

# NeWeigh® News

www.NeWeighWeb.com

Spring, 2009

AN UPDATE OF NEWS AND SUPPORT FOR PROGRAM PARTICIPANTS



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Announcing a new support group for those of us who love food

## Join us <sup>at</sup> NeWeigh's Spring Fling

NeWeigh® has planned a very special mid-day event to welcome springtime, you and your guest. The activities begin with a pre-luncheon, professional photo shoot and registration for door prizes. In addition to a wonderful luncheon, you will enjoy an entertaining program:

- Fashions by Nordstrom - Models by NeWeigh
- Make-up tips and tricks presented by Janice Prevost, Founder of Ja Pre' Cosmetics
- Stress free dressing techniques presented by Helen Perry, Corporate and Personal Image Consultant/Humorist

Joey Boesch

Bayshore Medical Center

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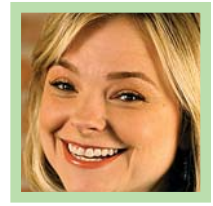
NORDSTROM



Juices by Ja Pre'

Helen Perry  
Corporate & Personal Image Consultant

# Psych Yourself



## up to Successful Weight Loss

by: Kathryn Blanchard, LCSW

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*In order to sustain long-term weight loss, we must change our behavior, and deal with the underlying issues that caused our weight gain in the first place.*

Many people have come to understand that the surgical weight loss journey is a long one; that surgery alone does not promise permanent results. As we make

the decision to undergo weight loss surgery, fight for insurance approval, and wait for our surgery date, we are reminded that, initially, we may lose weight rapidly, but the journey itself will have just begun. In order to sustain long-term weight loss, we must change our behavior, and deal with the underlying issues that caused our weight gain in the first

place. Even though we are constantly reminded of this, we do not always 'get it.'

I underwent the Roux-en-Y Gastric Bypass May 8, 2000, and began losing weight right away with no desire for sweets or large portions. I joked that perhaps my surgeon had surgically altered my brain, instead, and I even considered going vegetarian. I was confident that I had the "surgery is a tool thing" in the bag. I was wrong.

The first few weeks following surgery, I did not experience 'physical hunger', but I did have unusual food cravings. These included things like licking a frito and chewing a piece of food and spitting it in the trash. Now clearly, these are not cravings that are the result of

physical hunger because all of one's physical needs are met through protein supplements during the liquid stage. They are the result of head hunger; a mental or emotional desire to experience a particular taste at a particular time. Many times we experience these cravings when we are stressed, lonely, worried or tired. I believe the liquid phase can be instrumental in helping us identify our head hunger triggers.

Around my first anniversary, I began to realize that I was capable of eating larger portions than I should be eating. Too, I had never been a sweet eater, but I now craved them. As time has passed, my cravings have become more of an issue that I continue to deal with on a daily basis. I guess my surgeon had not done brain surgery after all. If this should happen to you, find another outlet for these emotions that does not involve money, drugs, alcohol or food. Many people have replaced emotional eating with much healthier habits: exercise, reading, socializing and hobbies such as photography or scrap booking.

Attending the NeWeigh support group is a way to come to grips with the issues we have with food and our bodies. Sometimes we find that our issues are deeply rooted, and decide that it is best to seek some individual counseling. Pursuing support is not a weakness. To the contrary, getting support helps to ensure success. Anyone could successfully argue that it is important to use all of the 'tools' available to us on this journey.



# Opportunity Lost Opportunity Found

By Janice Prevost

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Janice Prevost before her roux-en-y. Full of spirit, but unaware of the additional health issues she was about to face.

*I came to NeWeigh in the fall of 2006 after hearing an announcement about the NeWeigh Program on 92.1 FM, Houston's Inspiration Station. I immediately understood the message; this was a surgical weight loss program for the morbidly obese. I certainly fit the definition of morbid obesity, but I had never had any type of surgery, much less spent even one night in a hospital. So, although I needed to lose weight, the thought of having surgery in order to do it was way too frightening for me.*

*There were, however, two things in particular that grabbed my attention and stuck in my mind for days after hearing the ad. The first was the calm voice of the person who made the announcement. The second was how the announcer referred to the female weight loss patients that had gone through the NeWeigh Program. She said, "...at NeWeigh, we call them 'little sisters' because we can't call them big anymore." I kept thinking, "I have two older sisters, not two big sisters. I am the baby sister, but I have never been the 'little sister'!" Despite my fear of surgery, the possibility of being called a 'little sister' kept crossing my mind.*

*Then, two important events took place that compelled me to consider the surgical option. The first was a call from a production company that had been referred to me by one of my other clients. This company needed a makeup artist to fill a job assignment for the very high profile actor, Denzel Washington. Naturally, I was elated over the prospect. At my weight, though, even less physically demanding jobs were causing me some difficulty. I was greatly concerned that I lacked the stamina to handle the task. My*

*appearance bothered me, too. I feared that my looks would present a negative first impression. Filming was not scheduled to commence for another six months. Surely I could lose weight and get into shape by then.*

*I wasn't at all prepared for the second event. Out of the clear blue, I began experiencing some blurred vision, but I dismissed it as aging eyes. After all, the timing was right. This sort of thing happens to folks in their early 40's. Then I had an episode of dizziness, nausea and fainting. I went to the emergency room and discovered that my blood pressure was 200/180. The attending physician diagnosed my hypertension, and the*



*medication took 6 hours to stabilize me. Before I was released, the doctor gave me a stern warning: "If you do not lose weight, you will have to be on high blood pressure medication for the rest of your life."*

*Although I had a long history of being overweight, prior to this incident, I had never been sick; I never had any reason to take medications. Until now, the only thing that I felt was wrong with me was the usual aches and pains one gets from carrying around excessive weight. If my weight is now at the point that it is affecting my health, I need to do something about it; perhaps it is time to explore my options.*

*While pondering this recent ordeal, the calmly spoken words, "...we call them 'little sisters' because we can't call them big anymore," kept creeping into my mind. So, I placed a call to NeWeigh. Amazingly, I felt comfortable from the first hello. From the moment that I opened the door and entered the NeWeigh office, I noticed the elegant and welcoming environment. It was unlike any of the other weight loss clinics that I had been to in the past. Talk about first impressions!*

*During my initial visit, Diane Crumley, the founder of NeWeigh came into the room. Once she began to speak, I recognized that familiar calm voice, so I asked, "The voice on the radio - that's you?" I wondered if she had weight loss surgery; what made her so passionate about helping the morbidly obese. I asked and she answered. What a story!*

*Before I had even seen the surgeon, I learned that there were a number of steps that had to be completed before undergoing weight loss surgery. With so many moving parts, I was grateful to NeWeigh for developing a comprehensive program to help me get through the process. I was pleased with the plan of action and role that NeWeigh, the surgeon and I would perform during my weight loss journey.*

*Following the consultation and physical examination, the surgeon explained that for safety concerns, all prospective surgical*

Continued on Page 7: "Opportunity"

# Aftercare Update

By: Kim Lynn, RD, LD

Confused about which vitamins to take, when to take them and for how long? Hopefully, the following information will provide some clarification of this component of the aftercare regimen.

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Weight loss surgery (WLS) restricts food intake, and can have a huge impact on daily nutritional needs, depending upon the type of surgery and the extent to which nutrient supplementation is required. The Lap band and gastric sleeve are considered restrictive procedures, and sufficient quantities of food cannot be taken in to completely meet daily needs. With the gastric bypass or the bilopancreatic diversion with duodenal switch, the ability to digest and absorb nutrients is decreased as well. This is why NeWeigh

affiliated surgeons instruct all patients to take multivitamins, plus additional supplements. Failure to comply with the required supplement regimen can result in nutrient deficiencies that can lead to serious health problems and malnutrition. The following post-operative, nutritional information is provided by the NeWeigh Program, and is based upon the most up-to-date, professional research information and evidence-based bariatric standards of practice.

## Multivitamins

A complete multivitamin/mineral supplement in a chewable or liquid form is recommended for the immediate post-op period. Complete means that it contains 100% of the Daily Value (DV) for all of the essential vitamins and minerals, including iron. Your body will better absorb smaller amounts spread throughout the day, so it is important to take a multivitamin at two different times of the day. Stomach distress can sometimes occur when taking them on an empty stomach, so plan to take them with a meal or snack.

Numerous options are available in terms of vitamin brands. Many patients begin with Flintstones Complete®, Centrum Chewables® or Centrum Liquid®. These are easily broken down and absorbed by the body. Plus, they are generally pleasant tasting, easy to find and inexpensive. Your surgeon will advise you as to the appropriate time for taking pill forms of vitamins and the need for any change in multivitamin regimen.



## Calcium

A deficiency of calcium can lead to bone loss resulting in osteoporosis. A common misconception is that men do not need to supplement calcium. This is definitely not the case following gastric bypass surgery. Remember – it is the change in the absorption of this essential nutrient that causes the need for supplementation.

The daily requirements for calcium are as follows: Men and pre-menopausal women, 1000-1200 mg per day; Post-menopausal women, 1500 mg per day.

Since calcium absorption is diminished due to changes in the intestinal tract following surgery, calcium *citrate* (not carbonate) in the chewable or liquid form should be taken for maximum absorption. Calcium citrate may require a little effort to locate, but will be well worth it. Since calcium is important for other reasons, such as heart and nerve function, muscle contraction, blood clotting, and possibly reducing the risk for certain cancers, getting an adequate amount is vital.

There are several products that will provide this form of calcium: Bluebonnet Liquid®, Tropical Oasis Liquid® and Bariatric Advantage Chewable Bites®, to name a few. These should be taken 2-3 times per day in divided doses. Restrict dosage to 500-600 mg since the body will be unable to absorb more than this at one time; intake should also be separated from the multivitamin and iron supplements by at least two hours. Liquid calcium supplements require refrigeration upon being opened, so plan accordingly.

**\*Note – Lap Band patients may use any chewable or liquid calcium supplement.**



As you can see, all forms of WLS will affect the intake and/or absorption of nutrients that are essential for maintaining good health. The supplements recommended above are general guidelines given to all WLS patients going through the NeWeigh program. It is important to remember that each person is an individual and may have needs above and beyond these general recommendations. Your surgeon will advise you concerning the proper protocol for you.

WLS  
supp  
100

### Vitamin D

Recent research studies have revealed that this nutrient is deficient in a large number of Americans; consequently, it is receiving a great deal of attention. Since Vitamin D is instrumental to the body's ability to use calcium and to support healthy bones, it is of particular concern following gastric bypass surgery. It is also essential for a healthy immune system, and may be a factor in preventing certain autoimmune diseases and cancers. It is vital that the calcium supplement also provide a substantial amount of Vitamin D. All of the calcium supplements mentioned in this newsletter contain it. However, the level of Vitamin D in the Bluebonnet Liquid® product is greater than the amount found in the other two products, and would represent the most advantageous product to meet these needs. It is available in small locally owned health food stores and several chains such as Nutrition Depot®, Peak Nutrition® and Whole Foods Market®.

Go to: [www.Bluebonnetnutrition.com](http://www.Bluebonnetnutrition.com) to find a store near you.

Because the sun provides another valuable source, Vitamin D is commonly referred to as the "Sunshine Vitamin". With the increase in skin cancers, exposure to the sun has declined in America, and is most likely a cause of the high number of deficiencies seen today. It only takes 10-20 minutes of sun exposure per day to achieve the amount needed to convert the substance in the skin to active Vitamin D in the human body. Take a 10-20 minute walk outside each day, and you can achieve two goals at once; get your exercise and your dose of Vitamin D!



### Vitamin B-12

Vitamin B-12 is important for maintaining healthy nerve and red blood cells; a deficiency can lead to a serious form of anemia. As with calcium, the absorption of Vitamin B-12 is impeded following gastric bypass surgery due to the changes in the digestive tract. B-12, therefore, must be taken in a form that directly enters the bloodstream. There are several ways to achieve this. One option is a monthly injection at a primary care physician's office. Some choose to give themselves injections. Another way is to take a sublingual supplement, usually a lozenge that dissolves under the tongue. General recommendations are to take a 500 mcg once a day or a 1000 mcg every other day. If it is easier to remember, take the 1000 mcg 3 times per week. The sublingual lozenges are available at many retail locations including Wal-Mart®, Target®, pharmacy chains or health food stores. There are also nasal sprays that require a prescription. Just remember that the form you choose must go directly into the bloodstream for absorption, *not* into the stomach.



### Other nutrients

It is possible that additional vitamin/mineral supplementation may be necessary. Lab tests will be performed and monitored by the surgeon so that nutrient levels can be monitored. For the Biliopancreatic Diversion with Duodenal Switch procedure, Vitamins A, D, E & K are fat-soluble, and may also need to be supplemented. The surgeon will advise you as to protocol following this surgery.



### Iron

You may have an increased need for iron following gastric bypass surgery. If so, your surgeon will give you directions as to any supplements needed and the amounts to be taken in order to maintain your health. If deemed necessary, Bariatric Advantage® has a chewable iron tablet that tastes good, and is in a form that is generally well tolerated. They can be ordered at:

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

\*Remember to take iron supplements at least 2 hours apart from calcium.



### Supplement Schedule

So, still overwhelmed by all of these choices and products? Still wondering how to fit these into your daily routine? The following schedule is one example of how to accomplish this balancing act. Your routine will be determined by the types of products you choose, and whether they will be taken at home or carried with you.

- Breakfast - Calcium
- Dinner - Multivitamin, Vitamin B-12
- Lunch - Multivitamin
- Bedtime - Calcium

# ... a Blessing from God

By Angela D. Williams

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A phone call to NeWeigh saved my life! I was literally at death's door. That was over two years ago, and I'm excited to be telling the world. Not that you haven't heard stories from others like me – this just happens to be mine.

I have suffered with excessive weight for over half of my adult life. My weight would go up and down, but mostly up. I would lose weight only to gain it back – and more. I tried and failed so many times that I finally gave up and stopped even trying. It's a wonder that I didn't die in the process.

I can still remember my first real diet when I was only 22 years old. I actually lost 20 pounds over a 4-month period. Good going, I said to myself. Sadly, after many attempts, it was nearly 20 years and an extra 100 pounds later, that just losing 10 pounds was a gigantic achievement. During this tumultuous period, my dependable crutch was cigarettes, and I managed to lean on it for about 15 years. I decided to quit only after it became very difficult for me just to breathe. After I stopped, though, I really gained the weight. I would eat everything in site, was out of control, and I knew that I had to find a way to end this pattern.

Much happened in between, however. I had to sit down in order to wash dishes, or to hold my newborn grandbaby because I couldn't stand. The center part of my lower back would hurt so badly that I would be in tears. I had to hold onto the rail to get up stairs into my apartment because of the intense pain in my knees. To make bad matters even worse, my clothes neither fit nor did they look good on me. I felt that I

had no choice, but to sit in my bedroom, and watch other people go about their daily lives.

I finally went to the doctor for a check up, and found out that I had a heart murmur; one side of my heart was larger than the other from carrying the excessive weight. I also discovered that I had high blood pressure, another weight-related condition. I was depressed and miserable, watching my life slip away right before my eyes. It was then, December 12, 2006, that I heard NeWeigh on the radio. I said to myself, "Enough is enough," and decided to make the call. I had actually considered this path before, but opted out because I was scared of the whole procedure. This time, I realized that my life depended on it.



Angela, 115 pounds later.

I'll never forget it! It was just a few days after Christmas of 2007 that I met with the folks at NeWeigh. They were great. They not only knew exactly what I was going through and how I was feeling, they made me feel good about my decision to move forward with the surgery. It was comforting to know that many of them had already been through the surgery. I now realize, however, how very lucky I was to have NeWeigh working on my behalf since they were able to secure my insurance approval within ninety days. I understand that this is not always the case.

On January 3<sup>rd</sup> (what a memory!), I met my surgeon. What a great doctor! He answered all my questions openly and honestly, and made certain that I was well informed about what I would be facing. A week before my surgery, I was diagnosed with diabetes, confirming that I was not doing this any too soon. On the day of my surgery I was so scared I wanted to tell them that I had changed my mind so that I would be sent home. I'm glad I didn't. Having the surgery was the best thing for me. I no longer have the health issues that I previously mentioned. I am more out going, my clothes look and feel better on me. I'm loving life again. Thank you NeWeigh. Most of all, I have to thank GOD, He brought me to you.



weight loss patients are required to undergo certain diagnostic testing. Some tests were necessary to satisfy insurance criteria; others were crucial to help expose any undiagnosed conditions. When I left the NeWeigh office that day, I had no idea that I would have another type of test – one that would challenge my physical, emotional and spiritual fortitude. Also, little did I know that this testing, in all likelihood, would save my life.

To meet my six-month, Denzel Washington related goal, I had to accomplish a great deal in a relatively short period of time, which meant that everything had to move along smoothly. For this to happen, I needed to do my part. The first thing that I did was get my testing scheduled. As requested, I furnished NeWeigh with the contact information of my other healthcare providers. As instructed, I started attending the mandatory, pre-surgical support group meetings. The process was in motion.

In early February, I received a call from NeWeigh with some good news; NeWeigh had been successful in getting my previous insurance denial for weight loss surgery overturned. Despite having insurance authorization, surgery could not be scheduled because there were still some outstanding test results and medical clearances.

The next call that I received from NeWeigh dealt an unexpected blow. The results of my abdominal ultrasound revealed a large mass on my ovaries. NeWeigh had me schedule an appointment with my gynecologist. The weight loss procedure would have to be postponed pending removal of the ovarian tumor.

The day that I went to the hospital to pre-op for the ovarian surgery I received another surprise call. This time, the call was from my ophthalmologist. I told him that I was at the hospital pre-oping for surgery. He said, “Your surgery needs to wait; come to my office right away.” When I arrived, I was immediately escorted into his office. “Janice, the source of your blurred vision is due to a brain tumor that is pressing on your optic nerve. I’m sending you to a neurologist to have the brain tumor removed, immediately. If you delay this surgery, you will suffer irreparable nerve damage and lose the sight in your left eye.” I could not believe my ears. Having to undergo these two unplanned surgeries meant there was no chance of taking the Denzel Washington assignment.

Following my recovery and release from both surgeries, I told my sister (in confidence) that I was ready to proceed with my weight loss procedure. I then called NeWeigh and asked what I would need to do to get on the surgery schedule. To my surprise, my prior authorization for surgery had lapsed. Once again, NeWeigh ran the gauntlet with the insurance company for me. After much ado, everything was back on track.

On the day of surgery, I called NeWeigh. “I’m sorry, but I have to cancel the procedure. My mother has become ill.” I did not elaborate further. In truth, my mother was sickened over the very thought of me having to undergo another surgery. She felt that if I wanted to lose weight badly enough, I could do it on my own. Perhaps she was right. So, once again, I started down the conventional

weight loss path. I had some initial success. As with all of my previous diet attempts, however, I lost the battle.

I began to think about all of the things that had happened over the past 18 months. Would these silent illnesses have remained undetected until it was too late if I had not gone to NeWeigh? While I was going through those trying times, didn’t the folks at NeWeigh keep checking on me? Hadn’t I come through the other surgeries just fine? What was I waiting for? None of my healthcare providers voiced any objections to obesity surgery. Each had issued a surgical clearance. I couldn’t come up with one good reason for abandoning what I had started out to accomplish 18 months earlier.

I can still recall the pride I felt at the prospect of being considered for the position of makeup artist for Denzel Washington. As foolish as it may sound, that feeling pales next to the pleasure I feel when someone refers to me as a ‘little sister’!

Ms. Prevost had a roux-en-y gastric bypass on June 11, 2008. She has regained her health and has the stamina to handle even the most taxing assignments. With renewed energy, she recently launched a new cosmetic line, Ja Pre’.

Her clients include: Farouk Shami, Founder of BioSilk Product; Cathy Hughes, CEO of TV1 and Radio 1 Broadcasting Network; Katie McCall of Channel 13; Sherry Williams, Anchor reporter for Channel 11; Mia Gradney, Anchor KIAH 39, and MAC Cosmetics. Her services have been engaged by local socialites; she has also been employed for TV Commercials: Reliant Energy, Tide Detergent, HCCTV, among others. Ms. Prevost also teaches courses at Leisure Learning Unlimited (“LLU”).

## Join Us for Some Tasty Topics

One of life’s greatest pleasures is FOOD. Food fuels our bodies; it brings us comfort; and we often use it when we socialize. The question is, can we still enjoy food following weight loss surgery? The answer is yes, and we’re here to show you how.

Beginning in April, NeWeigh will introduce Tasty Topics, relevant to all post-operative patients (whether one month or ten years post-op); that is why we are devoting one evening per month from the Intermediate and Advanced Support Group to this activity. This format will give program participants

some one-on-one time to visit with Kim Lynn, RD, LD, Cindy Waters, RN and Kathryn Blanchard, LCSW. These professionals are instrumental in guiding you to long-term weight loss success.

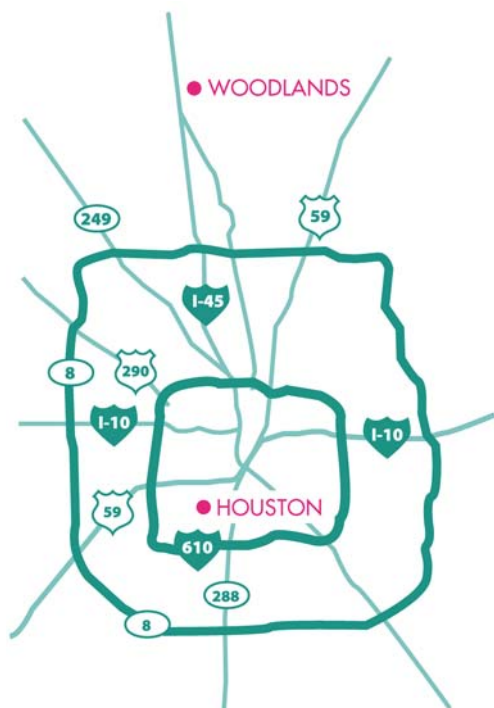
Among other things, there will be some bariatric friendly foods for you to taste in the NeWeigh break room. We want to share these recipes, fresh ideas for healthy eating and some tips and tricks for meal planning. Following the tasting, the group will return to the lobby and our multi-disciplinary team will discuss other various topics of interest.

To enjoy the full benefit of the evening, please be prompt.

We will begin with the following topics:

Topic	The Woodlands	Stadium Drive
<b>Supermarket Savvy</b> Tips for healthy shopping in a weak economy	Wednesday April 8, 2009 6:15 - 8:15pm	Thursday April 2, 2009 6:15 - 8:15pm
<b>Brown-bagging It</b> Suggestions for quick meals to pack from home	Wednesday May 6, 2009 6:15 - 8:15pm	Thursday May 7, 2009 6:15 - 8:15pm
<b>What to Pack for a Picnic</b> Ideas for nutritious choices for the Bar-B-Q season	Wednesday June 3, 2009 6:15 - 8:15pm	Thursday June 4, 2009 6:15 - 8:15pm

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



Two Convenient Locations

## Houston Location Meetings

Pre-Surgical Preparatory Group meet 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.



## 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)