

Weight Loss Surgery: It's All About Health, Not About Trying to Look Good

WASHINGTON – Due to her weight, 310-pound Alfreda Hill-Wilkerson had a daily routine that she endured in order to survive.

“I took 17 pills and two insulin injections a day,” she said. “I was on an oxygen tank and used a walker to get around.”

In 2001, Hill-Wilkerson struggled with a variety of weight-related illnesses, including asthma, diabetes, hypertension and sleep apnea.

She had tried to lose weight. In fact, she had tried every diet imaginable.

“I had done Weight Watchers, Jenny Craig, NutriSystem, just about any and every diet that was out there,” she said.

But there she stood with an oppressive pounds that were threatening her life.

Eight years ago, Hill-Wilkerson of Upper Marlboro, Md., decided enough was enough and chose to undergo gastric bypass surgery, a medical weight loss procedure for patients considered morbidly obese and whose weight-related diseases threaten their lives.

Following the surgery, Hill-Wilkerson kept to a healthy diet and an exercise regimen, and the pounds rolled off.

Within 14 months, she had lost 160 pounds and had gone from a size 22 to a size eight.

Best of all, she said, all of her related illnesses disappeared.

“It was life changing,” Hill-Wilkerson, 48, said. “That’s what this kind of surgery is. It’s a life changing event.”

Dr. Terrence Fullum, chief of the Division of Minimally invasive and Bariatric Surgery at Howard University, said unfortunately too many people think of weight loss surgery in relation to celebrities, like Al Roker, Etta James, Patti Austin, Star Jones and others.

“It’s unfortunate, because this is really about health,” said Fullum, who has developed and directed bariatric surgery programs at five institutions in the Washington area. “It has been shown repeatedly that the only reliable long-term solution to morbid obesity like Ms. Hill-Wilkerson had is weight loss surgery.”

Fullum, director of the Howard University Hospital Center for Wellness and Weight Loss Surgery, said prime candidates for bariatric surgery should have a body mass index of 35 or greater and weigh 100 pounds more than their normal weight.”

“They should also have a series of failed diet programs in their history.”

There are two types of weight loss surgery, gastric bypass and gastric banding.

With gastric bypass surgery, the stomach is made smaller, allowing food to bypass part of the small intestine. Patients feel full quicker, which reduces the amount of food eaten, the number of calories consumed and the number of calories absorbed into the body. This option offers quick, often great weight loss, up to 75 percent of excess weight loss.

In gastric banding, an adjustable band is placed around the upper part of the stomach. The stomach becomes a pouch with about an inch-wide outlet, and can only hold only about an ounce of food. Compared to gastric bypass, weight loss is slower, Fullum said. Patients can expect to lose half of their excess weight. Recovery time, however, is quicker, and lap banding is fully reversible.