Who benefits from bariatric surgery?

Patients are considered morbidly obese and may be a candidate for bariatric surgery if they:

- Are age 18 or over
- Have a BMI (Body Mass Index) greater than 40 or greater than 35 with other medical conditions such as diabetes, high blood pressure, sleep apnea or other health problems related to morbid obesity
- Have a history of failure to control weight through other methods such as diets and exercise

Patients who are morbidly obese are far less likely to respond to diets than people who are less severely overweight. They are more likely to develop serious, disabling health problems.

What are the benefits of bariatric surgery?

- Significant long-term weight loss
- Effective control of Type 2 diabetes
- Effective control of high blood pressure
- Control of sleep apnea
- Improved symptoms of arthritis related to excess weight
- Greatly improved physical appearance
- Improved self-esteem and employment opportunities

Scheduling surgery and what to expect

Bariatric surgery is usually performed 12 weeks after the prospective patient attends a required information session with a bariatric surgeon. These sessions are held regularly and are designed to introduce the patient to the bariatric procedures as well as to the FirstHealth Bariatric Team.

Prospective patients are also required to be evaluated by the following:

- A registered dietitian
- A FirstHealth mental health provider
- A bariatric surgeon

Surgeons

Raymond Washington, M.D., serves as medical director of the program. Joining Dr. Washington is David Grantham, M.D., a fellowship-trained bariatric surgeon. Both Dr. Washington and Dr. Grantham are board certified and affiliated with Pinehurst Surgical.

Dr. Washington began his extensive bariatric training by assisting on more than 250 bariatric cases. As medical director of the FirstHealth bariatric team, he provides leadership and direction for the program. He is a member of the American Society of Metabolic and Bariatric Surgeons and is certified by the American Board of Surgery. He has been recognized for his achievements in surgery by his alma mater, St. Joseph’s University, when he was made the institution’s spokesperson and national representative.

Dr. Grantham received his medical training at the University of North Carolina at Chapel Hill and completed his residency and a fellowship in bariatric surgery at Wake Forest University Baptist Medical Center.

Information and referral

FREE weight-loss surgery information sessions are held on the first Thursday and the third Tuesday of each month at 6 p.m. in the Shadowlawn Room at Clara McLean House, 20 FirstVillage Drive, Pinehurst.

Please arrive 20 to 30 minutes prior to the beginning of the session for registration and Body Mass Index calculation.

For more information, visit www.NCWeightLossSurgery.org or call (800) 213-3284.
For patients who are morbidly obese and have been unsuccessful in controlling their weight through diets and exercise programs, weight-loss surgery may be an effective treatment option. Weight-loss, or bariatric, surgery means you have an operation to make your stomach smaller.

FirstHealth Bariatrics at Moore Regional Hospital offers:

- Sleeve Gastrectomy or gastric sleeve surgery
- Roux-en Y divided gastric bypass surgery

Typically performed by way of laparoscopic (minimally invasive) approach, Roux-en Y gastric bypass and sleeve gastroectomy are proven safe and effective methods for promoting weight loss in the obese or morbidly and for treating the illnesses associated with obesity such as sleep apnea, diabetes, high blood pressure and joint pain.

Sleeve gastrectomy is a restrictive surgery that permanently removes 85 percent of the stomach. The surgeon uses staples to divide the stomach into two parts and then turns one part into a narrow tube that carries the food. The other part is removed. When the patient eats, the food passes into the narrow stomach as normal. Since the smaller stomach can take only a few ounces of food, the patient feels full sooner than usual.

The Roux-en Y Gastric Bypass procedure reduces the capacity of the stomach to a small pouch that holds about an ounce of food. The pouch is completely divided from the stomach and is connected to the small intestine so that it can empty. Limiting the amount of food a patient can eat and the number of calories that the patient’s body can absorb helps the patient achieve dramatic weight loss while often controlling Type 2 diabetes, high blood pressure, sleep apnea and other health problems.

Visit www.NCWeightLossSurgery.org to learn more about these procedures and the pros and cons of each.

Streamlined clearance process

Time off from work for multiple medical visits is challenging. You will complete your consults with the surgeon, dietitian and psychologist all in one day.

- We will contact your insurance company to help you determine coverage and out-of-pocket expenses.
- You will receive personalized, 1:1 attention in completing your pre-surgery checklist.
- We will help streamline and schedule any necessary medical referrals, consults and follow-up appointments to reduce the time from seminar to surgery.

Free, comprehensive education and support, including:

- Educational pre-op workshops: nutrition and fitness principles and action steps to long-term success
- Exercise is Medicine Program: Private fitness assessments and personal training sessions are also available.
- Group exercise classes: These fun group classes meet at the same night as the support group.
- Life/Health coaching: 1:1 and group
- Interactive online support
- Mentoring Program: Surgery alumni share words of wisdom.
- Support groups
- Nutrition classes: individual or group meetings to discuss healthy eating habits and proper nutrition
- Cooking classes: offered throughout the year to teach healthy cooking habits
- Special Restaurant Menu Card
- Group Medical Visits

Nicole Trembley progression

Day Before Surgery - 345 lbs.
HW: 235 lbs.; Lost 50 lbs. Pre Op; Total Loss = 210 lbs.

6 Months Post Op - 243 lbs.

1 Year Out - 185 lbs.