



# Bariatric Patients Make Life Commitment to Maintain Healthy Weight



Roche J. Featherstone, MD, shares a light moment with bariatric surgery patient Shelley Heinz of Traverse City, and Shelley's pre-surgery trousers. Shelley (right) weighed more than 300 pounds at age 37. "I knew where I was headed," she said. "I just wanted to feel better. My quality of life is back. I'm doing things I haven't done in years. Dr. Featherstone truly did save my life."

## In This Issue

- Bariatric Program Offers Excellent Outcomes . . . A2
- Medically Supervised Weight-Loss . . . . . A4
- First Steps . . . . . A5
- Physician's Diabetes Now Under Control . . . . . A6

# Munson's Bariatric Surgery Program Offers

It is no secret that there is an epidemic of obesity in the United States. Approximately 60 percent of the adult population is overweight, and 31 percent of adults are obese, an 8 percent increase since 1980. The alarming rise in obesity among children and adolescents does not bode well for the future.

Michigan is not immune to the national trend; it is currently ranked sixth in the U.S. in incidence of obesity. In 2002, Michael A. Nizzi, DO, general surgeon and now head of the bariatric surgery team at Munson Medical Center, recognized the need for a weight-loss surgery program to serve patients in northern Michigan.



Munson Medical Center's Bariatric Surgery Team. From left, Steven E. Slikkers, MD; Angie Glazier, Assistant Coordinator; Roche J. Featherstone, MD; Mary Kay Williams, MSN, FNP-C, Program Coordinator; and Michael A. Nizzi, DO.

## Why Offer Weight-Loss Surgery?

Nizzi said, "Munson physicians were already treating patients for medical conditions associated with excess weight – uncontrolled hypertension, hyperlipidemia, type II diabetes, degenerative osteoarthritis, sleep apnea, cardiac disorders, gastroesophageal reflux (GERD), and depression. In addition, we were managing patients who experienced complications after bariatric surgery at centers that did not offer adequate follow-up. It just made sense for Munson to offer comprehensive weight-loss services including bariatric surgery in order to address both issues at the source."

The development of a safe, integrated bariatric surgery program with effective pre-surgical screening and long-term follow-up required a multidisciplinary, hospital-wide effort. The hospital needed to ensure the availability of experienced nurses and multi-specialty consultative expertise to provide evaluation and treatment for co-morbid conditions. They invested in new equipment to accommodate larger patients.

In addition, the surgeons received specialty training and proctoring to hone their bariatric skills. (All members of the Munson weight-loss surgery team are members of the American Society of Bariatric Surgery, an important educational and consultative resource.) In August of 2003 they operated on their first patient.

## Who Is a Candidate for Bariatric Surgery?

Munson surgeons follow the NIH guidelines for bariatric surgery eligibility. Criteria include:

- Body mass index (BMI) of 40 or greater (100 pounds or more above normal weight), or
- BMI of 35 to 40 (50 to 100 pounds above normal weight) with two or more co-morbidities.

Patients must be between 18 and 60 years old, have a record of unsuccessful attempts to lose weight in a medically-supervised program, and have obesity-associated co-morbidities under medical control.

## Pre-Surgical Education and Evaluation

Patients who are considering weight-loss surgery are required to attend a seminar where they learn about the surgery and the lifestyle changes and long-term follow-up that are an integral part of successful weight loss (see article, First Steps). Support from the patient's primary care physician is critical both before and after the surgery.

Patients receive extensive education about proper nutrition and exercise. They enroll in a smoking cessation program if needed. They are evaluated by a practitioner trained in weight loss issues and are screened for eating disorders. The psychological evaluation also includes an assessment of the patient's understanding of, and ability to, implement the lifestyle modifications integral to successful weight loss, as well as an assessment of the family's willingness to support the changes.

## Excellent Safety Profile and Outcomes

In addition, co-morbid risk factors must be controlled. It may take as little as a month or as many five months before a patient is medically optimized for surgery.

### Roux-en-Y: The Gold Standard for Bariatric Surgery

Munson surgeons perform the roux-en-Y, or gastric bypass, currently the gold standard for weight-loss surgery. This procedure combines restrictive and malabsorptive processes to promote weight loss. A portion of the stomach is isolated to form a 20 to 30 cc pouch that restricts the amount of food a patient can eat at one time. The pouch is connected to the small intestine with a bypass (roux) limb ending in a 12 mm stoma. The size of the stoma restricts the amount of food that can pass into the intestine and creates a feeling of fullness. Because food bypasses the duodenum and the first portion of the jejunum, absorption of nutrients is decreased.

### Laparoscopic or Open Approach

The roux-en-Y may be performed by either open or a laparoscopic approach. Steven E. Slikkers, MD, the newest member

of Munson's bariatric surgical team, said, "For most patients, we prefer the laparoscopic approach, which is associated with a lower rate of wound complication and hernia, and better cosmesis as compared with open surgery."

He continued, "Laparoscopic roux-en-Y can be difficult in patients who have had previous abdominal surgeries with extensive scarring, but we can usually make adjustments to our technique to accommodate special circumstances."

### A Safe, Effective Therapy for Obesity

For appropriately selected patients in expert hands, gastric bypass is both safe and effective in helping patients achieve permanent weight loss. Roche J. Featherstone, MD, a member of the bariatric-surgery team, said, "Munson's weight-loss program includes extensive patient screening, education, and follow-up, and our surgical team performs an average of six bariatric procedures each week."

### On the Horizon

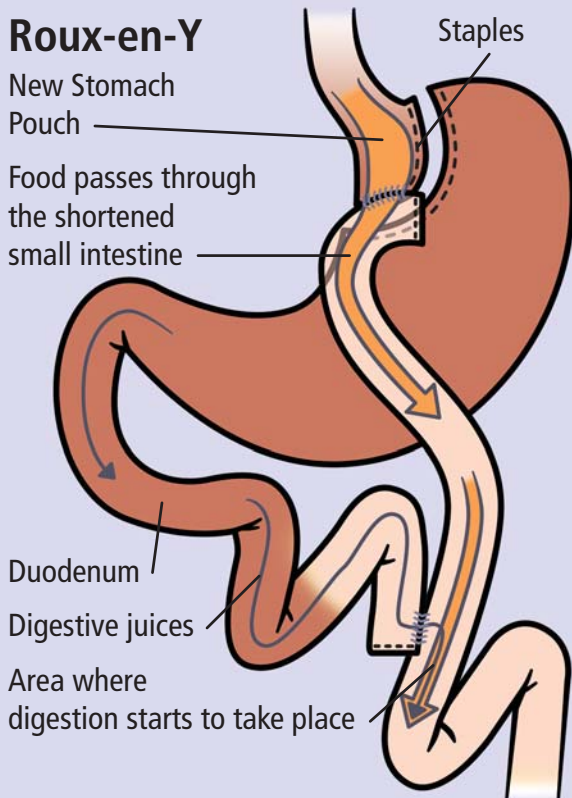
As bariatric surgery evolves, Munson surgeons continue to enhance their armamentarium of procedures to include more minimally invasive procedures and surgery tailored for individual patient requirements.

Munson surgeons are poised to begin laparoscopic adjustable gastric banding (Lap-Band™) in the summer of 2006. This innovative surgery involves placing a cuff around the upper portion of the stomach to create a pouch that restricts food intake. The cuff can be inflated or deflated to control the rate of weight loss, and it can be removed altogether to reverse the surgery.

Laparoscopic gastric banding has a low risk profile, and weight loss results that are beginning to approach those for roux-en-Y. Nizzi believes the Lap-Band™ may be an appropriate surgical weight-loss choice for patients who have a relatively lower BMI and limited co-morbidities and who demand a less invasive, reversible procedure.

Looking long term, genetic therapy may be an effective weight-loss tool. In the near future, the gastric pacemaker and intragastric balloon, both of which induce a sensation of satiety, may prove useful.

For more information about how the program could specifically benefit your patients, you may contact one of the physicians or Mary Kay Williams, MSN, FNP-C, at Grand Traverse Surgery at (231) 935-8900.



## Diabetes Under Control After Grayling Physician's Bariatric Surgery

Charles G. Todoroff, MD, has a busy internal medicine practice in Grayling. He is a husband and a grandfather and has a rich variety of social and recreational interests. And until his bariatric surgery at Munson Medical Center earlier this year, his life and health were in jeopardy.

He had battled excess weight and type II diabetes for years, and like many patients, he was able to lose weight, but always regained it after a few years. His diabetes had been diet-controlled until about two years ago, when he began taking oral

*"I knew I was talking to a man who was on the leading edge of what is known about bariatric surgery."*

— Charles G. Todoroff, MD

medication. In the summer of 2005, his diabetes entered a very malignant phase, and he progressed from needing two tablets of oral medication to more than 100 units of injected insulin each day. He also began to experience a decline in kidney and cardiac function.

"My interest in bariatric surgery suddenly went into high gear," said Todoroff. He approached the task of researching weight loss surgery programs with a unique set of questions, reflecting both the sensibilities of a patient and the spirit of scientific inquiry of a physician.

He contacted the Munson program and eventually met with Roche J. Featherstone, MD, of Munson's bariatric surgery team. "The Munson weight-loss team made a tremendous effort to accommodate my schedule, and Dr. Featherstone answered all my questions with directness and assurance. I knew I was talking to a man who was on the leading edge of what is known about bariatric surgery."

Featherstone performed Todoroff's surgery in early February. The surgery went well, and Todoroff was home in three days. Since then, he said, "My diabetes is under control, and I am completely off my medications. I have lost a great deal of weight and am wearing clothes that have been in storage since the Reagan administration. I'm enjoying my work, I can play with my grandson, and I have energy left at the end of the day."

He knows he must continue his commitment to good lifestyle habits, but he has the support of his wife Carol, as well as another very good reason to remain committed. "I am best buddies with my three-year-old grandson, and I intend to be here to see him graduate from college."

Reflecting on his own experience, Todoroff offered this thought to other physicians. "Bariatric surgery has evolved to become a legitimate therapy for obesity. For the right patient, it can be lifesaving."



Charles G. Todoroff, MD, and his grandson. Todoroff had bariatric surgery at Munson Medical Center in February.

## Bariatric Surgery: Medical Facts Physicians Need to Know

Early bariatric procedures, including the jejunio-ileal bypass and a variety of gastroplasty procedures, had severe side-effects and/or considerable mortality. By contrast, modern roux-en-Y gastric bypass, in expert hands and for the right patient, is both safe and effective in helping patients achieve permanent weight loss.

Some still view bariatric surgery as a cosmetic procedure. However, excess weight and associated co-morbidities are life-threatening. For the very obese, medical management has a near 100 percent failure rate and weight-loss surgery can be the best option to maintain weight loss and avoid complications. Studies show that obese patients who have had surgery are at decreased risk of premature death as compared with those who have not.

The stigma society attaches to excess weight also attaches itself

to weight-loss surgery, and some view surgery as a quick fix for patients who lack the discipline to stick to a diet and exercise program. Obesity is in fact a disease with both environmental and genetic components. A comprehensive bariatric surgery program, such as Munson's, that includes education and follow-up, can provide impetus and support for making the lifelong commitment to behavior modifications necessary for sustained weight loss.

### Munson Bariatric Surgery Quick Facts:

- Average excess weight lost by Munson patients is 72%
- Average excess weight lost nationally is 60%
- Mortalities based on 400 patients is 0%
- Anaso-motic leaks based on 400 patients is 0%
- Pulmonary embolism based on 400 patients is 0.5%

## Medically Supervised Weight-Loss Program Is Often First Step

Some insurance providers in northern Michigan require patients who are candidates for bariatric surgery to demonstrate participation in a medically-supervised weight-loss program in order to be eligible for coverage. The Comprehensive Weight Management Program (CWMP) was established at Munson Medical Center to fulfill that requirement, but it has proved to have benefits beyond that original purpose.

Patrick H. Friedli, MD, a family physician with special clinical interest in treating obesity, is Director of Munson's Comprehensive Weight Loss Program and leads a team of exercise physiologists, dietitians, behavioralists, and social workers. Together they provide a six-month, one-on-one comprehensive weight loss program consisting of nutritional management, exercise, and lifestyle counseling.

Dr. Friedli said, "Obese people experience social stigma and lifestyle restrictions, as well as significant medical risks. They suffer from a range of co-morbid conditions and are at increased risk for premature death. Our goal is to provide tools in the form of lifestyle modifications to help patients lose excess weight and maintain their weight loss."

Candidates for Munson's Comprehensive Weight Loss Program must have a body mass index (BMI) of 35 plus two approved co-morbidities, a BMI of 40 and one co-morbidity, or a BMI of 45 or above. The goal is that patients will lose at least 10 percent of their excess body weight in the program.

**Co-Morbidities of Obesity:** Many patients with a BMI of 40 or higher have one or more of the following obesity-related conditions:

- Type 2 diabetes
- Heart disease
- Osteoarthritis
- Hypertension
- Pulmonary conditions
- Some forms of cancer
- High blood lipids
- Gall bladder disease
- Depression

Medical supervision is a critical aspect of Munson's weight loss program. It is important to monitor patients' adherence to exercise and nutrition regimens as well as their weight loss. In addition, many weight-loss patients have significant co-morbid risk factors that require medical supervision and management.

Dr. Friedli said, "Patients who complete the Comprehensive Weight Management Program realize benefits beyond satisfying insurance requirements. Most patients lose at least 10 percent of their excess weight and thereby reduce their risk for surgery significantly. Also, the lifestyle modifications patients learn in the program are crucial to their ability to maintain weight loss after surgery."

In addition to the Comprehensive Weight Management Program, Munson offers two other non-surgical weight management programs: the three-month Working Off Weight (WOW) Program and the eight-week Healthy Weight Program. Both are group programs consisting of nutrition, exercise, and lifestyle modifications for patients who are not surgical candidates.

To learn more, please contact Patrick H. Friedli, MD, Medical Director, CWMP, at (231) 935-0714.

## First Steps

It has been said that a journey of a thousand miles begins with a single step. In the case of weight-loss surgery at Munson Medical Center, that step is attendance at a two-hour educational seminar that is offered once a month and usually attracts between 30 and 50 potential weight-loss surgery candidates.

Mary Kay Williams, MSN, FNP-C, coordinates the bariatric surgery program at Munson and leads the seminar. She said, “Patients must attend the seminar before they can make an appointment with their surgeon. The seminar is an important opportunity to teach patients not only about the surgery, but also about the lifelong commitment they must make to behavior modifications, including proper nutrition, exercise, smoking cessation, and many others.”

Patients are encouraged to bring a family member or other support person to the seminar. The profound changes patients must make to ensure sustained weight loss can affect the whole family, and the family must understand and embrace the changes.

Each seminar includes a PowerPoint presentation, a discussion of lifestyle changes, a presentation from a weight-loss surgery patient, and a review of how to initiate a weight-loss surgery referral. Patients must provide a physician’s referral as well as a record of participation in a medically-supervised weight-loss program.

Patients in the Traverse City area can participate in Munson’s Comprehensive Weight Management Program to satisfy this requirement (see article, *Medically Supervised Weight-Loss Program Is Often First Step*). Williams will work with primary care physicians of patients who live at a great distance to help them design supervised weight-loss programs for their patients considering bariatric surgery.

Maintaining weight loss is as challenging as losing weight in the first place. Williams calls the first year after the surgery the “honeymoon period.” During this period, patients are encouraged by their weight loss and their resolve is reinforced by their success. At about twelve to eighteen months, as weight loss tapers off, the prospect of maintaining the new behaviors may appear daunting.

*“Modern bariatric surgery is very successful, but poor lifestyle choices can make it fail. Our goal is to support patients in making a lifetime of good choices.”*

— Mary Kay Williams, MSN, FNP-C  
Munson Bariatric Surgery  
Program Coordinator



Mary Kay Williams, MSN, FNP-C, with Angie Glazier, Munson’s first bariatric patient.

To combat the post-honeymoon letdown, patients are encouraged to participate in Munson’s monthly support groups after their surgery to help them maintain their focus and commitment. Each meeting includes a professional speaker as well as time for patients to interact and share their experiences. Meetings are videotaped for patients who cannot attend, and patients have access to a secure web site where they can share frustrations, successes, and helpful tips. In addition, Williams and her assistant Angie Glazier – who was Munson’s first bariatric surgery patient and who has herself lost 130 pounds – are always available to patients who need support and encouragement.

Williams concluded, “Modern bariatric surgery is very successful, but poor lifestyle choices can make it fail. Our goal is to support patients in making a lifetime of good choices.”

To register for the seminar, your patients should contact Angie Glazier at Grand Traverse Surgery at (231) 935-8900.

# Physician Opportunities

## Physician Opportunities with Munson Healthcare and Affiliates

A nationally-recognized system of six hospitals with more than 447 physicians, Munson Healthcare and its affiliated hospitals form a nonprofit system offering services to people from 24 counties.

If you have a colleague interested in relocating to northern Michigan, contact David McGreaham, MD, Munson Medical Center VPMA, at **(231) 935-6156** or [dmcgreaham@mhc.net](mailto:dmcgreaham@mhc.net). Visit [www.munsonhealthcare.org](http://www.munsonhealthcare.org) for more information on opportunities at Munson Healthcare or contact Deborah Glicker at **(231) 935-5890** or Joan Alt at **(231) 935-5889**.

## Additional Opportunities in Northern Michigan

Primary and specialty care opportunities at Alpena Regional Medical Center include: Cardiology, Dermatology, Emergency Medicine, Otolaryngology, Gastroenterology, Med/Peds, Orthopaedics, Psychiatry, and Sleep Medicine. For more information, visit [www.agh.org](http://www.agh.org) or contact Diane Sims at **(989) 356-7540**.

For information on primary and specialty care opportunities at Otsego Memorial Hospital in Gaylord, visit [www.otsegomemorialhospital.org](http://www.otsegomemorialhospital.org) or contact Skip Kasprzak at **(989) 731-7707**.

For information on primary and specialty care opportunities at War Memorial Hospital in Sault Ste. Marie including Cardiology, visit [www.warmemorialhospital.org](http://www.warmemorialhospital.org) or contact Henry Oklat at **(906) 635-7899**.

Specialty	Affiliate	Location
Dermatology	Munson Medical Center	Traverse City
Endocrinology	Munson Medical Center	Traverse City
Family Practice	Kalkaska Memorial Health Center	Kalkaska
Gastroenterology	Munson Medical Center	Traverse City
Gastroenterology	Munson Medical Center	Traverse City
General/Breast Surgery	Munson Medical Center	Traverse City
Hospitalist	Mercy Hospital Grayling	Grayling
Hospitalist	Mercy Hospital Cadillac	Cadillac
Infectious Disease	Mercy Hospital Cadillac	Cadillac
Internal Medicine	Mercy Hospital Cadillac	Cadillac
Internal Medicine	Munson Medical Center	Traverse City
OB/GYN	Mercy Hospital Cadillac	Cadillac
Orthopedic Surgery	West Shore Medical Center	Manistee
Orthopedic Surgery	Mercy Hospital Grayling	Grayling
Orthopedic Surgery	Munson Medical Center	Traverse City
Orthopedic Surgery	Mercy Hospital Cadillac	Cadillac
Otolaryngology	Munson Medical Center	Traverse City
Physical Medicine & Rehabilitation	Munson Medical Center	Traverse City
Psychiatry - Adult	Munson Medical Center	Traverse City
Rheumatology	Munson Medical Center	Traverse City
Rheumatology	Mercy Hospital Cadillac	Cadillac

### Munson Medical Center CME

Munson Medical Center provides a wide variety of CME opportunities, including several program series that are available via the REMEC TeleHealth Network, MMC's interactive video conferencing system.

For more information on CME opportunities offered through Munson Medical Center, visit [munsonhealthcare.org](http://munsonhealthcare.org) or contact Sandy Somers, RN, at **(231) 935-6546** or [ssomers@mhc.net](mailto:ssomers@mhc.net).

### Munson Healthcare

Munson Medical Center  
Munson Home Health  
North Flight  
Paul Oliver Memorial Hospital

### Affiliated Hospitals

Kalkaska Memorial Health Center  
Mercy Hospital Cadillac  
Mercy Hospital Grayling  
West Shore Medical Center