

BARIATRIC SURGERY FOR PEDIATRIC OBESITY!!!

THE UNIVERSITY BARIATRICS PROGRAM NEWSLETTER



Welcome to our April 2023 newsletter. The motif for this issue is the latest recommendations from the American Academy of Pediatrics for the use of medications and surgery to combat pediatric obesity. This is undoubtedly a VERY controversial subject. You will also find some healthy Spring recipe suggestions from our allied health partners. And finally, you will find a link to the results of our annual survey sent to past patients. We hope you'll share this newsletter with others whom are either embarking on a surgical weight loss journey or are on the fence about it. Your feedback is always welcome.

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New guidelines for treating childhood obesity include medications and surgery for first time

The American Academy of Pediatrics updated its recommendations on childhood obesity for the first time in 15 years.

In January 2023, The American Academy of Pediatrics published its new updated recommendations for the management of pediatric obesity. For the first time, they recommend consideration of both medications and bariatric surgery in certain pediatric populations. This is because the obesity epidemic is on the rise amongst kids as well despite many attempts to combat it. The pandemic only made it worse. Obesity is a chronic multifactorial disease, with genetics and environment and personal choices all playing a hand. Most adults we see in office in fact have been on diets since childhood and come from homes with obese parents. The recommendation for more aggressive medical and surgical treatment of pediatric obesity stems from experts realizing that the old adage of watching and waiting and not intervening till the kids become adults has not proven beneficial. Adult co-morbidities are now seen in the pediatric population too, e.g. diabetes, high blood pressure, hyperlipidemia, sleep apnea, and joint pains. Therefore, in select pediatric population, earlier medical or surgical intervention is more beneficial than waiting for these medical issues to set in. We see this in adults as well, especially diabetics. Metabolic surgery works much better in patients with early diabetes or other obesity related co-morbidities vs in those who wait too long and are not referred for surgical consideration but instead have more medications added to their medicine cabinet. The kids, furthermore, can pay a heavier mental toll as well because of their weight, ie teasing, bullying, and social isolation. However, the use of novel medications or surgery for treatment of pediatric obesity is a very controversial topic with a plethora of opinions on both sides. At our program, we believe that the approach should be multi-pronged and must include drastic changes in lifestyle and eating habits before embarking on more aggressive treatments. The patient should be an active participant in the process, including in the actual decision to proceed with surgery. The current bariatric surgical literature has shown bariatric surgery to be safe in kids. But in our opinion, there should be more T-crossing and i-dotting in this population. As for the choice of operation, we believe the vertical sleeve gastrectomy would be the best choice. <https://www.nbcnews.com/health/kids-health/new-guidelines-treating-childhood-obesity-include-medications-surgery->

MISCONCEPTIONS ABOUT PRESURGICAL BARIATRIC PSYCHOLOGICAL EVALUATIONS

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An individual's mental health has an impact on their physical health. For example, most patients have an emotional response to the idea of undergoing surgery. Fear, sadness, anxiety and depression are not uncommon. Yet the patient may not be aware of these emotions and the effect their mental state can have on them or on the outcome of the surgery.

Many people think pre-surgical psychological assessments are done to disqualify them from surgery. Actually, these evaluations are an important part of the surgical process and help to ensure that individuals are able to not only undergo the surgery safely but also be prepared to do what's necessary to recover effectively from the surgery. Mental health professionals should make sure to address these misconceptions with the patient in order to get the most accurate assessment.

During the evaluation, patients can discuss their concerns and expectations and ask questions. Many individuals undergoing surgery will find their lifestyle will change significantly—temporarily or permanently. Knowing what will or may change and accepting these outcomes is very stressful. This is why it's crucial for individuals to be honest and thorough about their current emotional state and mental health history. The patient and the mental health professional work together to ensure the individual is mentally, as well as physically, prepared for the surgery, is willing and able to follow the post-op instructions and will likely experience a positive outcome. The mental health professional helps identify the individual's strengths and any risk factors that may impede successful recovery.

Then, the patient and mental health practitioner can work together on any areas that may benefit from additional support after the surgery. Some of these areas may include emotional and psychological reactions to the surgery, working with caregivers or following post-surgery instructions. Recovery support can be invaluable. Having someone supportive to confide in after the surgery can make a dramatic difference in recovery. Discussing any challenges the individual faces along the way and working out solutions can significantly improve post-surgery results—physically and psychologically.

FRESH & FUN SPRING RECIPES TO ENJOY

Yasmin Firouzman, RD
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Strawberry Spinach Protein Smoothie

A delicious way to get your protein, fruit and vegetables in

Ingredients:

1 cup fresh spinach
½ cup fresh or frozen strawberries (using frozen strawberries will give the smoothie a thicker consistency)
1 tablespoon frozen pineapple (a few pieces to mask the spinach flavor)
1 scoop protein powder of choice
1 cup unsweetened almond milk
Can add 1 tablespoon chia seeds for added fiber, omega-3 fatty acids and antioxidants.
Blend and enjoy!

Spring Dill Salad

Ingredients:

2 cups washed spring salad mix or greens of choice
3 oz of grilled chicken, fish or protein of choice
2 tablespoons chopped fresh dill
3 radishes cut into quarters or slices (Alternative for croutons)
¼ cup Lemon Vinaigrette dressing

Ingredients for Lemone vinaigrette*:

The juice of ½ a lemon
1-2 teaspoons olive oil
Pepper and sea salt to taste
*Can add chopped shallots, cilantro or garlic

2023 ANNUAL BARIATRIC PATIENT SURVEY RESULTS

Every year, we send out a multi-question survey to our former patients who are at least one year out from their bariatric surgery with us. The questions do change a bit every year as we come up with newer or better ones to ask. We wanted to thank everyone who participated in this year's survey and especially those patients who OK'd us sharing their email addresses with future patients in order to provide them with real life direct feedback as an alternative to all the misinformation on social media and internet. Here is the link to the survey: <https://youtu.be/dTXXPPKx4ow>

Your feedback is always appreciated:

<https://www.healthgrades.com/review/XLCJK?CID=18psIMMP0001>

Interested in attending online bariatric support meetings?

Send us a text or contact us via our website to be plugged with the SJRMC bariatric support meetings that are held via ZOOM.

Know someone who is suffering from their LAP BAND?

Revisional surgery after bands is just a matter of time. Share this link with them so they'd know their options: <https://youtu.be/XkNZzgZ1As>