

Visit us at ASMBS Booth #204!

A Peer-Reviewed Publication

# BARIATRIC TIMES

Clinical Developments and Metabolic Insights in Total Bariatric Patient Care

Volume 5, Number 6

June 2008

## Inside

**PATIENT MANAGEMENT PERSPECTIVE**  
Management and Outcomes of Pregnancy Following Bariatric Surgery .....Page 1

**NUTRITION PERSPECTIVE**  
Carbohydrate, Fat, and Protein...Page 1

**PSYCHOLOGICAL PERSPECTIVE**  
Depression after Bariatric Surgery: Triggers, Identification, Treatment, and Prevention .....Page 1

**NUTRITION PERSPECTIVE**  
To Snack or Not to Snack: That Is the Question.....Page 29

**BARIATRIC CENTER SPOTLIGHT**  
Deaconess Surgical Weight Loss Center of Excellence .....Page 31

**EDITORIAL MESSAGE** .....3  
**EDITORIAL BOARD** .....7  
**JOURNAL WATCH** .....33  
**ADVERTISER INDEX**.....34

### PATIENT MANAGEMENT PERSPECTIVE

## Management and Outcomes of Pregnancy Following Bariatric

### INTRODUCTION

Continued on Page 17

### INSURANCE PERSPECTIVE



## The Multidisciplinary Approach to Weight Loss: Defining the Roles of the Necessary Providers

by George L. Blackburn, MD, PhD; Isaac Greenberg, PhD; Anne McNamara, RN; Daniel Rooks, PhD, FACSM; Shannon Fischer, MA; and Kristina Day, RD, LD

### INTRODUCTION

Obesity has become one of the gravest health concerns in the modern era. Multidisciplinary care aimed at small steps and practical approaches to lifestyle change can be an effective means of treatment for many patients who find it difficult to lose weight. Each member of the team—physicians, dietitians, exercise specialists, behavioral therapists, and nurses—brings a unique set of skills to bear on patient needs. Physicians, for example, address medical issues that might affect weight loss and help patients feel comfortable in a medical setting, while dietitians help patients gradually learn to eat less and incorporate healthier foods into their diets. Exercise specialists teach practical ways to integrate physical activity into day-to-day life; behavioral therapists help patients mentally prepare for the process of lifestyle change and address barriers to change; and finally, nurses, as with physicians, can help patients feel comfortable in a medical setting and assist in the management of medical complications that might affect their ability to lose weight.

Continued on Page 9



## Acute Bleeding After Gastric Bypass

by Candice Jensen, MD; Amir Mehran, MD; and Catherine Lewis, MD

### INTRODUCTION

Acute bleeding following laparoscopic Roux-en-Y gastric bypass (LRYGB) is an infrequently reported yet perplexing clinical dilemma, mainly due to the inaccessibility of the excluded stomach and the risks associated with early postoperative endoscopy.<sup>1</sup> In the

present communication, we address early or acute bleeding, defined as clinically significant bleeding within 48 hours of surgery; the incidence, prevention, diagnosis, and treatment options when faced with acute hemorrhage following LRYGB are described.

Continued on Page 17

