

Treating Weight Regain

after Weight-Loss Surgery

By Lloyd Stegemann, MD

One of the greatest fears of patients seeking weight-loss surgery is the fear of weight regain. This is understandable considering that virtually every patient that has undergone weight-loss surgery has at some point been a “Yo-Yo Dieter” during their weight-loss journey.

It is not uncommon for a surgical candidate to relate stories of losing 10 pounds, 20 pounds, sometimes even 50-100 pounds with dieting attempts, only to see it return over time.

The good news is that with weight-loss surgery, the weight-loss seen post-operatively can maintain throughout a long period of time. However, it is important that patients keep in mind that obesity is a chronic disease that is not cured by surgery. Surgery provides a powerful tool for significant weight-loss, but without proper care “the tool” can lose its effectiveness, leading to weight regain.

There are several causes of weight regain after weight-loss surgery, most of which if addressed properly, results in a loss of the gained weight and resumption of weight maintenance. In this article, I would like to share with you my thought process in dealing with the patient who experiences weight regain.

Keys to Prevention of Weight Regain

The key to prevention of weight regain is education and follow-up. Both before and after weight-loss surgery, patients need to be taught how to use their surgery to optimize their success. The optimal education should involve counseling in dietary, behavioral health and exercise issues.

I believe one of the most important things that a program can do to promote long-term weight maintenance is to create an environment in the clinic where a patient feels comfortable coming, not only when they are doing well, but also when they are struggling. By creating an environment where patients feel safe to share their struggles, we can often intervene early-on before the patient regains a significant amount of weight.

When I initially see a patient who regained some weight, I congratulate them for having the courage to come in to see me. My main focus of the visit is to begin to get an understanding of whether their weight regain is due to an anatomical problem (something wrong with the surgery), a medical problem or a behavioral problem (returning to old habits). It is extremely helpful if the patient brings a food journal to the visit.

I find the following questions to be quite helpful when sorting out the issue of weight regain:

1. How many times a day do you eat?
2. How many times a day do you get hungry?
3. Do you ever feel full and if so, how long does it last?
4. How much can you eat in one sitting?
5. Are you having heartburn or reflux?
6. Have you started any new medicines?
7. How has your energy level been? Your sleep?
8. Are there any new or ongoing stressors in your life?
9. Why do you think you are regaining weight?

If a patient is suddenly able to tolerate much larger meals, experiences an increased frequency in the sensation of hunger or develops new or recurring acid reflux, then I am much more concerned that I am dealing with an anatomical problem (something wrong with the surgery). Anatomic problems are best diagnosed with an upper GI series or an upper endoscopy. The following are some anatomic causes of weight regain:

Anatomic

- Pouch dilatation
- Anastamotic dilatation
- Adjustable gastric band system problem (balloon leak, hole in tubing, port disconnection, etc.)
- Gastric-gastric fistula due to staple line breakdown

There are certainly some medical conditions that can lead to weight regain as well. I have listed some common ones below. Most of these will be diagnosed with a good medical history and blood work.

Medical

- Pregnancy
- Thyroid issues
- Adrenal issues
- New medications
- Kidney and/or heart problems

In my experience, anatomic and medical causes of weight regain after weight-loss surgery are rather uncommon, but they certainly should be considered. In the vast majority of patients, weight regain is the result of the patient slipping back into old, unhealthy habits.

The good news is that by intervening early and addressing the particular patient's issues, we can often prevent the patient from regaining a significant amount of weight.

It is important that patients keep in mind that obesity is a chronic disease that is not cured by surgery. Surgery provides a powerful tool for significant weight-loss, but without proper care, the tool can lose its effectiveness, leading to weight regain.

About the Author:

Lloyd Stegemann, MD, is a private practice bariatric surgeon with New Dimensions Weight Loss Surgery/ Weight Wise in San Antonio, TX. He was the driving force behind the Texas Weight-Loss Surgery Summit and in the formation of the Texas Association of Bariatric Surgeons (TABS) where he currently serves as President. He has been very active in the Texas state legislature trying to increase patient access to weight-loss surgery. Dr. Stegemann is a member of the American Society for Metabolic and Bariatric Surgery (ASMBS) and the OAC Advisory Board.

Want more information on weight regain?

Various resources/programs are available to help those who are experiencing weight regain.

Back on Track with Barbara

Internet mentoring program specifically devoted to those who are struggling with weight regain.

www.backontrackwithbarbara.com

Obesity and Me

An educational organization dedicated to empowering individuals regarding obesity issues.

www.obesityandme.com

About the OAC

The Obesity Action Coalition (OAC) is a non profit patient organization dedicated to educating and advocating on behalf of those affected by obesity, morbid obesity and childhood obesity. The OAC distributes balanced and comprehensive patient educational materials and advocacy tools.



The OAC believes that patients should first be educated about obesity and its treatments and also encourages proactive patient advocacy. The OAC focuses its advocacy efforts on helping patients gain access to the treatments for morbid obesity. As a membership organization, the OAC was formed to bring patients together to have a voice with issues affecting their lives and health. To learn more about the OAC, visit www.obesityaction.org or contact us at (800) 717-3117.

OAC Resources

The OAC provides numerous beneficial resources for patients, as well as professionals. All OAC resources are complimentary and may be ordered in bulk. To request materials, please contact the OAC National Office at (800) 717-3117 or send an email to info@obesityaction.org.

Newsletters

- *Obesity Action Alert* - the OAC's free monthly electronic newsletter
- *OAC News* - OAC's quarterly education and advocacy newsletter

Brochures/Guides

- *Are you living with Obesity?*
- *Advocacy Primer: Your Voice Makes a Difference*
- BMI Chart

- OAC Insurance Guide
- State-specific Advocacy Guides
- *Understanding Obesity Series*
 - *Understanding Obesity Brochure*
 - *Understanding Obesity Poster*
 - *Understanding Morbid Obesity Brochure*
 - *Understanding Childhood Obesity Brochure*
 - *Understanding Childhood Obesity Poster*

OAC Membership

The OAC was founded as the "patient voice" in obesity. As a membership organization, the OAC exists to represent the needs and interests of those affected by obesity and provide balanced and comprehensive education and advocacy resources. Membership in the OAC is integral in strengthening the voice of the millions affected by obesity. Various membership levels are available and each is accompanied with several valuable benefits such as:

- Official membership card/certificate
- Annual subscription to *OAC News* – OAC's quarterly educational and advocacy newsletter
- Subscription to *Obesity Action Alert* – monthly e-newsletter distributed on the 1st of each month
- Access to valuable educational resources and tools
- Patient representation through advocacy, in addition to information on advocacy issues concerning patients

Yes! I would like to join the OAC's efforts. I would like to join as a/an:

- Patient/Family Member: \$20
- Professional Member: \$50
- Physician Member: \$100
- Surgeon Member: \$150
- Institutional Member*: \$500 (*Surgery centers, doctors' offices, weight-loss centers, etc.*)
- OAC Chairman's Council*: \$1,000 +
* *These membership levels have exclusive benefits.*

Name: _____

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Payment Information

Enclosed is my check (payable to the OAC) for \$ _____.

Please charge my credit card for my membership fee:

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