

Chance to take control

Surgery is a radical way to lose weight, writes Jane Fynes-Clinton

TO THOUSANDS of Queenslanders fighting the war on weight, resorting to surgical intervention may seem like an extreme measure. But to a person who has tried every diet going, has health problems as a result of obesity and whose quality of life is severely compromised, deciding to have surgery can be a decision to stay alive.

Specialist surgeon Dr Douglas Nicholson, of the Sunnybank Obesity Centre, says diabetes, sleep apnoea, gallstones, high blood pressure and joint problems are just some of the conditions from which obese people suffer.

"Many of the people I see here are in the process of dying, and sooner rather than later," he says. "Adding to their clinical problems, many have dreadful psycho-social problems because if there is one group in society that is stigmatised, it is obese people. In many ways obese people simply do not fit in. One of the patients I banded was a man who worked for the railways and weighed 200kg on the railway scale. It was the only place he could weigh himself. He always elected to have jobs where he worked alone. After I banded him, he lost in excess of 90kg and is now in charge of 70 to 80 people."

Nicholson says surgery is the only weight-loss procedure that guarantees people they'll lose weight. The patients he sees come on a GP's referral.

The procedure Nicholson conducts is called lap banding. An adjustable rubber band is placed around the upper part of the stomach laproscopically, dividing it into two parts. This means the upper stomach can hold only a small amount of food and the patient will feel full for longer.

The diameter of the band can be varied. The inner part of it contains a balloon that is connected by tubing to a reservoir that is placed under the skin during surgery. The surgeon can make the band larger or smaller by adding or subtracting liquid.

"The procedure is far less invasive than the cutting and stapling method called a gastroplasty that used to be most commonly practised," Nicholson says.

He says that as a result of lap banding, most patients lose about half to two-thirds of their excessive weight.

The downside of the surgery meant patients never feel ravenous again, can not eat certain food types and vomit if they eat too much or food that is too lumpy.

"It does not do all the work for them and I have certainly had some patients who still make poor food choices," he says.

"But at least it gives morbidly obese people a fighting chance at staying alive and having some sort of quality of life."



KYM Lewis . . . surgery has given her a new chance at life.

WHEN Kym Lewis, 44, of Chuwar, could no longer weigh herself on conventional scales, she knew she was in serious trouble.

"I honestly could not tell you how heavy I was because regular scales stop at 180kg. But I know I was heavier than that," she says.

Nine years ago, Lewis underwent the first of two operations to control her weight.

Lewis comes from a family of big people and says she was always overweight.

"I went to Weight Watchers while I was still in primary school," she says. "In the years after that I tried it all — Gloria Marshall, Jenny Craig, you name it. Every single time I would gain back the weight I initially lost and then some more as well."

Lewis's first surgery was gastric stapling in 1995. She lost more than

60kg in 18 months but found that even after the surgery site had healed, she could consume nothing but liquids. When her weight fell to 60kg Lewis, who is 175cm tall, realised she had to do something to improve her health.

"I was vomiting all the time but to be honest, I didn't care and I didn't care that I couldn't eat," Lewis says. "But it was obviously not good for me, so I had a partial reversal in 1997 and my weight went up to 105kg."

Dr Douglas Nicholson performed a lap banding operation on Lewis in 1999 and she says she has not looked back.

"Getting lap banding was no quick fix, but it certainly helps," Lewis says. "I am responsible for myself — it's not a cure-all, but it has given me a chance at a life I had never had."

After Medicare and private health insurance rebates, patients who undergo lap banding are \$2000-\$3000 out of pocket. They must continue to visit their specialist at least yearly to monitor their weight loss and health.

As a result of surgical lap banding patients:

- Must commit to an exercise program.
- Must chew each mouthful and eat slowly.

- Must be committed to weight loss and better health.
- Will eat smaller meals.
- Must have the support of someone who will scold and support them.
- Must not drink with meals.
- Will consume only fluids and sloppy food for up to 10 weeks after surgery.