



Advanced

BARIATRICS

APRIL 2021 NEWSLETTER

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WHO IS ADVANCED BARIATRICS? @ADVBARIATRICS

Exceptional Care for Bariatric Surgery Patients Throughout Their Medical Weight Loss Journey

Led by fellowship-trained bariatric surgeons, Dr. John Cheregi and Dr. Hsin-Yi Chang, Advanced Bariatrics was created to help people who struggle with obesity to confront and overcome their challenges and discover a happier, healthier way of life.

For many people, obesity is a chronic condition that requires medical intervention. At Advanced Bariatrics, we are committed to providing a judgment-free environment. We work closely with our patients to develop a treatment plan that will redefine what the future looks like.

The collaborative approach used by Dr. Chang and Dr. Cheregi is designed to help our patients identify the plan and procedure that will help them achieve success. Our doctors are passionate about being there every step of the way during what becomes a life-changing journey for most of our patients.



YOUR SURGICAL TEAM

JOHN R. CHEREGI, MD FACS

#TEAMCHEREGI

DR. CHEREGI'S SPECIALTY IS BARIATRIC SURGERY FOR MEDICAL WEIGHT LOSS. HE UNDERSTANDS THE CHALLENGES THAT HIS PATIENTS FACE AND HAS A PERSONAL PASSION FOR HELPING THEM ACHIEVE LONG-TERM SUCCESS. BY WORKING CLOSELY WITH PATIENTS TO CHOOSE THE RIGHT PROCEDURE AND MAKE LONG-TERM LIFESTYLE CHANGES, DR. CHEREGI HELPS THEM ENVISION (AND REALIZE) A NEW FUTURE.

DR. CHEREGI IS FELLOWSHIP TRAINED IN BOTH ADVANCED LAPAROSCOPY AND BARIATRIC SURGERY. HIS PATIENTS APPRECIATE HIS POSITIVITY AND HIS JUDGEMENT-FREE APPROACH TO ADDRESSING THEIR CHALLENGES. DR. CHEREGI EMPHASIZES EDUCATION, ENCOURAGEMENT, AND COLLABORATION TO HELP HIS PATIENTS ACHIEVE THEIR PERSONAL LIFESTYLE GOALS.



YOUR SURGICAL TEAM

HSIN-YI CHANG, MD FACS

#TEAMCHANG

DR. CHANG IS RECOGNIZED FOR HER EXPERTISE IN MINIMALLY INVASIVE SURGERY, WITH A SPECIALTY IN BARIATRIC SURGERY DESIGNED TO HELP PATIENTS ACHIEVE SIGNIFICANT WEIGHT LOSS. SHE EMBRACES A COLLABORATIVE APPROACH WITH HER PATIENTS, UNDERSTANDING THAT EACH INDIVIDUAL (AND THEIR JOURNEY TOWARDS WELLNESS) IS UNIQUE.

DR. CHANG'S GOAL IS TO PROVIDE HER PATIENTS WITH A BETTER QUALITY OF LIFE, AND HER GREATEST REWARD IS WATCHING THEM ACHIEVE LIFE-CHANGING OUTCOMES FOLLOWING BARIATRIC SURGERY. ALTHOUGH THE PROCEDURES SHE PERFORMS TAKE RELATIVELY LITTLE TIME, THE LONG-TERM RESULTS ARE EXTRAORDINARY, IN TERMS OF OVERALL HEALTH AND LIFE EXPECTANCY.

YOUR BARIATRIC COORDINATORS

Kiersten and Melissa are the bariatric coordinators for Dr. Cheregi and Dr. Chang. They guide our patients through the entire process and act as the main point of contact for all questions. It is their passion and goal to be able to support the patients on their journey and help them achieve their weight loss goals.

For new patients, we have a phone # that **Melissa** and **Kiersten** can be reached at directly: **847-350-9564**.



Melissa - #TeamChang



Kiersten - #TeamCheregi

2021 INFORMATION SEMINARS

Tell your friends!

All Info Seminars will be available on FACEBOOK LIVE!

Informational Sessions are provided **FREE OF CHARGE** and are a wonderful opportunity to learn how our program is dedicated to your future **SUCCESS** and lifelong care. You will learn important information about obesity, program offerings, candidacy, procedures, steps to surgery, and the pathway to success.



2021 SUPPORT GROUP

10:30 AM – 12:00 PM



April 10th



May 8th



June 12th



Attending support groups gives patients the opportunity to connect, encourage, and support one another. While the other members of the support group can help to encourage you and provide tips for success, they will also help to keep you accountable. Support group is something mutually beneficial for all attendees whether you have had surgery many years ago, recently had surgery, or exploring the idea of surgery.

Bottom line...**Support Group is important!**

Going forward, support groups may be held with Zoom or in-person. To determine if the upcoming meeting is in-person or virtual, e-mail Amy Paulus at amy.paulus@aah.org.

VIRTUAL/TELEHEALTH VISITS AVAILABLE

#noexcuses

Whether you are a new patient or established, Dr. Cheregi, our dietitians, and psychologists are offering virtual/telehealth visits to our patients. Make sure to not fall behind on your weight loss journey. We want to see you!

Let us know what you prefer when you call to schedule your visits with us!





#IGOTMINE

Our Bariatric Team has been vaccinated against COVID-19.
We are encouraging everyone to receive the vaccine as soon as it becomes available.

APRIL 22-28 WORLD IMMUNIZATION WEEK

According to studies now conducted by the CDC of the patients hospitalized or dying from COVID-19, **78%** were overweight, obese, or morbidly obese (CDC, 2021).

How should we respond to that statistic when **40%** of the population of the United States is obese or morbidly obese?

1. For those who fall into the obese and morbidly obese category, these patients need to invest in themselves and research bariatric surgery.
2. Primary care physicians need to take an aggressive approach to treating obesity as a disease not simply prescribing pills for the comorbidities.
3. **Get vaccinated against COVID-19!**



78% OF COVID-19 PATIENTS HOSPITALIZED IN THE US OVERWEIGHT OR OBESE, CDC FINDS

Among 71,491 U.S. adults who were hospitalized with COVID-19, 27.8 percent were overweight and 50.2 were obese, according to the CDC's latest *Morbidity and Mortality Weekly Report* published March 8.

The analysis included 148,494 patients who received a COVID-19 diagnosis at emergency departments or inpatient visits between April 1 and Dec. 31 across 238 hospitals. Of those, 71,491 were hospitalized.

Those who were overweight or obese were more likely to require invasive mechanical ventilation, findings showed. Obesity was also linked to increased risk for hospitalization and death, especially among those under age 65. As BMI rose, so did the risk, the CDC found.

The risks for hospitalization, ICU admission and death were lowest among those with BMIs under 25. The "healthy weight" BMI range is between 18.5 and 24.9.

The report notes that obesity is a recognized risk factor for severe COVID-19, which is possibly due to chronic inflammation that disrupts the body's immune response and impairs lung function.

"These findings highlight the clinical and public health implications of higher BMIs, including the need for intensive COVID-19 illness management as obesity severity increases, promotion of COVID-19 prevention strategies including continued vaccine prioritization and masking, and policies to ensure community access to nutrition and physical activities that promote and support a healthy BMI," the agency said.

MAY ARTHRITIS AWARENESS

Did you know, “Being just 10 pounds overweight puts an extra 15 to 50 pounds of pressure on your knees” according to the Arthritis Foundation? As a result, cartilage is damaged and osteoarthritis results. This then leads to patients requiring knee and hip replacements. However, when surgery is performed on patients who are obese, less desirable outcomes and more complications tend to result.

The solution – Losing 10%-20% of excess body weight can reduce the pain of arthritis by 50%-75%.

Imagine what losing more of your excess weight after bariatric surgery could do for you!



Photo credit: curearthritis.org

BARIATRIC SURGERY PRIOR TO TOTAL HIP ARTHROPLASTY IS COST-EFFECTIVE IN MORBIDLY OBESE PATIENTS

In the morbidly obese patient with end-stage hip OA, bariatric surgery prior to THA is a cost-effective strategy for improving quality of life and decreasing societal and payer costs. Bariatric surgery is considered the most effective treatment for weight loss in patients with morbid obesity, defined as patients with BMI 40 kg/m² or BMI 35 kg/m² with at least one significant comorbidity who have failed clinical management for weight loss [22,23]. In addition to experiencing a mean BMI decrease of 11.8 kg/m² within 2 years, patients undergoing bariatric surgery may also garner several other positive health benefits, including a 42% decrease in cardiovascular risk and a 30% decrease in all-cause mortality.

Costs incorporated into the analysis included direct costs associated with each procedure, indirect costs of lost work productivity postoperatively, as well as annual medical costs associated with each health state. Direct costs included the cost of treatment, complications, and follow-up within 90 days, and were derived from the literature and the National Inpatient Survey and Center for Medicare/Medicaid Services data (Table 3) [17,27,48,49]. The added direct cost for THA among morbidly obese patients has been estimated to be \$845 [17,48,49]. For revision and repeat revision THA, morbid obesity accounted for an additional \$1170.

Indirect societal costs were determined according to estimated loss of productivity in the postoperative period. Specifically, indirect costs were calculated by multiplying the estimated number of work days lost after various procedures by the median daily wage in individuals aged 45-54. Based on available literature, the estimated number of work days lost after all THA procedures in normal weight and obese individuals was 35 (range 5-70) [52e55]. The estimated number of work days lost after bariatric surgery was 10 (range 5-15).

In conclusion, bariatric surgery prior to THA is a cost-effective strategy for improving outcomes and decreasing costs in morbidly obese patients with end-stage hip OA indicated for THA. These results may help inform surgeon and policy makers' decisions regarding how best to treat symptomatic hip OA in an increasingly obese population. Prospective, randomized, clinical studies are needed to validate these results.

JUNE MEN'S HEALTH AWARENESS

In a 10-year study for patients undergoing bariatric surgery, why were only 19% of the participants men?

Those who did pursue bariatric surgery were older and had more comorbidities than the females. In addition, they had double the prevalence of coronary artery disease and history for heart attack. Also, a significant number of men are more likely to drop out of a bariatric program compared to women.

In addition of the 70% of the females referred to a bariatric program, 50% were self referred. Why aren't the primary care physicians referring both their male and female patients for surgery?



JUNE is
MEN'S HEALTH
MONTH

Photo credit: unicityhealthcare.com

THIS GUY GOT GASTRIC SLEEVE WEIGHT LOSS SURGERY, AND WENT ON TO LOSE 170 POUNDS IN 8 MONTHS

Hunter Croteau is still getting used to his new body. After all, the 20-year-old recently went through one of the most stunning physical and mental changes humanly possible: In just eight months, he's dropped an astonishing 170 pounds with the help of weight loss surgery.

"It got to the point where I was eating 6,000 calories a night," He said. "Binge eating, ordering out \$30 worth of takeout, eating it all myself."

By the time he graduated, he tipped the scale at **360 pounds**.

After he graduated, Croteau decided it was his year to get healthy. At first, he attempted to do it all on his own — but as anyone who's ever attempted to lose weight will tell you, it's not always that easy.

Getting weight loss surgery

At just 19 years old, Croteau got himself to a doctor, walked through the different options he had, **and made the life-changing decision to get a sleeve gastrectomy**. In total, 228,000 people in the U.S. received bariatric surgery in 2017, with nearly 60 percent of recipients choosing the sleeve. As for who makes a good candidate for the surgery, it could be a good option for those with a body mass index of 40 or higher, or those who suffer from a serious weight-related health problem "such as type 2 diabetes, high blood pressure, or severe sleep apnea," the Mayo Clinic says. On average, patients maintain a 55% weight loss after five years. "We've found that three weeks after the procedure, there is already a profound change in the way the brain responds to food and appetite," Dr. Erik Dutson, an associate professor and bariatric surgeon at UCLA Medical Center, previously told *MensHealth.com*.

Before he went under the knife, Croteau — as with most patients who get any form of bariatric surgery — underwent both physical and psychiatric care. For Croteau, that meant visiting a therapist and figuring out where his food issues came from in the first place, along with a nutritionist to learn about how he could eat more healthfully in the future. "Doing that entire process really helps you as well," Croteau said. "It really readied me for the surgery." After six months of work leading up to the surgery, Croteau underwent his sleeve operation. But his journey didn't end at the scalpel: Instead, he downloaded the MyFitnessPal app, took the new lessons from his nutritionist, and changed every aspect of his day-to-day life. Now, rather than eat takeout for every meal, he cooks things like homemade steel cut oats with pure canned pumpkin, cinnamon, walnuts, and Splenda for breakfast, followed by high-protein lunches and dinners each day — ensuring he remains in a calorie deficit to keep losing weight.

So far, he's dropped from 360 to 190 pounds.

As for what he'd tell someone in a similar position to where he started?

"You're going to make mistakes in your diet," he said. "You're going to read labels wrong. You're going to be eating more calories than you think you are. Some days you have to just start, learn from your mistakes and keep going, and if you don't it's never going to happen."

Croteau, who comes off wise well beyond his 20 years, also stressed that you shouldn't just focus on the changes happening to your outside.

"You have to be able to be honest with yourself: Find out what your problems are, and what hurts you the most about yourself," he said. "If you want to fix it, you have to just do it. Take the steps — even if they're baby steps."

To view full article: <https://www.menshealth.com/weight-loss/a22713937/gastric-sleeve-weight-loss-surgery-transformation/>

IT'S SPRING – GET OUTDOORS!

After being cooped up inside all of 2020, it is time to get back outside; and enjoy the fresh air! There are so many ways to burn calories and enjoy the outdoors!

- Hiking: 360-532 calories burned/hr
- Cycling (14-15.9 mph): 600-888 calories burned/hr
- Golf (carrying clubs): 330-488 calories burned/hr
- Basketball: 480-710 calories burned/hr



CRUSTLESS QUICHE LORRAINE

SKINNYTASTE

INGREDIENTS

- cooking spray
- 6 strips center cut bacon
- 1 cup grated Gruyere cheese
- 2/3 cup 2% milk
- 1/4 cup half & half cream
- 6 large eggs
- 1/2 teaspoon kosher salt
- 1/8 teaspoon ground black pepper
- pinch freshly grated nutmeg
- 2 tablespoons chopped chives

INSTRUCTIONS

Preheat your oven to 350F degrees. Spray a pie dish with oil.

Cook the bacon: Heat a large frying pan on medium heat. Arrange strips of bacon in a single layer on the bottom of the pan. Slowly cook the bacon, turning the strips over occasionally until they are nicely browned then lay the cooked strips on a paper towel, chop the cooked bacon crosswise into 1/4-inch to 1/2-inch pieces. Evenly spread the bacon in the dish and top it evenly with the grated gruyere cheese.

Make the custard mixture by whisking together the milk, half and half, eggs, salt, black pepper, and the nutmeg.

Pour the custard into the dish and top with chives, bake 35 minutes, until the center is set.

Cut the quiche into 6 pieces and serve.



Serving: 1/6th, Calories: 205kcal, Carbohydrates: 2.5g, Protein: 16g, Fat: 14g, Saturated Fat: 7g, Cholesterol: 214.5mg, Sodium: 350mg, Sugar: 2g
Blue Smart Points:5
Green Smart Points:7
Purple Smart Points:5

Recipe: <https://www.skinnytaste.com/crustless-quiche-lorraine/>

PATIENT SUCCESS: JOURDAN

WE LOVE SEEING OUR
PATIENTS POST THEIR
PROGRESS ON SOCIAL
MEDIA!



Today is a big day

I am officially down 60 lbs in about 4 months! These pictures are exactly 4 months apart.

I'm feeling so good, way more confidence and so much healthier. I can't believe this process only started 4 months ago, I can't wait to see where I'll be 1 year from now.

#lifestyleblogger #lifestyle #vsg #weightloss #vsgcommunity
#vsgjourney #vsgsupport #weightlossjourney
#weightlossmotivation #weightlosstransformation #bariatricbabes
#bariatricsurgery #bariatricslieve #bariatriccommunity

TELL YOUR STORY ON SOCIAL MEDIA!

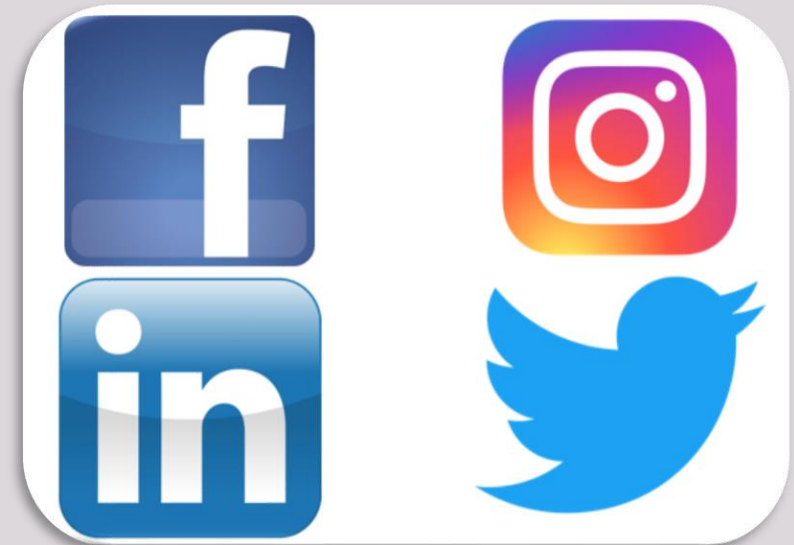
#mondaymotivation

#barituesday

We can't tell you how much we love to see your milestones, successes, and transformations. Tell us how bariatric surgery transformed your life on Facebook, Instagram, LinkedIn, and Twitter!

@advbariatrics

#teamcheregi #teamchang



#throwbackthursday

#weightlosswednesday

#facetofacefriday



We hope you all enjoyed April 2021's newsletter. Please share with your family and friends! As always, we love expanding our bariatric family. Contact Kiersten or Melissa to learn more information and to book a consultation. Follow us on **social media** for the most current information regarding upcoming events!

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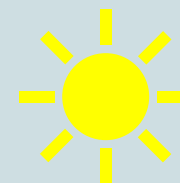
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