Letter from the Director
September 2018

Dear Reader,

Obesity remains a serious concern in the U.S. and we seem to be losing ground in this battle, especially among young people. A recent study in *JAMA Pediatrics* shows that overweight teenagers are less concerned with shedding pounds and getting back into a healthy weight zone than they were a few years ago. Why? With a third of adolescents now overweight or obese, this body type has become the norm. As a result, teens are less motivated to change their eating habits and their lifestyle.

Another study shows that obesity is on the rise in small towns across America. A report in *The Journal of American Medicine* notes that men and women are more likely to be obese if they live in cities with a population of less than a million. Why are these areas so hard hit? The answer may have to do with the fact that people there have less access to healthcare services and are more likely to adopt habits like cigarette smoking, drinking sugar-sweetened beverages, and being less physically active.

While Americans are still gaining weight, the good news is that we're training more and more physicians to deal with this national epidemic. That means we can start treating obesity early rather than waiting to deal with all the serious conditions it can lead to. Read more here.

In our previous issue, Dr. Abraham Krikhely explained the link between obesity and an increased risk for diabetes, heart disease and cancer, noting that bariatric surgery can successfully alleviate these conditions.

We now have ample evidence that bariatric surgery cuts pounds, treats other
conditions and adds years to life. And each day we learn about its new and unexpected benefits. Recently scientists discovered that bariatric surgery and resulting weight loss can reverse premature aging. A new report also reveals that weight loss surgery can significantly reduce the risk of developing malignant melanoma, a life-threatening skin cancer.

Another important thing we tell our patients is that it's never too late to get help. A recent study shows that bariatric surgery is safe and effective even for the oldest people who are super obese.

At the Center for Metabolic and Weight Loss Surgery, we're here to help during every stage of your weight loss journey. In this issue, Laura Natali, RD, our registered dietitian and nutritionist, talks about how eating habits change after bariatric surgery, how to shop and read food labels, and how to make sure you're getting the right kind of calories.

To good health,
Marc Bessler, MD, FACS
Director, The Center for Metabolic and Weight Loss Surgery
www.columbiasurgery.org/weight-loss

---

**Interview: Your Diet After Weight Loss Surgery**

After weight loss surgery, patients have very special dietary needs—and they benefit greatly from close consultations with our nutritionist. We spoke with Laura Natali, RD, who joined Columbia's Center for Metabolic Surgery and Weight Loss in June 2018, about how individuals adjust to their new anatomy and change their approach to eating after bariatric surgery.

[Read more](#)

---

**IN THE NEWS**

**Bariatric Surgery Cuts Melanoma Risk by 60 Percent**

Bariatric surgery reduces the risk of developing malignant melanoma, a deadly form of skin cancer, by more than 60 percent, and the risk of more common skin cancer by 42 percent.
This news is from the European Congress on Obesity in Vienna, Austria. Researchers from University of Gothenburg in Sweden studied 2,007 patients who had bariatric surgery and compared their incidence of skin cancer to a control group of 2,040 individuals who did not undergo surgery, following both groups over 18 years.

This finding supports the idea that obesity is a risk factor for developing melanoma. And it indicates that weight loss in obese individuals can reduce the risk of this deadly cancer—one that has increased steadily over several decades.

The American Cancer Society estimates that 91,270 new melanomas will be diagnosed in the U.S. in 2018—about 55,150 in men and 36,120 in women—and that about 9,320 are expected to die from it.

Read more here

Diabetes—the Most Expensive Chronic Disease in America

Diabetes—one of the leading complications of obesity and overweight—now costs the U.S. $327 billion a year. This data is from the American Diabetes Association's (ADA) recent report in Diabetes Care. Among the findings:

—One of every four health care dollars goes to patients with diabetes, and one of every seven healthcare dollars is spent directly treating diabetes and its complications.
—Nearly half of American adults have diabetes or prediabetes.
—Every 21 seconds, another individual is diagnosed with diabetes in America.
—The ADA estimates 24.7 million Americans were diagnosed with diabetes in 2017 and the number of diagnoses grows by about 700,000 each year.

Read more here

Marketing Food Differently

It's not enough to label a chocolate bar "healthy." Obese and overweight people tend to equate healthy food with things that don’t taste good, and so these products never make it off the shelves and into the shopping basket. A
A recent survey of 2,000 consumers conducted by the Natural Marketing Institute was discussed by a panel of experts who concluded the following:

— Traditional health messaging to obese patients is not "an effective way to go" and there's no "one-size-fits-all message."
— Food manufacturers need to remove calories from 'indulgent' foods (snacks and treats).
— "Stealth" food improvements—such as reducing calories in a product without advertising the change—may work well
— The "somewhat overweight" group understands the need for healthy eating, but requires more help to make good choices
— Food improvements need to be made without sacrificing taste.

Read more here

---

**Overweight Kids Who Binge Eat Aren’t Getting Enough Help**

A study in the *Journal of General Internal Medicine* challenges the common perception that young, underweight women have the highest risk for eating disorders. Researchers report that eating disorders are actually three times more common in teens and young adults with obesity than those who are underweight. Yet despite the high rate of eating disorders among obese young adults, they are less likely than their peers to receive proper nutritional counseling.

Read more here

---

**Do You Qualify for Bariatric Surgery?**

Watch this video from The American Society for Metabolic and Bariatric Surgery; learn how to calculate your BMI and tell if you are a candidate for weight loss surgery.

The [Center for Metabolic and Weight Loss Surgery](#) has offices in several convenient locations in the tri-state area. [You can make an appointment here.](#)