

Small Steps: Start a Love Affair with Activity

Staying active will be an important part of your weight-loss journey with the LAP-BAND® System. So find ways NOW to bring you closer to a walking or running habit.

Physical activity is crucial for weight-loss success with the LAP-BAND® System—and building an exercise habit before surgery can help you stay on track. “The difference is like night and day,” notes certified personal trainer Alice Burron, MS, wellness coordinator at Cheyenne Regional Medical Center in Wyoming and the developer of a fitness program for weight-loss surgery patients. “People who start before surgery have an easier time continuing afterward. It’s not just a habit, it’s a vision for your future.”

If you’re new to exercise, haven’t worked out in a while, or never quite got into the “groove” of a regular routine, Burron acknowledges that jumping in can be challenging. “But remember, it feels good. It’s liberating. It helps you lose weight, boost energy, and relieve stress. And it takes just a few minutes.”

Your Starting Line

Most experts recommend starting with walking. “It’s your main mode of transportation for life, and you already know how to do it,” Burron notes. “You can walk anywhere, anytime. There’s no need for special equipment, other than good walking shoes.”

Walking is also a great way to build up to running—as you increase your walking distance and pick up the pace, you can fit in short bursts of jogging, then run for longer periods of time. (If you have joint pain when you walk, consider a lower-impact activity such as a water exercise class or an exercise bicycle. And ask your doctor for a referral to an exercise physiologist or personal trainer for exercises to build the joint-protecting muscles in your legs.)

Making Strides

Burron recommends these strategies for easing into a love affair with walking—and even with running.

Try just 10 minutes per day. “You can even do 5 minutes in the morning and 5 minutes later in the day—it doesn’t have to be all at once,” Burron says. “Starting with 10 minutes a day gets your muscles and joints ready.” Your first goal: Build to 10 continuous minutes. “Once you’ve reached 10 straight minutes of walking and can do it most days for a week or so, add 1 more minute,” she suggests. “When that’s really comfortable, add one more and so on.”

Don’t push the pace at first. On an exercise intensity scale of 1 to 10, with 1 being the tiny bit of effort it takes to get out of bed in the morning and 10 representing the effort it would take to climb Mount Everest, Burron recommends aiming for an easygoing 4. “We want you moving, getting used to the feeling of walking,” she says. “At a level 4, you can easily carry on a conversation while you walk.” Remember to take slightly deeper

than usual “belly breaths” as you walk. “If you’re overweight, you may be breathing shallowly,” Burrton says. “Filling the lower part of your lungs with air will give you more energy. You’ll really see a difference.”

Start with a flat route. A walking trail, sidewalks through your neighborhood, even a local outdoor running track are good options. In hot, cold, or rainy weather, consider mall walking or, if you have a gym membership or exercise equipment at home, use a treadmill. Once you’re more experienced, you can add hills to your outdoor route.

Pick up the pace. As you become a more experienced walker, experiment with short bursts of faster-paced walking. Warm up by walking at an easy pace for 4 minutes or so, then walk at a brisk pace—fast enough that conversation is possible, but only a few words at a time—for 30 seconds. Slow down to a comfortable pace for 2 minutes, then do another fast-paced interval for 30 seconds. Keep up this combination—2 minutes at a comfortably brisk pace plus 30 fast seconds—for the rest of your walk, then cool down by walking at a slower pace for the last 3 minutes or so.

Turn fast walking into slow running. Ready to run? Use the same interval strategy outlined above, but try jogging the fast-paced sections. Over time, increase the length of your running segments.

Stay hydrated. Drink a glass of water before you walk and another afterward. “If you’re overweight, you’re at higher risk of dehydration because your internal body temperature is actually higher,” says Burrton.

Be inspired. “Connect with the thing that really motivates you—the issue closest to your heart,” Burrton suggests. “Are you doing it for your health? To live a longer, happier life? To be around for your children or grandchildren? Everybody has days when they don’t feel like exercising. That’s the time to remember why you’re on this journey—tapping into that driving force will keep you going.”

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.