



Highlights of Inside this Issue

Patient Story - Cheryl's Journey	page 2
Success Habit # 1 - Fluid Intake	page 3
This & That	page 4
Is That Piece of Box of Candy Worth It	page 4
Cooking with Alcohol & WLS Diets	page 5
Have Your Cake & Eat It Too Recipes	page 6
Hair Loss After WLS	page 7
Support Group Calendar	page 8

Have Your Cake and Eat It Too



Barbecue Roasted Salmon

- 1/4 cup orange juice
- 2 T. fresh lemon juice
- 2 T. light brown sugar

- 4 tsp. chili powder
- 2 tsp. finely grated lemon zest
- 1 tsp. ground cumin
- 1/2 tsp. salt
- Pinch cayenne pepper
- 4 (6 oz.) salmon fillets, about 1 inch thick

Preheat oven to 400°. Coat a shallow baking dish with cooking spray. In a small bowl, whisk the orange juice, brown sugar, chili powder, lemon zest, cumin, salt and cayenne pepper. Using tongs, add salmon fillets to the prepared pan. Pour the orange juice mixture over the salmon and turn the salmon to coat both sides. Roast for 15 minutes, until a fork can be easily inserted into the salmon. Makes 6 servings.

Salmon is very rich in Omega 3 fatty acids. Omega 3 fatty acids play a crucial role in brain functions and normal growth and development. They cannot be manufactured by the body, and must be obtained from the food that we eat. The American Heart Association recommends eating fish such as salmon at least 2 times per week.

*Per serving:* 302 calories, 29 g. protein, 10 g. carbohydrates, 1 g. fiber, 3 g. fat

Quips and Quotes

*You may be on the right track, but if you just sit there, you'll get run over. P.H. Dunn*

*There is no pleasure in life equal to that of the conquest of a vicious habit. Unknown*

Topics in Bariatrics

Bariatric Surgery and Diabetes  
How it Relates to the Lap-Band

Bariatric Surgeons have known in their hearts for many years now that diabetes could be cured by surgery. There was even an article in one of the main Internal Medicine journals that said so. However, there were no experimental studies that directly addressed that issue until just recently.

In January 2008 a study that did just that was published in the *Journal of the American Medical Association*. It compared the treatment of Type II Diabetes using the bariatric operation of Lap Band Insertion to the traditional treatment of Diabetes Type II using medication and diet control. What is particularly important is that the patients all had a BMI under 40 and many of them had a BMI from 30-35. The group from 30-35 currently is excluded from insurance coverage for bariatric surgery.

Of no surprise to any of us is that the surgical patients did a lot better, regardless of their starting BMI. Essentially, most of the surgical patients lost significant weight and had their Diabetes Type II cured while most of the non surgical patients had no improvement at all in their Diabetes, just control without improvement.

In this particular study the Lap Band was used as the bariatric operation that the surgical patient received. It has demonstrated that weight loss is one of the key elements to the resolution of Diabetes Type II. It has also demonstrated that even the "carrot" of having one's diabetes cured is not adequate enticement to lose weight on a permanent basis, that an operation is necessary

From personal observation of my own patients, I believe this to be true. I will say that I believe that the Roux en Y Gastric Bypass is a more powerful tool than the Lap Band in the cure of Diabetes. It is also important to note that the experimental evidence of that is a few years off and that the understanding of just why is many years off.

What is of great importance is that Diabetes Type II patients in the 30-35 BMI range can be cured with an operation of great safety.

.....continued on page 7

## CHERYL'S JOURNEY..... "I have Just One Regret"



Before 03/05/2007

Cheryl is just 10 months after gastric by pass and has lost 100 pounds, just 5 short of her goal weight. And she has just one regret, "I didn't do it sooner." With every new patient who has weight loss surgery, it is like the wheel needs to be reinvented. To start reinventing, Cheryl had to overcome being scared. It took almost two years watching a friend's progress who had had weight loss surgery and hearing her family doctor recommend surgery before she could overcome her fear. Everybody knows that some of their friends and relatives and doctors will be supportive of weight loss surgery and some will be against it for a variety of reasons, such as: *it is too dangerous, it is the easy way out, I like you just the way you are.*

It may also surprise you just who will turn out to be the most supportive. Cheryl admits she was extremely "nervous" about telling her mother. For some reason she was most worried about her mother's reaction. And yet when she did tell her mother, Mom became one of her biggest supporters. She was also very glad to have the support of her family doctor. From the time Cheryl had her first consultation, she felt that everything went smoothly, even though she did have an episode of dehydration and also had to have a stricture dilated.

After surgery a lot more wheels got reinvented. One of the first was learning how complicated and emotional are the life changes after significant weight loss. Cheryl started out at 235 lbs and is now at 135 lbs. She still doesn't "see herself as being thin and believes it takes time for your head to catch up with your new body." When she sees herself in a mirror or her reflection in a window, she continues to be surprised that the thin person she sees is her.

People now treat her differently - they accept her more readily- they are less dismissive and more friendly. Yet she finds it uncomfortable when people pay attention to what she is eating or when they feel they have to justify to her what they are eating. She is so proud of her success, but doesn't want the fact she had bypass surgery to be what they see instead of her as a person. Cheryl said that she did not want to be defined by her bypass - that she did not want her main concept in life to be that of a bypass patient. She just wanted to be normal.

Another really big wheel reinvented was the eating thing. Cheryl discovered that normal people do not have to change the way they eat. They don't have to chew until their jaw muscles hurt. They don't have to remember to eat more slowly. They don't have pain if they forget the rules. For Cheryl learning not to drink liquids while eating has been very difficult and is still a problem. She has to make a very conscious effort not to drink anything while eating.

Cheryl has found the Support Group to be "invaluable", - a huge repository of wheels in various stages of modification and reinvention, all of them available to her just for the asking. What will happen if I do this? What will happen if I do that? What is going to happen next? How do I solve this problem? Family and friends can be supportive but when they haven't been there -and they do not vomit if they eat too much or too fast - or have to change their entire life style for her the addition of a Support Group has been extremely beneficial.

Each patient finds things along the way that have to be reinvented to suit them on a personal basis. However, there are some wheels that should not be reinvented. As examples, Cheryl said, "don't try to lose too much, be realistic, get your follow up, go to Support Group, listen to your doctor, and with your doctor set a reasonable weight goal." She is proud of her accomplishment but doesn't want people to see only the exterior because she feels she is still the same person as she was before surgery. Surgery is not a quick fix or a way to magical results. It is a tool that you need to learn how to use to make life style changes.



After 01/22/2008

### Parkview Center for Surgical Weight Loss Support Group


The support group meets the first Tuesday of every month from 7 PM - 8:30 PM at the Founders Center on the campus of Parkview Community Hospital Medical Center. All pre-op or post-op bariatric patients, their family and friends, regardless of where they had their operation, are welcome. We also invite anyone who is interested in bariatric surgery. Email us at [newimagebariatric@yahoo.com](mailto:newimagebariatric@yahoo.com) or call the office at: 951-760-0169 for additional information. **The Next Support Group Meeting is: March 4, 2008. Pre - Support Group Introductory Meeting** is held before support group from 6-7 PM the first Tuesday of each month at the Founders Center also.



## Weight Loss Surgery Success Habit # 1

In each issue of the *New Image News* in 2008 we will be giving you a Weight Loss Surgery Success Habit. Some of the Success Habits will be written by Dr Coon and some will be reprints of articles that he feels are essentially the same advice that he gives his patients.

### Fluid Intake



Fluid intake is an essential habit to develop. It may be difficult because we need to learn the right liquids, the right quantities and the right times to drink. We have all been encouraged not to drink while eating our meals. With the goal of maintaining satiety and feeling full after eating very little food, drinking during meals will only serve to flush the food immediately out of the pouch. This pouch emptying consequently leaves you feeling hungry again, causing you to eat again too soon, resulting in an overall higher caloric intake and weight gain. Surgeons have differing opinions on the optimal amount of time to wait after eating before drinking but, the general rule is 30 minutes. You can do some of your own experimenting to determine how drinking at certain times after eating affects the quantity of food you eat as well as the length of time you are able to stay feeling full. This way you can study your results and determine the ideal length of time between eating and drinking that suits your needs.

The most important fluid we need to consume is water. Our muscles are comprised of 70% water, and 75% of our brain is water. The only thing we need more than water is oxygen. Water consumption accomplishes many things for us. It helps to maintain muscle tone, improves hair and skin quality, and helps rid our bodies of harmful waste and toxins. Did you know that every day the average adult water thru activities, evaporation, exhaling and urination? That loss does not take into account your participation in strenuous exercise! The signs and symptoms of dehydration can include the following; thirst, dry lips, dry mouth, sunken eyes, skin that doesn't bounce back when pinched, a weak pulse, cold hands and feet, rapid breathing, confusion, and lethargy. These symptoms have been listed in order from mild to severe. Mild dehydration can be self treated, but if you are suffering from more serious signs of dehydration you need to seek medical attention immediately. Experts continue to recommend drinking at least 64 ounces of water each day. Carry a water bottle with you everywhere, and remember to drink your water BETWEEN meals and not with them!

## Monthly Introductory/Informational Meeting to Begin March 2008

Starting March 4, 2008 New Image Bariatric Surgical Associates and Dr John Coon will be having a monthly Introductory Meeting for new patients that are interested in finding out more about the weight loss surgery options.

If you have family members, friends, neighbors or co-workers that you feel might be interested in coming to a one hour session, please tell them about our regular Introductory Meeting the first Tuesday of each month in the hour prior to Support Group.

The following information is what will be listed on various weight loss seminar calendars.

### Weight Loss Options Introductory Meeting

John L. Coon, MD  
6:00 PM - 7:00 PM  
First Tuesday of Every Month

Founders Center  
Parkview Community Hospital Medical Center  
3865 Jackson Street  
Riverside, CA 92503  
951-760-0169

If you are thinking about weight loss surgery, please join New Image Bariatric Surgical Associates and Dr. John Coon for an Introductory Meeting. We invite you to meet Dr Coon personally at our Pre-Support Group session. You will also have the opportunity to interact with previous surgical patients and with members of our office staff. We keep the Introductory Meetings informal and personal. In that way there is always time to answer your individual questions.

Dr Coon, a highly experienced laparoscopic and bariatric surgeon, performs both the Lap-Band and the Roux en Y procedures and works with all patients to determine their best surgical choice. No reservation is required. For additional information or directions, please call **951-760-0169**.



## Valentines Don't Have to be Chocolate! and Is That Piece or Box of Chocolate Worth It

From Barbara Thompson WLS Newsletter:

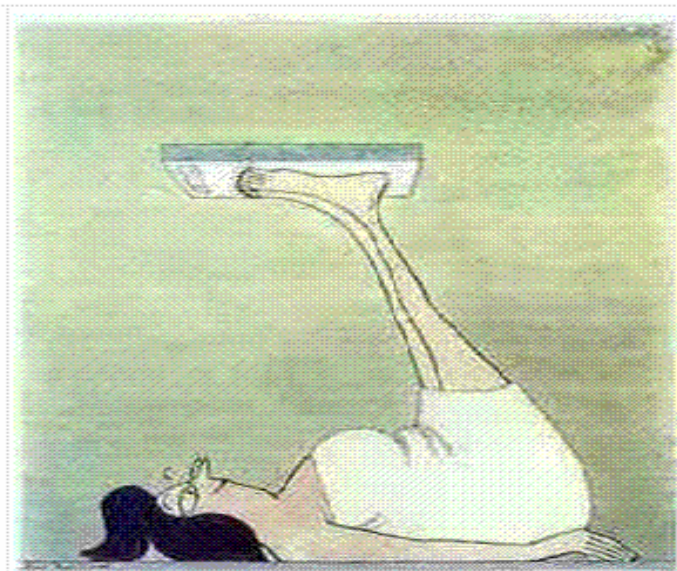
I heard a fascinating set of statistics last week. To burn off the calories in one single M&M, you would have to walk the length of a football field. For one peanut M&M, you would have to walk 1 1/2 football fields. And after eating a small bag of M&M's, you would have to walk 55 football fields.

Since I heard that, it has made me really pause before I put something in my mouth. It really emphasized to me that what we might think is very insignificant, really does count.

Growing up with Weight Watchers, I became accustomed to "free foods" such as, lettuces, otherwise known as "rabbit food." But if you were like me, that list of "free foods" started to expand to include a couple of M&M's, a few nuts, broken cookies, a small piece of cheese, all of which add up.

One of the 4 Rules of Success that I emphasize in my book, "Weight Loss Surgery: Finding the Thin Person Hiding inside You" is to stop grazing. Grazing is defined as unplanned eating. It is grabbing a little piece this, and a little piece of that in between your meals and planned snacks. Grazing can not only stop your weight loss in its tracks, but can lead to weight regain. And honestly, an M&M, which can eventually lead to eating so many other things, is worth it. *by Barbara Thompson*

So, when you go shopping for Valentines for that special someone, remember, a heart shaped box doesn't have to contain chocolate. Think outside the box this Valentines day, be creative and save yourself from the 55 football field penalty walk just to make up for a few pieces of chocolate.



Can't believe I was doing it wrong all these years.

## THIS and THAT

**MARCH SUPPORT GROUP MEETING:** Be sure to mark your calendar the March 4th Support Group Meeting will be a special meeting for all the husbands, wives, mothers, friends and special people who are the closest support person for a weight loss surgery patients. The agenda for the March meeting will be Support for Our Supporters. We will have break-out groups for the supporters. There will be time for supporters to discuss among themselves their issues and concerns. **Hope to see you there!**

**NEWSLETTER ON THE WEB:** *New Image News* is now on the New Image Bariatric Surgical Associates web site. If you miss a meeting and don't get your copy of the current *New Image News* you can go to the web site at [www.newimagebariatric.com](http://www.newimagebariatric.com) and at the bottom of the first page or under About Us you will find the most current issue and all the past 2007 *New Image News* issues. Share the newsletter with friends and family by sending then a link to the website or printing out a copy and giving it to a friend.

**SUPPORT GROUP 50 / 50.** Don't forget to bring a few dollars to the monthly Support Group meeting if you want to participate in our monthly 50/50. The lucky winner gets half the pot from each month's support group drawing and the other half goes for the annual Support Group Christmas Party.

**NEWS TO SHARE:** If you have news or recipes you would like to share in the newsletter, please call or send pictures and news items to Mary: 951-760-0169 or email to [newimagebariatric@yahoo.com](mailto:newimagebariatric@yahoo.com).



**Relay For Life** is a fun-filled overnight event designed to celebrate survivorship and raise money for research and programs of your American Cancer Society. During the event, teams of people gather at schools, fairgrounds, or parks and take turns walking or running laps. Each team tries to keep at least one team member on the track at all times. If you are interested in joining a team for the Riverside event on May 3-4, 2008 at Jurupa Valley High School, contact Melissa N. for more information. Melissa will be telling us more details at the March 4, 2008 Support Group meeting. Melissa at 951-682-4808

**Support Group Garage Sale:** Plans are being made for a garage sale in April to raise money for the Support Group Annual Holiday Party. Dates to be announced in March. Members will be asked to bring items to sell and also to help with set-up, selling and clean-up. For more information call Rhonda at 951-285-6359.



**Thanks to Brian Nowak** for speaking at the February Support Group Meeting. Brian the son of Mike and Melissa from the Support Group, is the general manager of 24 Hour Fitness at 10200 Juniper Ave., Fontana, Ca.

## Alcohol Use in Cooking

The majority of people think that once heat is added that all the alcohol is removed and only the flavor is left. In this month's newsletter, you will see that this statement could not be further from the truth! As a reminder, it is very important to consult with your physician about alcohol use after weight loss surgery.

### Cooking with Alcohol -Tips & Hints



In most cases, you have to use your own judgment on substituting alcohol in recipes. Sweet recipes will require different substitutions than savory recipes. Amounts will also make a difference. You wouldn't want to

use a quarter cup of almond extract to replace the same amount of amaretto liqueur. And remember, the final product will not be as the original recipe was intended. Some tips:

- Look at the main liquid of your recipe. Usually the main liquid ingredient can be increased to cover a small amount of the required alcoholic ingredient.
- If less than a tablespoon of alcohol is needed, it can be omitted although the flavor will be different.
- Any variety of juices and/or tomato juice can often be substituted in marinades.
- Non-alcoholic wine or wine vinegar can be substituted for wine.
- Add a small amount of sugar substitute to imitate sweeter wines.
- Extracts, flavorings, syrups, and juices can be substituted for flavor-based liquors and liqueurs. In addition, extract may need to be diluted.
- Use non-alcoholic wines instead of cooking wine or sherry. It should be drinkable or don't use it! All cooking wines and sherries are loaded with sodium which detracts from flavor and adds a salty and vinegar flavor to food.
- To help burn off more alcohol and reduce potential injuries when using it for flamed dishes, be sure to warm the liquor before adding to the heat (the food must also be hot!), and use a long match or lighter to ignite it. Always tilt the pan away from you when igniting. The liquor should be added at the very last possible moment and lit as quickly as possible to avoid the liquor soaking into the food. Let the alcohol burn off enough so the flavor does not overpower the dish.
- When using milk or cream in a sauce containing alcohol, be sure to burn off the alcohol before adding the cream or the sauce may curdle.
- If the alcoholic ingredient in the recipe is intended to be the main flavor and you must avoid alcohol, find another recipe. It just won't taste the same.

## Why Use Alcohol in Cooking?

Universally, the main reason alcoholic beverages are used in recipes is to add flavor. After all, the most premium of extracts with the most concentrated flavors are alcohol-based, particularly vanilla. In many recipes, the alcohol is an important component to achieve a desired chemical reaction in a dish. Alcohol causes many foods to release flavors that cannot be experienced without the interaction of alcohol. Beer contains yeast which raises breads and batters. Alcoholic beverages also help to break down tough fibers in marinades. Lastly, other dishes use alcoholic content to provide entertainment such as flambé and flaming dishes. As for fondue, wine and kirsch are added because it lowers the boiling point of the cheese which helps prevent curdling.

### Does Alcohol Burn Off?

Alcohol not only evaporates without heat, but the majority also burns off during the cooking process. How much remains in the dish depends on the cooking method and amount of cooking time. Those alcohol-soaked fruitcakes would have to turn into solid bricks before the alcohol would evaporate. A bottle of beer in a long-simmered stew is not going to leave a significantly measurable alcohol residue, but will add a rich, robust flavor. A quick flambé may not burn off all the alcohol, whereas a wine reduction sauce will leave little, if any, alcohol content. Heat and time are the keys. Obviously, uncooked foods with alcohol will retain the most alcohol.

### Alcohol Burn-Off

The following chart data comes from the U.S. Department of Agriculture with information on how much alcohol remains in your food with specific cooking methods. Keep in mind that this is the

Preparation Method	Percent Retained
Alcohol added to boiling liquid & removed from heat	85%
Alcohol flamed	75%
No heat, stored overnight	70%
Baked, 25 minutes, alcohol not stirred into mixture	45%
Baked/Simmered Dishes with Alcohol Stirred Into Mixture	Percent Retained
15 minutes cooking time	40%
30 minutes cooking time	35%
1 hour cooking time	25%
1.5 hours cooking time	20%
2 hours cooking time	10%
2.5 hours cooking time	5%

## Using Yogurt to Make Meals Healthier



**Skip the Syrup:** Top whole wheat waffles or pancakes with fresh blueberries and a dollop of lemon flavored yogurt.

**Move Over Mayonnaise:** Substitute plain, nonfat or low fat yogurt for one-third to one half the mayonnaise normally used in tuna,

chicken and potato salads, as well as for coleslaw or on sandwiches. You will enjoy the familiar tang and creaminess of mayonnaise without the excess fat.

**Get Saucy:** Mix plain yogurt with spicy mustard or chili sauce for a tasty shrimp dip or as a great topping for roasted chicken and/or fish. Likewise, marinating with yogurt and spices creates a tender and juicy meat.

**Dip In:** Use plain yogurt as a base for vegetable and chip dips. Add your favorite seasonings, mix, chill and serve. The protein boost turns a dip with veggies into a mini meal.

**Dream a Dressing:** Turn a bottle of vinaigrette into a "homemade" creamy dressing by adding 2-3 tablespoons of plain yogurt per cup of dressing.

**Top A Tater:** Cut the fat by substituting plain nonfat yogurt or low fat yogurt for traditional sour cream on baked potatoes.

**Say Ole:** Cool down your favorite Mexican dishes with a dollop of plain yogurt instead of sour cream.

## Cheesy Easy Chicken Chiladas with Cilantro Garlic Yogurt Sauce

8 Servings (1 Enchilada Per Serving)

Yogurt Sauce: See # 8 below

Ingredients:

- 1 (3 oz.) pkg. nonfat cream cheese
- 2 cups low-fat plain yogurt
- 2 cups chopped, cooked chicken breast
- 1/2 cup chopped cilantro
- 12 ounces chunky salsa
- 1 teaspoon ground cumin
- 1 cup low fat sharp cheddar cheese, shredded
- 1 teaspoon granulated garlic
- 8 (6 inch) corn tortillas

1. Heat cr. cheese in large skillet over medium heat until soft.
2. Stir in chicken and 1/2 cup of the salsa; mix well.
3. Next, add 1/2 cup shredded cheese and stir until melted.
4. Spoon 1/3 cup of the chicken mixture onto each tortilla; roll up.
5. Place seam side down in a 12 x 8 inch baking dish.
6. Top with remaining salsa and cheese.
7. Bake at 350 degrees for about 15 minutes, or until heated through.
8. Serve with yogurt sauce (combine yogurt, cilantro, garlic and cumin and chill until needed).

*Nutritional Information (per serving): 210 calories; 20g protein; 4g fat (2g saturated fat); 20g carbohydrates; 1g fiber; 380mg sodium*

Recipe Submitted by Cheryl. S.



## SUSAN MARIA'S BUFFALO CHICKEN THIGHS

- 2 pounds Boneless Skinless Chicken Thighs
- Vegetable spray
- 1 cup white wine
- 1 teaspoon Better than Bouillon, chicken flavor
- 1/2 cup Franks Buffalo Wing Sauce (make sure you use the wing sauce, and not the regular hot sauce)
- Black pepper

Cut thighs in half and brown in a non stick skillet coated in vegetable spray. Add wine (or use water but wine is BETTER), chicken flavoring, and half of the wing sauce. Cover and simmer 35-40 minutes until the chicken is very tender and sauce is thick. Add remaining wing sauce and season with salt and pepper. Can also be done in a slow cooker for 5-6 hours. 5 Servings.

*Per Serving: 211 Cal ; 28 g Protein; 6 g Tot Fat; 0 g Carb; 0 g Fiber; 0 g Sugar; 334 mg Sodium*

## Food Tip Suggestion by Rhonda H. : USING TOFU

Tofu is an easy to digest, somewhat bland food with a texture similar to cheese. It is made from soybean curd and is often substituted for meats, cheeses and certain dairy products because of its healthful properties.

There are three different kinds of tofu: silken, soft and firm. Silken tofu is perfect for blending with other foods because of its creamy consistency. It is frequently used to replace higher fat options such as cream cheese and it works great for a healthier version of cheesecake. Soft tofu has a texture more like al dente pasta. It is an excellent choice for dishes such as lasagna where pasta is replaced to create a lower carbohydrates option. Firm tofu is thicker and not as soft as the other varieties and can be diced up as an alternative to meats in dishes like salads, soups and casseroles.

Rhonda suggest using tofu noodles instead of pasta noodles for spaghetti. Try using tofu Italian sausage in lasagna and she says you won't know the difference. Vons Supermarket has a special section of tofu products in their deli section. Rhonda suggest trying some the next time you go to the store.

Each year in August, there is a Tofu Festival in the Little Tokyo section of Los Angeles. Rhonda suggests getting a group from the Support Group together and making a day trip to the Tofu Festival. Great idea for a fun summer outing. Watch for more information.

## APRIL 2008 SUPPORT GROUP MEETING PREVIEW

Hair Health Before & After Weight Loss Surgery is the topic for the April 1st, 2008 Support Group meeting. Back by popular demand, Bobbi Frazier will speak and then offer a "makeover" to a lucky member while we watch. Bring your questions and enjoy this fun presentation.

### Hair Loss After WLS



There is good news and bad news. The bad news is that one third of the people who have weight loss surgery lose up to one half of their hair. It actually comes out in handfuls. The hair loss usually starts around the third or fourth month. It

seems to be caused by the body's reaction to the trauma of surgery.

The bad news continues. There doesn't seem to be much you can do about it. Keeping up your protein, taking zinc pills and biotin may help a little, but not enough to really make much of a difference for most patients. Minoxidil products may limit how much you will lose, but if your body reacts this way, the use of these products and medication will may not help. I have never known anyone who has lost all of his or her hair; so don't think that this surgery will result in your looking like a cue ball! Getting your hair cut in a shorter style makes it look fuller, so that is an option. Not everyone experiences hair loss. But if it is you, it can be very traumatic while you are going through it. I was one of the lucky ones. I didn't experience any hair loss at all. Now, here is the good news. It comes back because the hair loss is only temporary. Around the fifth or sixth month, it starts to grow back in. Soon you have your normal head of hair back. And you can then breathe a sigh of relief!

Reprinted from Barbara Thompson's free e-newsletter  
[www.wlscenter.com/E-Newsletter.htm](http://www.wlscenter.com/E-Newsletter.htm)

## New Image Bariatric Surgical Associates

along with John L Coon, MD  
practices and does surgery  
in association with:

**Parkview Community Hospital**  
Riverside, CA.

and

**The Morrow Institute**  
Rancho Mirage, CA.

**866-374-9150**

## Topics in Bariatrics

continued from page 1

### Bariatric Surgery and Diabetes

The Lap Band has several features that make it a good choice for certain patients. It:

- has a very low complication rate
- has a very low death rate
- can be used in sicker patients
- allows patients usually to return to work sooner.

I see two important points of this article. One is that the treatment of Diabetes, either Type I or Type II, is surgical. While the article does not address the treatment of Type I Diabetes, it too is effectively treated with bariatric surgery. Whether a Lap Band or a Roux en Y Gastric Bypass should be used remains to be seen. At this point in time, both choices are reasonable. The other point is that diabetic patients with a BMI of 30-35 will also benefit greatly from bariatric surgery and withholding it from them is illogical, immoral, inappropriate, and should be illegal. While bariatric surgery for a BMI of 30-35 can be done, insurance will not cover it. I believe this experiment and many in the future will change that and I look forward to the time when it will.

*John L. Coon, MD*

### Holiday Celebration 2007 - A Huge Success

Thanks to everyone who spent many hours planning the 2007 Holiday Celebration held December 15 in the Founders Center at Parkview Community Medical Center. It was a fun evening and everyone sparkled. More than 125 were in attendance for a great evening of food, dancing prizes and the special holiday photographs. From the picture on the next page, you can surely tell it was a very special time for patients, their families and friends.

Special thanks go to the committee and all the individuals who planned, requested prizes, contracted catering, booked the DJ and arranged to have the photographer there. Members of the committee and volunteers for the evening were: Rhonda H., Mike and Melissa N., Linda S., Cheryl S., Dan S., Stevie B., Robin U., Debi and Linda from the office, Linda's daughter and friend and the Staff and Administration from Parkview Community Hospital. *A huge special thanks to Rhonda H. whom without her leadership the party just would not have happened. Rhonda, thanks from all!*


**Note:** If you haven't picked up your pictures from the party, contact Rhonda at 951-285-6359 or call the office to see if they are there. 951-352-5643

## HOLIDAY CELEBRATION 2007



### 2008 Parkview Center for Weight Loss Surgery Support Group Calendar

Come join us  
 7:00 PM - 8:30 PM • The First Tuesday of Each Month  
 at  
 Parkview Community Hospital Medical Center • Founders Center

January 8	Vitamins		July 1	To Be Announced
February 5	Brian Nowak Fitness for the Weight Loss Patient		August 5	Dr Jacqueline Jacques Bariatric Advantage
March 4	Support for the Weight Loss Patient Supporters		September 2	To Be Announced
April 1	Bobbi Frazier Hair Health Before & After WLS		October 7	Nutritionist and Dietitian Label Reading and Eating Habits
May 6	Tentative: Psychologist		November 4	To Be Announced Holiday Tips For Not Overeating
June 3	Pot Luck		December 2	Holiday Appetizer Event

**We have a clothing exchange. Bring a bag and take home a new outfit.**

Parkview Community Hospital Medical Center is located in Riverside at 3865 Jackson St. on the corner of Jackson St. and Magnolia Ave. From the 91 East exit at Van Buren, turn north (left) to Van Buren then left again to Magnolia Ave. Turn right on Magnolia Ave., go to Jackson St. (2nd signal light). Make a left on Jackson St.. The hospital is on your right. Please call 951-760-0169 for directions.