

Bariatric and Metabolic Weight Loss Center

*Change Your Weight
Change Your Health
Change Your Life*



Stony Brook **Medicine**



We Can Help

Excess weight takes a high toll. From difficulty performing daily activities to depression to multiple weight-related medical conditions — obesity's consequences are serious. The good news is that these issues can be resolved or improved by losing weight. Even better news: We can help.

At the Bariatric and Metabolic Weight Loss Center at Stony Brook, our interdisciplinary, individualized services include today's most effective weight loss procedures performed by a world-class surgery team. We also offer medical management, diet and exercise plans, counseling, behavior modification and group support. Our mission is to help you achieve your goals — and change your weight, change your health and change your life.

The Bariatric Surgery Strategy

Successful Weight Loss. Diet and exercise alone don't work well for those who are substantially overweight. You may have experienced this on your own, and national research confirms it. Bariatric surgery, however, has an excellent rate of success, not only for those who need to lose 100 pounds or more, but also for patients less overweight who are experiencing weight-related health problems.

Nationally, the majority of patients receiving bariatric surgery lose about 68 percent of their excess weight compared to the 2 to 5 percent of patients who are obese who report losing only 10 percent of their excess weight through diet and exercise. The experience of our medical director, Aurora Pryor, MD, has been for patients receiving gastric bypass surgery to lose 75 percent of their excess weight on average in the first year post-surgery.

Health Improvements. National data show that patients' weight-related health issues not only improve but often resolve completely with bariatric surgery. In fact, the risk of developing cancer goes down dramatically following substantial weight loss. Here are some of the other conditions that weight loss surgery alleviates or eliminates:

- Asthma
- Degenerative disk/joint disease
- Diabetes
- Gastroesophageal reflux disease (GERD)
- High blood pressure
- High cholesterol
- Low back and joint pain
- Urinary stress incontinence

Reduced Healthcare Costs. In another study comparing healthcare usage among patients who are morbidly obese receiving bariatric surgery vs. those who did not, the number of hospitalizations for those who did receive bariatric surgery was half that of those who did not have the surgery. Healthcare costs for patients who did not have surgery were 45 percent higher than for patients who received bariatric surgery.

Long-Term Success. Research also backs up bariatric surgery's long-term success. Results of the Swedish Obesity Study (SOS), initially reported in the *New England Journal of Medicine* in 2007 and confirmed in a 2010 update, concluded that bariatric surgery for severe obesity is associated with long-term weight loss and increased longevity.

Lifestyle and Emotional Improvements. Patients who receive bariatric surgery also report that they feel better, spend more time doing recreational and physical activities, benefit from enhanced productivity and economic opportunities, and have more self-confidence than they did before surgery.

World-Class Surgeons

Aurora Pryor, MD: Leading the Field

The Bariatric and Metabolic Weight Loss Center reflects the vision and leadership of director Aurora Pryor, MD. A national and international leader in minimally invasive and bariatric surgery, Dr. Pryor's credentials include:

- Excellent bariatric surgical outcomes and minimal complication rates
- 16+ years of experience
- More than 3,000 surgical cases performed, including more than 1,000 bariatric procedures
- Has trained 25 surgical fellows who are now leaders in minimally invasive and bariatric surgery
- Inventor of numerous patented surgical devices
- Serves on the editorial boards of *Surgical Endoscopy* and *Bariatric Times*
- Author of extensive publications and co-editor of two textbooks
- Has made more than 130 presentations worldwide
- Serves on the governing board of the Society of American Gastrointestinal and Endoscopic Surgeons (SAGES) representing 6,000 surgeons
- Co-chair for the Emerging Technology and Procedures Committee for the American Society for Metabolic and Bariatric Surgery (ASMBS)
- Holds appointments within numerous other professional societies

“The impact (of bariatric surgery) is nothing short of amazing. My patients typically see tremendous improvement — and often a complete resolution — of their weight-related health conditions. They become more active, feel better and look better. They tell me they’ve reclaimed their lives.”

—Aurora Pryor, MD



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Dana Telem, MD: Sterling Reputation

Dana Telem, MD, brings excellent clinical training and experience to Stony Brook's bariatric surgery team. Dr. Telem received her medical degree from Jefferson Medical College, Philadelphia; completed a general surgery residency at The Mount Sinai Hospital, New York; and received fellowship training in bariatrics at Massachusetts General Hospital, Boston. Extensively involved in research as well as clinical care, her additional credentials include:

- Author or co-author of 33 peer-reviewed publications, including two in press
- Researcher in Training Award from Society of American Gastrointestinal and Endoscopic Surgeons, 2011
- Centers of Expertise Research Grant from Massachusetts General Hospital, 2011
- David A. Dreiling Award for Excellence in Scholarly Activities from The Mount Sinai Hospital, 2011
- Presenter at numerous local and national professional conferences
- Board certified, American Board of Surgery
- Member of and actively involved in multiple national surgical societies

Advancing Bariatrics at Stony Brook.

Current research focuses on advancing laparoscopic bariatric surgery techniques and outcomes, and on new technology in surgery and surgical training. Invited to provide expert testimony to the U.S. Food and Drug Administration (FDA), Dr. Aurora Pryor advocates for surgical innovation and increasing options for those who are morbidly obese.



Interdisciplinary Services Tailored to You

Our approach at Stony Brook is targeted to your individual needs. Depending on your weight, health, lifestyle and preferences, we will help you develop an effective weight loss strategy. Surgery is often — but not always — part of that strategy. We also may recommend medical management, diet and exercise plans, counseling, behavior modification and group support. We equip you with the tools you need to reach your health improvement and weight loss goals. Then we follow up with the support necessary for long-term success.

Our interdisciplinary team consists of a broad range of experienced and credentialed professionals who consider it a privilege to be part of your journey.

Team members include:

- Anesthesiologists
- Bariatric Surgeons
- Diabetes Specialists/Endocrinologists
- Dietitians/Nutritionists
- Gastrointestinal Specialists
- Nurse Practitioners
- Occupational Therapists
- Orthopedic Surgeons
- Patient Liaisons
- Physical Therapists
- Physician Assistants
- Plastic Surgeons
- Program Coordinator
- Psychologists
- Sleep Specialists

New Facilities for Patients Receiving Bariatric Surgery



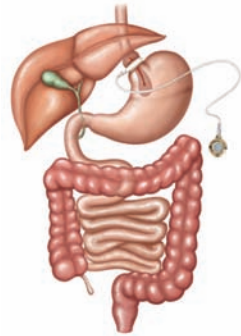
Our dedicated patient unit offers private and spacious accommodations with comfortable beds and chairs, spa-like bathrooms, high-quality fixtures, and special transport and safety features.

Bariatric Surgery Options

Bariatric surgery may encompass any one of several procedures that make the stomach smaller so the patient feels satisfied with less food and fewer calories are absorbed. It is intended for people who are 100 pounds or more overweight with a body mass index (BMI) of 40 or greater, or those with a BMI of greater than 35 and two or more co-morbid conditions, such as diabetes and high blood pressure. For gastric banding procedures, the criteria are a BMI greater than 35, or a BMI greater than 30 plus two significant medical problems.

BMI is a way of calculating body fat based on height and weight. To learn your BMI, check our BMI Calculator online at bariatrics.stonybrookmedicalcenter.org/bmi_calculator.

Adjustable Gastric Banding. The least invasive bariatric surgery, this procedure does not require stapling of tissue or organs. A silicone band and an injection port are surgically implanted to create a small pouch of stomach above the band. When the band is adjusted properly, the patient feels satisfied with less food. Adjustments to the band can be made during office visits using a needle to inject saline solution into the band through the port.



On average patients lose 40 to 50 percent of their excess weight with gastric banding. Usually performed on an outpatient basis or with a one-night stay, this surgery averages about 45 minutes operating time and a two- to three-week recovery period. Weight loss is gradual and can take up to five years.

Roux-en-Y Gastric Bypass. In this 75-minute procedure, the surgeon creates an egg-sized stomach pouch, using about five percent of the stomach and separating off the rest. A Y-shaped section of the small intestine is attached directly to the pouch. This allows food to bypass several feet of the small intestine. Result: Patients feel fuller sooner and eat less food. At the same

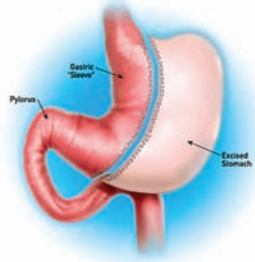
time, bypassing a portion of the small intestine means the patient's body absorbs fewer calories and helps to treat diabetes quickly.

In Dr. Pryor's experience, patients typically lose 75 percent of their excess weight in the first year after gastric bypass surgery and usually maintain 85 percent of their excess weight loss over time. After surgery, they generally leave the hospital in one to two days and require a three-week recovery period. Long-term success for this procedure — that is, whether patients keep more than half the weight off — has been about 90 percent for Dr. Pryor's patients.



Sleeve Gastrectomy. This procedure restricts the amount of food that can be eaten by removing 85 percent of the stomach. The surgeon creates a small, sleeve-shaped stomach about the size of a banana. The idea is to preserve the basic function of the stomach while significantly reducing its volume and without bypassing the intestines or causing any gastrointestinal malabsorption.

Sleeve gastrectomy is an approximately 45-minute surgery involving an average hospital stay of one to two days and a recovery period of two to three weeks. This non-reversible surgery may be a stand-alone bariatric procedure or be performed as the first procedure in a two-part treatment for patients with a BMI of 60 or higher. The second part of the treatment can be Roux-en-Y gastric bypass.



Banding with Plication. Like adjustable gastric banding, this procedure reduces stomach capacity without removing tissue. Unlike adjustable gastric banding, banding with plication includes folding the stomach under the band to create a sleeve-like pouch, which serves as a smaller functional stomach. Large-scale studies of this newer and investigational procedure's long-term success have yet to be reported.



Before and After Surgery

Bariatric surgery is not an automatic fix. It's part of an ongoing journey toward transforming your health through lifestyle changes. Each expert on our interdisciplinary team is dedicated to providing support for patients, both before and after surgery. We offer a comprehensive monthly interdisciplinary medical weight loss group and sponsor monthly support groups. In addition, our psychology team runs a six-week presurgical group and a 10-week postsurgical group to help patients foster effective behavioral coping strategies.

Postsurgical recovery time varies, but it is typically between two and three weeks. All bariatric procedures can help you feel satisfied sooner and with less food, but won't eliminate the desire to eat. To reach your goals, you will need to follow the specific diet and exercise guidelines provided by your healthcare team.

How Do I Choose?

Choose a surgery program based on the physicians' experience and expertise as well as your particular needs. Does your surgeon have a record of success? Does the program offer comprehensive support services before and after the procedure — for as long as it takes to lose the weight? Is there a menu of advanced procedures? Are the physicians engaged in research and teaching, and have they received honors from their peers? All these are signs of excellence.

Choosing which surgical procedure fits you best is a decision your surgery team can help with. Together, you will review your health, lifestyle and other factors that will contribute to your satisfaction with your surgery.

Getting Started

Learn more about how our weight loss programs can help you. Simply take a few minutes to register to watch our webinar in the comfort of your own home, or join us at one of our FREE community seminars where you will have the opportunity to ask questions and meet members of our team. And feel free to bring a supportive friend or family member.

To watch the webinar, visit our website at bariatrics.stonybrookmedicalcenter.org/webinar.

We schedule educational seminars on a weekly basis at Stony Brook University Hospital, and also hold seminars in the community.

Questions

For more information or to schedule an appointment, call the Bariatric and Metabolic Weight Loss Center at (631) 444-BARI (2274).

About Stony Brook Medicine:

Stony Brook Medicine integrates and elevates all of Stony Brook University's health-related initiatives: education, research and patient care. It includes five Health Sciences schools — Dental Medicine, Health Technology and Management, Medicine, Nursing and Social Welfare — as well as Stony Brook University Hospital and 50 community-based healthcare settings throughout Suffolk County. To learn more, visit stonybrookmedicine.edu.



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