also have more musculo-skeletal problems than people who maintain a healthy weight.

Gary M. Bunch, MD, FACS, performs LAP-BAND surgery at Manatee Memorial Hospital, and he reports that the hospital is rapidly gaining a reputation as a center of excellence in bariatric surgery performed with the LAP-BAND procedure.

"We began performing this surgery in March 2005," reminds Dr. Bunch, "and we have found that patients who chose the LAP-BAND procedure, rather than Roux-en-Y gastric bypass, attained several important benefits.

"Any surgery has risks," adds Dr. Bunch, "but for morbidly obese patients, the dramatic benefits of weight-loss surgery far surpass those risks. With the LAP-BAND gastric banding system, we make it even safer for patients to achieve these benefits."

Why LAP-BAND?

Both the LAP-BAND and bypass procedures can be accomplished laparoscopically, with several small access points instead of a large abdominal incision. This means patients can return home within 24 hours following surgery and are quickly able to resume most normal activities.

The LAP-BAND procedure takes advantage of the body's natural digestive processes; patients who select this procedure will not require a lifetime regimen of nutritional supplements as do bypass patients. It does not involve any rerouting or cutting of the intestine or stomach. The body maintains its normal anatomy, and a band is fitted around the upper stomach that restricts food intake and makes the patient feel satisfied after eating a small meal.

There is virtually no mortality associated with the LAP-BAND procedure, and complications are rare — between only 1 and 2% of cases.

The procedure is adjustable and reversible; the LAP-BAND can be inflated and deflated in the doctor's office without any additional surgery.

Most patients lose two to four pounds per week; if not, then additional fluid is placed into the band.

Dr. Bunch points out that most surgeons who perform gastric bypass surgeries do not also perform reversals of that procedure. If patients desire a reversal of a gastric bypass, they will generally have to travel to a large medical center to find a surgeon to perform it.



For patients who are already on medications for type-2 diabetes or hypertension, the rapid weight loss following any obesity surgery has an immediate effect on blood sugar and blood pressure levels; many patients are able to halt medications for these conditions within weeks of their surgeries.

Dr. Bunch notes that initial weight loss is more rapid with gastric bypass but that total weight loss 18 months after either surgery is comparable to the LAP-BAND procedure without the complications associated with bypass, such as diarrhea and vitamin deficiency.

"The big difference here," he points out, "is that the slower rate of loss with the LAP-BAND helps the skin retain its elasticity. Many gastric bypass patients lose weight so rapidly that their skin sags, and they have to schedule additional surgeries to remove excess skin from the abdomen, arms, legs, and face. Though it is too soon to say that LAP-BAND patients will never experience this, it appears that the slower rate of weight loss helps the skin maintain its elasticity. We encourage patients to begin a regular exercise regimen before surgery, which also helps maintain skin tone. As a result, we have not seen problems with sagging skin among our LAP-BAND patients."

Dr. Bunch reports that patients seem to maintain their weight loss better with the LAP-BAND procedure.

"Studies have shown that 95 percent of obese patients who try to control their weight with diet and exercise alone will regain most of their weight after five years," he informs. "Gastric bypass patients maintain their weight

loss for about three years, but as they increase their caloric intake and stretch their small stomach pouch, they begin to gain weight again.

"Patients who select the LAP-BAND procedure are able to lose 65 to 85 percent of their excess weight and keep it off beyond that five-year point. In fact," adds Dr. Bunch, "patients experiencing weight gain several years after their bypass surgeries are now having a second procedure to place LAP-BANDs for permanent weight-control support."

In preparation

Dr. Bunch emphasizes that one of the keys to successful weight-loss surgery is the care with which patients are prepared for this procedure.

"This is a life-changing event, physically and emotionally," Dr. Bunch points out. "We are fortunate at Manatee Memorial Hospital to have a weight-loss surgery coordinator who has had this surgery herself, and she makes it a point to talk with each patient and share her own experiences with them.

"We also have a comprehensive education program to ensure that patients learn about the dietary changes this surgery will require and how important the right dietary choices will be.

"Before surgery, we counsel patients about the ways their social and familial relationships will be affected by the rapid change in their appearance following weight-loss surgery. After surgery, we provide strong group support so patients can share their experiences, learn coping skills from each other, and trade healthy and flavorful recipes.

"Because exercise is such an important part of overall health, we have arranged with a local fitness center to offer each of our patients a week's free membership and time with a personal trainer to help them develop an exercise regimen that works with their home and work schedules. If patients decide to join the fitness center, we have a group rate to help make it more affordable.

"Some people think of weight-


loss surgery as a cosmetic choice," acknowledges Dr. Bunch, "but it's not true. Instead, weight-loss surgery is a choice for good health; an improved appearance is just icing on the cake. Obesity is a complex medical problem, and it develops not from simple lack of control but from genetics, environment, and medical conditions like abnormal adrenal function.

"At Manatee Memorial Hospital, we have a successful weight-loss surgery program that offers a safe and effective alternative to gastric bypass, holding out the promise of long-term weight control that no diet can really offer. I am happy to be part of the team that makes this kind of life-saving, life-enhancing procedure available to our residents."

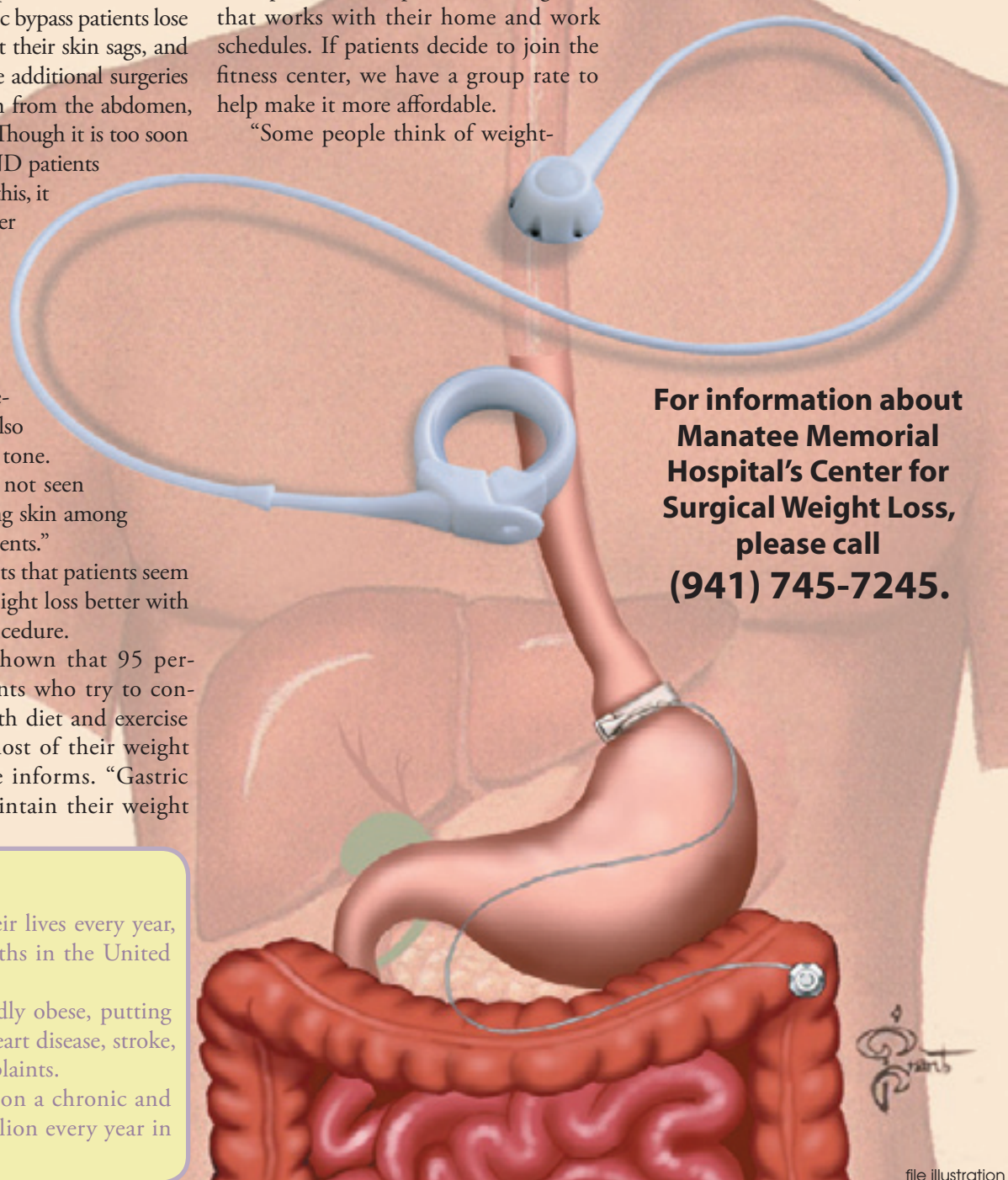
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Healthy partnership

You ... and Manatee Memorial Hospital. The hospital offers a number of programs to help educate the public about maintaining or regaining health. For information about health issues, please visit www.manateememorial.com, or call the marketing department at (941) 745-7204. Manatee Memorial Hospital is located at 206 2nd St. East in Bradenton.



Gary M. Bunch, MD, FACS, is board certified by the American Board of Surgery. He completed his undergraduate studies at the University of Kentucky College of Arts and Sciences, Lexington, and earned his medical degree with high distinction at that university's College of Medicine, Albert B. Chandler Medical Center. He completed his residency at the University of Tennessee Health Sciences Center, Department of Surgery, Memphis, where he served as chief resident from 1992 to 1993. Dr. Bunch is a fellow of the American College of Surgeons and a member of the American Society of Physicians and Surgeons and Manatee Medical Society.



For information about Manatee Memorial Hospital's Center for Surgical Weight Loss, please call (941) 745-7245.

Fast facts ... Obesity

Excess weight costs more than 300,000 Americans their lives every year, making it the number one cause of preventable deaths in the United States.

More than 10 million Americans are considered morbidly obese, putting them at increased risk for hypertension, diabetes, coronary heart disease, stroke, respiratory problems, some cancers, and a host of other complaints.

The National Institutes of Health consider the condition a chronic and progressive disease, costing Americans more than \$100 billion every year in health-care expenses and lost wages.