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The new weight-loss program: Bariatrics Hampton physician treats patients with lifestyle changes

Small miracles happen every day at Physicians Healthy Weight Center in Hampton: A man can suddenly cross his legs, a woman declares she has returned to the dance floor, a teenage girl leaves depression behind.

The key to their transformation is a new lifestyle designed by Dr. Jennifer Warren and a good dose of willpower. She and her husband, Ron Wolfe, opened the center in March of last year, and patients have since lost a combined 7,052 pounds or an average of 17 pounds per person.

After nearly 10 years as a family practitioner, Warren decided to specialize in bariatrics: the medical treatment of obesity and its associated conditions.

Soon she will be the only board certified physician in bariatric medicine in northern New England and one of 260 certified specialists nationwide.

Once 75 pounds overweight, Warren is now an image of health. She shines like a 100-watt light bulb and talks like a bird chirps in the spring.

"Have you seen our five-pound fat lump," she says excitedly and sets off for one of the examination rooms. On a table sits a yellow lump of rubber. Warren picks it up and weighs it in her hand. Some of her patients have bought their own lump and placed it in their fridge, as a reminder of the way they were.

Many new patients enter the clinic on the verge of tears, she says. They say they have tried everything, but the result has always been the same, after brief success the pounds have returned like nails to a magnet. Some have skipped meals or cut almost every gram of carbohydrates. Some have binged only to starve themselves for days. Most have experienced yo-yo-dieting, over-night weight gain, and enormous cravings. Four patients signed up when they regained the weight they lost after undergoing gastric bypass surgery. They share the dilemma with 129 million Americans considered obese or overweight.

Bariatrics is a combination of prescribed medication, exercise, dietary adjustments and a change in lifestyle.

"Ask me what diet I haven't tried," says Daniel Rutherford, 41, a product marketing manager from Raymond whose before-and-after picture appears among others in the lobby.

In May last year, the scale hit 303 pounds and he had to ask for an extension safety belt on the plane. For Rutherford it spelled the end to years of candy, late snacks, and fatty restaurant meals followed by an obligatory dessert, and the beginning as a patient of Dr. Warren.

During the initial two-hour appointment for \$295, Warren compiles a medical and social profile and looks at medical conditions and medication that may contribute to weight gain. Obese people are often insulin resistant which means they store fat more easily and experience rapid changes in their blood sugar level and, as a result, slow metabolism and major cravings.

A prescription of an appetizer suppressant and just 10 to 15 minutes of exercise each day will tweak the resistance and jump-start the weight loss, she says.

Finally each patient receives an individualized diet and fitness plan. The principles are the same, she says, no matter if the patient wants to lose five or 300 pounds: daily exercise combined with a balanced low calorie-diet of three meals and two snacks a day. It is rich in high-fiber carbohydrates, protein, and small doses of the "right type of fats" found in, for example, avocado and flax seed.

"It seems like common sense," Warren says. "But it's one thing to say eat less and another to actually do it. I try to ease them into a healthy lifestyle. It won't happen overnight but give us three to four months and you'll feel great, like a different person."

In a box, nutritionist Beth Almstrom has collected items patients may look for when they go grocery shopping. There are soy crisps, multi-grain crackers, cherry granola bars, Morningstar Farms chicken patties, low-carb chocolate milk, and all-bran Kellogg's cereal.

Some people who have followed Atkins diet balk when they see the content.

"I call them Atkins survivors. They come in and are afraid of carbs. If you're on a really strict Atkins you can't eat more than 28 grams of carbs a day. That's not enough to exercise and then you're shooting

yourself in the foot because if you can't exercise you'll never be healthy," she says. "I have to reeducate people that not all carbs are bad. High-fiber carbs are absolutely necessary for them to be healthy... You got to go beyond reading artificial labels."

While still in family practice, Warren knew many of her patients' medical problems like diabetes, high blood pressure, and climbing cholesterol were rooted in their weight. But during 10-minute appointments there was little time but to write prescriptions and Warren grew frustrated.

Fighting obesity herself for nine years, she repeatedly lost and regained 20 pounds until she discovered a new branch of medicine — bariatrics.

"I started taking courses and holy cow, there are things we can do! We just aren't getting the training to do it in family practice."

Physicians initially showed mild interest in weight loss medicine and there still are few specialists as bariatrics is not taught in medical school and board certification remains voluntary. A poll by the American Medical Association also shows obesity among doctors is just as common as among the general population.

But with the media spotlight on expanding waistlines, the American Board of Bariatric Medicine added 80 certified physicians last year. Warren has passed the written and oral exam and is just waiting for a final review of the clinic before she receives her certification.

"One of my diabetes patients came down here and since I've switched from family practice mode to bariatrician mode, she's suddenly off her insulin. It's a different philosophy, a different approach and now we get to the root of the problem," she said.

Daniel Rutherford used to joke his legs looked as if they had been stung by a bee. Self conscious he often wore jeans in the middle of the summer. In a photo from a recent cruise, he poses in shorts — 88 pounds lighter and with another 12 to go before the goal — 200 pounds — is reached.

"It's fun to see people's reaction. They're shocked. Emotionally it has been huge for me," he says. "I'm treated differently. When you're overweight you get the feeling people don't take you seriously."

After the first appointment, some people do weekly weigh-ins while others return for monthly follow-ups. A number of patients have got off track and Warren has to calm them down.

"Some think we'll yell at them or something and I say, 'please, you're beating yourself up enough for the entire room.' I don't want you eat perfectly and I don't want you to exercise perfectly. In fact, I'm telling you that you won't. You're human. What I want is for you to do it right 90 percent of the time."

Linda Starbard, 56, of Kennebunk, Maine, is still shedding pounds and in the process the ache in her joint aches has dissipated. Fresh out of her second appointment, Ron Wolfe applauds her progress and Starbard says that even her skin has improved. After learning to downsize her otherwise healthy diet, she has lost 25 pounds.

"Did you see that fat in there? she asks, referring to the lump of rubber. "When you see that, you go 'Oh, my God.' I lost four of those! It's a whole lot cheaper than buying a fat wardrobe."