

AN UPDATE OF NEWS AND SUPPORT FOR PROGRAM PARTICIPANTS

## Living Life to the Fullest

By Johana Roman

I began my struggle with obesity at the age of twenty, attempting to lose weight with everything from pills to shakes to crazy diets. I would lose 10 pounds only to put 20 back on. I had only been married for 3 months at the age of 18 when the physical and verbal abuse began. In my culture, divorce was not an option, so I endured. At age 20, I had my first child, a daughter. During my pregnancy, my weight ballooned from 130 pounds to a whopping 275 pounds. With the change in my physical appearance, my husband became even more abusive. This conflict eventually resulted in a terrible divorce in January of 1994. I was barely 21, left with the feeling that my life was in shambles. The only things that remained were food, tears and more weight gain.

Despite the fact that I was living a miserable existence, over the next two years, I somehow managed to find spiritual solace through church, and the cultivation of new friendships. As time passed, I found the will to work on my personal life, and miraculously brought my weight down to 180 pounds. I suppose it was my determination to extinguish any memories of my abusive husband that I was able to accomplish this.

I remarried in December of 1995, and became pregnant, once again, with my second daughter in 1997. I started to gain back all the weight that I had so valiantly struggled to lose. In 2001 my

husband was sent to South America on missionary work. Of course, the two kids and I went along. We were so happy to be helping all these people. At the time, however, I was having a personal problem; Moving to another country, and adjusting to a totally new culture was very stressful for me. I dealt with it by taking refuge in food (again); I continued to gain weight, and it was becoming harder and harder to find clothes that fit.

By the age of 32, I weighed 298 pounds; it was impossible for me to find anything to wear. You can imagine how frustrating and completely depressing that was for me. Fortunately, I had some friends in the states that were kind enough to buy clothes and ship them to me in Ecuador.

In 2003, we returned to the states because I was pregnant. This pregnancy was full of complications and I was placed on bed rest. After seven months, we welcomed our premature baby boy into the family.

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Johana, above, before her surgery.  
Left: Johana 10 months later and 119 pounds lighter!

# Tips for Dining Out

By Kim Lynn, RD, LD



2



Gone are the days when dining out was a very special occasion that involved dressing up, eating a 3-course meal complete with dessert and having a grand time (because it was done infrequently). With today's busy schedules and hectic lifestyles, dining out has become an everyday occurrence. The choices are numerous: fine restaurants, family-style establishments and fast food drive-thrus. According to statistics from *Restaurants USA* magazine, Americans dine out an average of 4.2 times per week.

Dining out after weight loss surgery can be tricky – even risky. Most menu items at restaurants and fast food establishments are high in calories, fat and sodium; not to mention the huge portions that are typically two to three times more than anyone should eat at one time. So, how do you deal with this post-surgical challenge when it does arise? Where do you go? What types of food would be acceptable? The following tips can be helpful. For these reasons, you will want to make choices that comply with your healthy post-op guidelines.

Bear in mind that in the early months after surgery, you must act with caution, and take the time to get acquainted with your “new” stomach. During this period, dining out can be particularly challenging. It may be best to forgo eating out until you know what solid foods you are able to tolerate, and to understand your food intolerances, as well. Clearly, a restaurant is not the best place to try new foods.

Once you are mentally prepared, you can experience healthy, enjoyable, dining. Planning ahead will insure that you handle menu decisions wisely:

7

For side dishes, substitute vegetables in place of potatoes or rice. Most restaurants offer some type of steamed vegetable as a choice. Be mindful to eat the meat first and then the vegetables. This will provide protein, while preventing you from filling up on the veggies.

8

Omit high calorie toppings: sour cream, mayonnaise or tartar sauce. Instead, for added flavor, try using mustard, tomato sauce, salsa and vinegars. These options are lower in fat and calories.

11

Don't waste calories on drinks; unless you are having a protein shake, beverages should be limited to 10 calories or less. Water or unsweetened tea is the preferred beverage for post-bariatric patients. Crystal Lite can be used to “punch-up” your water.

1

Look up menus – Most eating establishments post their menus online; glance at them for nutritional information before you arrive. Be mindful of the portion size. There are several websites that have compiled information from numerous restaurants and fast food eateries. These sites have also accumulated data that compares various establishments. This information can be very helpful to you in selecting a place to dine: [www.menupages.com](http://www.menupages.com), [www.healthydiningfinder.com](http://www.healthydiningfinder.com), and [www.dietfacts.com](http://www.dietfacts.com)

2

Don't be afraid to ask how a menu item is prepared. Broiled fish, for example, would be preferable to fried fish, or one that is prepared in a butter sauce. If you do not choose to eliminate sauces, gravies and dressings, at least request them to be placed on the side. A good alternative to salad dressing is to take along a low-calorie spray.

3

For portion control, order an appropriate appetizer as your entrée, make your selection from the children's or senior citizen's menus, or simply share a menu item with a friend or family member.

5

Opt for low fat protein choices: fish, seafood, skinless chicken breast, turkey burgers, beef sirloin and pork.

4

Avoid ordering anything that is fried or prepared with a heavy cream sauce or gravy. Beware of cooking terms such as “cream of”, breaded, alfredo, battered, sautéed and parmigiana. Instead, opt for healthier preparation techniques including au jus, steamed, poached, lightly sautéed, grilled and roasted.

6

Salads may seem like the perfect option – but be careful! Make sure they contain grilled or roasted meats and dark colorful greens. Limit add-ons: cheese, bacon bits, croutons, and of course, thick salad dressings.

9

Don't over indulge in nutrient-poor food choices: bread, buns or rolls. Have fajitas, burritos, tacos prepared “al fresco” style [minus the tortilla], or simply remove the contents from the inside and leave the tortilla. Likewise, remove the bun from your burger.

10

Mayonnaise-based dishes and other “creamy” style salads: potato salad, macaroni salad, cole slaw, etc, should be eaten sparingly. A better choice would be a salad of dark greens with low-fat dressing on the side.

12

Before your meal is delivered, ask for a to-go box, and put 2/3 to 3/4 of it away before you even begin eating. Hopefully, out of site will be out of mind. More importantly, this exercise will help you avoid the pitfall of continuing to nibble while enjoying the dining experience.



When dining out, food choices are only half of the struggle. To avoid problems, you will need to use appropriate eating techniques when dining out:

2

To help you slow down and take small bites, use a smaller fork or spoon.

3

Make sure to select foods that are moist enough to go down easily. Using the lower fat options mentioned in # 6 above can help moisten foods without the additional fat and calories.

4

Be careful with dessert. It is best to avoid them, especially during the early post-op months. If you are trying something new, be sure to share and take only a bite or two. Fresh fruits or sorbets are lower calorie options. Flavored tea or decaffeinated coffee is a good alternative to rich desserts.



Pacing yourself will also enable you to enjoy others with whom you dine:

2

Chew your food well. This will give you the chance to be a great listener!

1

To control your pace, set your utensil down between bites. Let every bite settle before taking the next one. This will give you an opportunity to talk to others in your dining party.



Now, what about fast foods establishments? There may be times when they are unavoidable. Men's Health has identified and evaluated chains that offer healthier selections. Some of them even offer sandwiches wrapped in lettuce leaves instead of bread. Check out Eat This, Not That online for evaluations of best and worst options:

If you must eat fast food, be sure to follow the above guidelines. When ordering your food, don't be shy; always ask about your options.

While dining out after weight loss surgery can be challenging, with some planning, there is no reason that it cannot be included in your new lifestyle. If you are mentally prepared, practice moderation and proceed with caution, you should experience enjoyable, healthy dining. Enjoy!

Chick-Fil-A 1  
Subway 2  
Boston Market 3

4 McDonald's  
5 Taco Bell  
6 Wendy's

*I would add KFC to this list, as well.*

## Join Us for Some Tasty Topics

Hear the buzz? "I love learning new tips for meal preparation for the family." "...like trying new products." "I never believed that there would be such a wide variety of food and that it would taste this good!" "I love the easy recipes." "I just love it – period!"

These are just some of the comments that we hear from those who have joined us for the monthly Tasty Topics activity that was started in early April. NeWeigh formed this group so that we could devote one evening per month to introduce our post-operative participants to bariatric-friendly foods, recipes and fresh ideas for healthy eating. In addition to having a great evening, you will take away with you some very valuable tips and tricks for meal planning.

Food connoisseurs know that it is one thing to read a recipe, and quite another to actually take in the aroma and taste the results of carefully combined ingredients. And, patients from one to five years post-op are benefiting from these delicious offerings. Tasty Topics serves up proof that healthy eating need not be bland or unappetizing.

Note: If you are new to the Program, be assured that we have provisions for those who are still following a liquid or soft-solid diet.

NeWeigh is pleased that you are enjoying this activity. We look forward to having you join us again in the weeks ahead. Kim Lynn, RD, LD, Cindy Waters, RN, and Kathryn Blanchard, LCSW will be on hand, as usual, for some one-on-one face time.

### Don't miss these upcoming Tasty Topics!

Tasty Topic	The Woodlands	Stadium Drive
<b>Everything You Wanted to Know:</b> About Protein but Were Afraid To Ask	Wednesday Oct 7, 2009 6:15 - 8:15pm	Thursday Oct 1, 2009 6:15 - 8:15pm
<b>Beating the Snack Attack:</b> Strategies for outwitting the munchies	Wednesday Nov 4, 2009 6:15 - 8:15pm	Thursday Nov 5, 2009 6:15 - 8:15pm
<b>Holiday Survival Guide:</b> Being festive without being fed up	Wednesday Dec 2, 2009 6:15 - 8:15pm	Thursday Dec 3, 2009 6:15 - 8:15pm

*To good health!*

# Better than LATE NEVER

By: Cindy Waters, RN



4

Risks vs. benefits – sounds cold and clinical, but it is the basis for many decisions that we are required to make during the course of our lives.

It is the same for me, personally; professionally, however, I encounter the process much more than the average person.

While working in healthcare over the last thirty years, I have had to consider these issues on a daily basis for patients left in my charge.

You see, I am a nurse who has been closely associated with bariatrics since 1997. I have worked daily with a health-



125 pounds later, Cindy is glad she finally started her weight loss journey.

care team and have seen, first hand how my patients have benefited from their weight loss surgery.

During this time, I was morbidly obese, as well; at my heaviest, I weighed 270 lbs with a BMI of 47. It was not until March of 2008 (more than ten years later) that I also underwent weight loss surgery. So, why didn't I do it sooner?

It was not for lack of motivation. I had watched my Aunt suffer with the same health issues and ultimately lose her life to chronic pneumonia at the age of forty-nine. When I first started working with bariatric patients, I considered the surgical option for myself in order to avoid my aunt's fate. Due to my blood clotting issues, however, I was told that the operation would be risky, which evoked real trepidation.

As the years passed, I began developing other weight related health problems: anemia, gallstones, Hiatal hernia, chronic pneumonia and adult onset asthma. It was apparent to me that my excessive weight was adversely affecting my health. In addition, I had little to no energy, my body ached all of the time, and I would awake several times during the night with acid reflux.

In 2008, a surgeon with whom I had worked closely approached me while we were in the break room at the hospital. He told me that he had some serious concerns about my health. Knowing that I had spent the previous two years with numerous bouts of gallbladder attacks and pneumonia, he believed that the time had come where the benefits of surgery outweighed the risks. After careful consideration, I decided to proceed.

In the eighteen months since my procedure, I have lost 158 lbs and my BMI is now 19. I am happy to report that surgery has ameliorated my health issues. My Hematologist offers no explanation as to how or why I no longer suffer with blood clotting and anemia issues. My Hiatal hernia was repaired, and my gallbladder was removed at the time of surgery, resolving my chronic pneumonia and asthma attacks, as well as ending the problems that I had with my gallbladder.

Undergoing the gastric bypass has changed my life in very positive ways. I can now walk a mile without getting tired, shop till everyone else drops, ride roller coasters and sleep peacefully through the night. Most importantly, I am able to run and play with my three-year-old grandson without stopping to catch my breath!

My surgical procedure extends beyond the physical; it has helped me professionally, as well. I am now able to relate to the patients on a level I never could before, helping them understand what to expect before and after surgery. Additionally, I am able to serve as a resource for the healthcare team.

Looking back, I can relate to the fears that cause people to delay seeking surgical intervention as a treatment for morbid obesity. As a healthcare professional, I know that timing can be everything – I just wish that the timing for me had been years earlier.



Keep in touch! We love to hear from you!

# Announcements...

In Loving Memory:



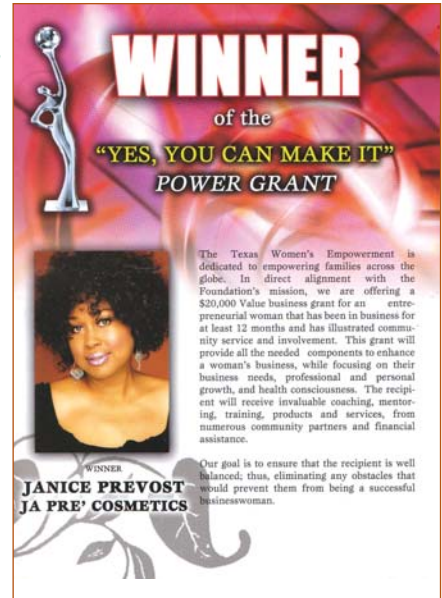
It is with great sorrow that we inform you that our beloved little sister, Rhonda Kaye Rodgers-Sutton, passed away on July 12th. Kaye is survived by her husband, Alfred H.

Sutton, III, daughters Racheal and Miranda Lambright, parents James and Ellen Marie Rodgers, sisters Sara Broussard and Jamie Rodgers, and brother Jon Rodgers.

Kaye started the first support group at NeWeigh, and had remained a strong supporter of our bariatric program. She was an inspirational, upbeat person who will be dearly missed by all.

Congratulations:

On August 30, we learned that Little Sister, Janice Prevost, received a \$20,000 business grant from the Texas Women's Empowerment Foundation. Awarded annually to provide invaluable coaching, mentoring, training, products and services from numerous community partners, the grant was designed to enhance a woman's business while focusing on her personal growth. Janice is a deserving recipient, and we all wish her continued success.



Tell us what you think – Topic: Healthcare Reform  
Email your comments to: [info@neweighweb.com](mailto:info@neweighweb.com)

## New Additions!

By: Cindy Waters, RN

In addition to its regularly scheduled aftercare meetings, NeWeigh will start a support group for Laparoscopic Adjustable Banding Program Participants. Beginning the third Thursday in November, and every third Thursday of the month thereafter, the LapBand Group will meet at NeWeigh's North Stadium location at 6:15 pm

[exa: November 19<sup>th</sup>, December 17<sup>th</sup> and January 21<sup>st</sup>].

In January, we will ring in the New Year with another unique group: "2010 Back on Track." The purpose of this group is to work on ways to shed the unwelcome pounds that you may have put on in the preceding year(s). "2010 Back on Track" will meet on January 28<sup>th</sup> at NeWeigh's North Stadium location, 6:15 pm, and on the last Thursday of each month, thereafter.

Start the New Year off right! Put the journal section of your NeWeigh calendar to good use by recording your food, exercise and water intake. Be sure to bring this diary with you to the January 28<sup>th</sup> "2010 Back on Track"

session. To help you stay on track, be sure to mark your calendar with the February 26<sup>th</sup> meeting date. Make an effort to use the time between the first and second session to try a new exercise program.

I personally face the same challenges of staying on track that each of you face daily. My training in healthcare has taught me that long-term weight loss success is more likely to be achieved when we join with others who are working toward this common goal.

Please join me and your NeWeigh little sisters and brothers at one or all of these sessions. By uniting together, we can make our steps to wellness become easier.



# A Reason to Return to the Basics

By: Kathryn Blanchard, LCSW

6

According to the American Society for Metabolic and Bariatric surgery, an estimated six million people in the US are overweight. Of these, 80% are women of childbearing age. Statistics indicate that women are four times more likely to consider weight loss surgery as treatment for obesity, and a common concern for these individuals is the ability to bear children following a weight loss procedure. I personally had the same apprehension before undergoing gastric bypass.

I began investigating obesity surgery prior to my marriage; however, it was not until five months after marrying the love of my life that I underwent the RNY Gastric Bypass operation. Several people have asked me whether I ever regretted waiting until after the wedding to have the surgery. While part of me would rather not have over three hundred pictures of me in a size 28 wedding gown, I can truthfully say that I am not unhappy with the decision that I made. Actually, it was very gratifying to know that my husband to be loved me for [what he calls] my “inner beauty.” To this very

day, he still insists that at 310 pounds, I had “outer beauty,” too. In fact, it was his understanding nature that actually made it easier for me to deal with being overweight.

Like most other couples, somewhere between dating, the engagement and marriage, we broached the theoretical subject of children. We were in agreement that we wanted children; but, we did not want to start our family until I had at least finished graduate school, which was two years away.

With the wedding behind us, however, I started to contemplate obesity surgery, again. My motives for considering surgery, however, were now quite different. At 27 years of age, was I really prepared to wait more than 2 years to start a family? During my previous investigation into weight loss surgery, I recalled that bariatric surgeons recommend postponing pregnancy for 1-2 years following surgery. Looking ahead (and being the planner that I am), I came to the conclusion that if I were to move forward with surgery now, by the time that I finished the graduate program I would have gotten past the 12 month rapid weight loss period that follows surgery, and I would be well into the weight loss stabilization period. Thus, if we decided to get pregnant, the timing would be perfect!

I also rationalized that if I were to postpone this surgery until I finished graduate school, I would either have to delay starting a family for two more years, or if nature would cooperate, I could get pregnant without having weight loss surgery. The thought of adding pregnancy weight on top of my 310 pounds, however, was quite overwhelming. Naturally, under the circumstances and given a choice, I wanted to lose weight to avoid the complications that could (and often does) arise as the result of a morbidly obese pregnancy.

Having mulled over the situation, I decided to call NeWeigh and schedule an appointment. Once my surgeon confirmed that weight loss following surgery could actually improve the ability to conceive, as well as lessen the complications of pregnancy, there was no reason for delay. To coin the scout’s motto: “Always be prepared.”

I underwent surgery in 2000 and finished my graduate program in 2002. During this period of time, I had lost 140 pounds and I felt great. We considered having

Continued on next page: “Basics”




children at that time, but my husband was now in graduate school. So, once again, we decided to postpone starting a family until he received his degree.

Four years ago, as planned, my husband and I celebrated the arrival of our first child. I had a very ‘normal’ pregnancy, and within six weeks of giving birth I was down to my pre-pregnancy weight. We are expecting our second baby in February. Thus far, everything is going smoothly.

As with my previous pregnancy, my obstetrician recommended that I eat six small meals throughout the day (every 2 ½ to 3 hours), and drink plenty of liquid (64 ounces of water). He also told me to focus on protein, vegetables, fruits, and to adhere to a daily vitamin regimen. Sound familiar? These are the very same recommendations that are found in NeWeigh’s

“Basic Principles.” I have been following these principles for the last 9 years; therefore, it has been relatively easy for me to stick to the pregnancy-eating plan. Thus far, all of my pre-natal labs, ultrasounds and various tests look great. Clearly, the RNY has added no additional risks to my pregnancy.

Over the years, I have talked to many women who have become pregnant following weight loss surgery. It is important to note that dramatic weight loss can lead to a shift in hormones, which may increase your chances of conception. If you are of childbearing age, be sure to follow your doctor’s recommendations regarding the length of time you should wait before getting pregnant (or take extra precaution if you wish to avoid a pregnancy). As long as you adhere to the recommendations of your surgeon and obstetrician, you should experience a healthy, normal pregnancy. 

“Living Life”, Continued from Front Cover

Afterwards, I started having other health problems. I had to have surgery on my left knee because of the weight, followed by two herniated disks. Due to excruciating back pain, I was placed on bed rest, again. This was the beginning of other weight-related illnesses that I would eventually be diagnosed with. It was a year before I was able to return to South America.

Over the next three years, my husband suffered with blood clots (due to the altitude) and almost lost his legs. After living in South America for six years, his health problems forced us to return to the States. I came back, unaware that I was about to receive a fabulous welcome home present: NeWeigh.

The fateful incident that changed my life occurred in October of 2007. Because my husband was unable to work at that time, I had taken two jobs. At one of them, I was instructed to go draw blood from a patient at NeWeigh. I had never heard of this place before, so I asked my co-worker about the company. And I am so glad I did.


When I arrived at the NeWeigh office, I noticed that the patient I was called to see was wearing an I.D. from my

other job. After some small talk, and out of pure curiosity, I asked her if insurance had covered her surgery. As it happens, we both had the same plan, and she told me that insurance had covered her surgery, completely! I then asked her about the long abdominal incision that I had heard is required to perform this type of surgery. I was relieved to learn that the information that I had been given was WRONG. She sensed (and therefore suggested) that I would benefit from a call to the NeWeigh office. She assured me that NeWeigh would provide me with all the information that I would need, and answer any questions that I might have. I went back to the Lab with all these thoughts running through my head. I was excited. I thought, “Wow! I might be able to go through with this and get my life back on track, again.”

The very next day, I made the call that changed my life. I was so thrilled; I started telling everyone that I was going to have gastric-bypass surgery! I thought that people would be happy for me because my health would surely improve. To the contrary, many of my coworkers tried to discourage me. They said that having the surgery would be a huge mistake; that I might die in the process. I was told that it wasn’t worth it; that I was just lazy.

Invariably, I would show up at the NeWeigh support meetings in tears. I had not even had the surgery yet, and I was already having all this negativity thrown at me. My family and my brothers and sisters from NeWeigh are what kept me going. They encouraged me to ignore the negative comments, to pray for peace in my spirit, and to keep moving forward. And I did.

Now, eleven months later, I know that having the surgery was the best decision that I have ever made. I am happy, I am healthy, and I’ve gotten my life back on track. It’s a thrill to go to the park with my kids, to ride a bike, skate, and to play on the trampoline with them without worrying about the weight limit. After wearing a size 26, I especially take pleasure in shopping for a size 12. I am pleased that my husband enjoys seeing me wear high heels and sexy dresses. It’s amazing how young I look, feel and act. Now, I am truly living life to the fullest.

**Note:** Johana reports that she feels like she has lived her own fairy tale. On May 9, 2009, she looked like a real princess as one of the NeWeigh Spring Fling models. Jesus, Johana’s Prince Charming (husband) accompanied her to the event and shared her joy. 

# Looking for Help? You'll find it at **NeWeigh**<sup>®</sup>

## Houston Location Meetings

Pre-Surgical Preparatory Group meets Thursdays from 5:30 to 6:15 pm and every third Saturday from 10:30 to 11:15am.

General Support Group meets every third Saturday from 11:15 to 12 noon.

Basic Principles Group meets Wednesdays from 6:00 to 7:00pm.

\*Intermediate Support Group meets Thursdays from 6:15 to 7:15pm.

\*Advanced Support Group meets Thursdays from 7:15 to 8:15pm.

\*Tasty Topics gatherings are held the 1<sup>st</sup> Thursday of every month from 6:15 to 8:15pm for the Intermediate and Advanced Support Group.

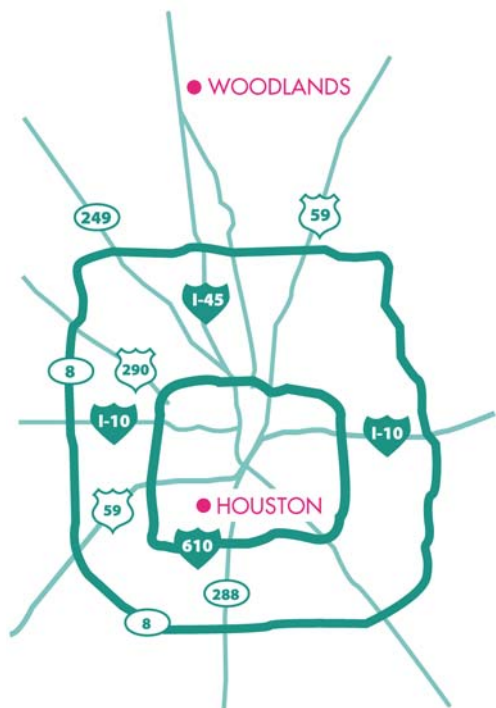
## Woodlands Location Meetings

Pre-Surgical Preparatory Group meets every other Wednesday from 5:30 to 6:15pm.

General Support Group meets every other Wednesday from 6:15 to 7:15pm.

Tasty Topics will be held on the 1<sup>st</sup> regularly scheduled meeting of each month. Please call at the beginning of each month for the schedule.

November and January each feature the premier of two new Support Groups: the *LapBand Group* and *2010 Back on Track*. See page 5: *New Additions* for details.



Two Convenient Locations



## Houston Location

8111 N. Stadium Dr. Ste. 200

Houston, TX 77054

Phone: 713.795.0200

Fax: 713.795.0300

## Woodlands Location

101 Vision Park Blvd. Ste. 200

Shenandoah, TX 77384

Phone: 936.271.2200

Fax: 936.271.2210

Toll Free: 1.877.266.0686

[www.NeWeighWeb.com](http://www.NeWeighWeb.com)