

From LAP-BAND[®] System Patients: “What I Wish I’d Known”

Who understands your current frame of mind better than people who were in your position not so long ago? Here are great insider hints and insights from people who are living with the LAP-BAND[®] System.

We talked with three people who have “been there, done that” with LAP-BAND[®] System surgery—2, 3, and 10 years ago. As a bonus, two of our “panelists” also wound up working in bariatric practices after their surgeries, so they’re now LAP-BAND[®] experts, too! Here’s what they wanted to share with people like you who are contemplating the LAP-BAND[®] System.

“Learn All You Can”

Knowledge is power—and it’s also comforting. “Go on all the websites before your surgery—LapBandTalk.com, band2gether.com, the website of the bariatric clinic or hospital,” says Lyn Donley, 62, who had LAP-BAND[®] System surgery in August 2006. “On the message boards, I’d tell people ‘Hi, I’m new’ and get all kinds of information. It really helped.” You can also read books like *Laparoscopic Adjustable Gastric Banding* by Jessie H. Ahroni, PhD, ARNP, who had LAP-BAND[®] System surgery 10 years ago and is now bariatric program manager at Northwest Weight Loss Surgery in Everett, Washington. Or do what Kevin Bessette, 25, did before having LAP-BAND[®] System surgery in 2007: He attended a seminar given by a doctor from his local clinic, Fairfield County Bariatrics in New Haven, Connecticut. (Bessette, who has since lost 120 pounds, is now office manager there.)

“It Was a Great Experience”

Having the LAP-BAND[®] System procedure “was so much less scary than I thought it would be,” says Donley. “It was over in the blink of an eye. Everyone was so kind. There was little or no pain. Really just discomfort. My scar even went away—I could wear a bikini if I wanted to.” While everyone’s experience is different, most patients say that the recovery isn’t difficult at all, and they are back to their jobs in a few days. In fact, there are very few restrictions after surgery.

“Cook in Advance”

Before your surgery, go to the store and get a good supply of liquid foods you like so you will have them ready. If you like to cook, make some homemade soups that fit into your dietary guidelines for the liquid stage. “Don’t get all one kind of thing, though,” warns Donley. “Even if you love tomato soup, you’ll get sick of it if you eat it every day.” She also recommends buying sugar-free drink mixes that have protein added. “If you’re getting hungry, it’s probably because you need more protein. Count your grams of protein so you’ll know if that’s the case,” she adds.

“It’s Not As Rigid As It Seems”

“Although the program after surgery is going to have specific guidelines you have to follow regarding diet and exercise, it’s important to find things that work for you,” says Bessette. “As a formerly obese person, I am still

uncomfortable with the gym. But I've taken up 'hot yoga' and I love it, so I go three or four times a week." The same goes for experimenting with new foods—or mushy versions of your old favorites. If you like what you're eating, it's easier to stay on track.

“You'll Understand More After You're Banded”

Ahroni says that no matter how much you educate yourself, you can't really understand the LAP-BAND[®] System until after you get it. “I didn't really understand the band before I got it. It was a huge, major, permanent lifestyle change, but I was really, really ready to change,” she says. “I didn't care if I ever ate again. I just didn't want to be fat anymore.” She adds that it's easier if you have surgery when you're in a positive frame of mind—one where you're committed to eating differently and exercising after the surgery. “If you're stuck in a stage where you're still resistant to change, read a book or talk with a therapist about stages of change and how to move forward,” suggests Ahroni.

Be sure to consult with your doctor about your nutrition plan.

IMPORTANT LAP-BAND® SYSTEM SAFETY INFORMATION

Indications: The LAP-BAND® System is indicated for use in weight reduction for severely obese patients with a Body Mass Index (BMI) of at least 40 or a BMI of at least 35 with one or more severe comorbid conditions, or those who are 100 lbs. or more over their estimated ideal weight.

Contraindications: The LAP-BAND® System is not recommended for non-adult patients, patients with conditions that may make them poor surgical candidates or increase the risk of poor results (e.g., inflammatory or cardiopulmonary diseases, GI conditions, symptoms or family history of autoimmune disease, cirrhosis), who are unwilling or unable to comply with the required dietary restrictions, who have alcohol or drug addictions, or who currently are or may be pregnant.

Warnings: The LAP-BAND® System is a long-term implant. Explant and replacement surgery may be required. Patients who become pregnant or severely ill, or who require more extensive nutrition may require deflation of their bands.

Anti-inflammatory agents, such as aspirin, should be used with caution and may contribute to an increased risk of band erosion.

Adverse Events: Placement of the LAP-BAND® System is major surgery and, as with any surgery, death can occur. Possible complications include the risks associated with the medications and methods used during surgery, the risks associated with any surgical procedure, and the patient's ability to tolerate a foreign object implanted in the body.

Band slippage, erosion and deflation, reflux, obstruction of the stomach, dilation of the esophagus, infection, or nausea and vomiting may occur. Reoperation may be required.

Rapid weight loss may result in complications that may require additional surgery. Deflation of the band may alleviate excessively rapid weight loss or esophageal dilation.

Important: For full safety information please visit www.Lapband.com, talk with your doctor, or call Allergan Product Support at 1-800-624-4261.

CAUTION: Rx only.