

A Minimal Surgical Approach to Treating Obesity

Severe obesity is a chronic condition that is difficult to treat. The Center for Disease Control estimates that 65 percent of United States adults – more than 100 million Americans – are either overweight or obese. Obese patients are vulnerable to serious medical complications including heart disease, stroke, diabetes, certain cancers, gallbladder disease, sleep apnea and osteoarthritis. Taking control of your weight now may help you avoid life-threatening illnesses later.

Constantine Frantzides, MD, PhD, FACS, is the Director of Minimally Invasive Surgery at Evanston Northwestern Healthcare and Professor of Surgery at Northwestern University's Feinberg School of Medicine. He's a pioneer in laparoscopic surgery and he has described and performed 13 first in the world laparoscopic procedures. Laparoscopic gastric bypass surgery or laparoscopic gastric

"The Gentler Surgery for the Treatment and Control of Obesity"

Seminars conducted by Dr. Frantzides quarterly

Evanston Hospital 2650 Ridge Avenue Frank Auditorium, Evanston

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banding are designed to induce and maintain a significant amount of weight loss, while avoiding the large incision and longer recovery time of conventional weight-loss surgery. The use of a minimally invasive approach may also result in minimal pain, minimal scarring, shorter recovery time and shorter hospitalization compared to open surgery.

One Patient's Journey

ing to catch a little girl around the same age as my grandson. She could not -- and it became a desperate situation because the little girl was heading for the street. All ended well, but I walked away crying because I realized there had been many times with my children, and now with my grandson, when they were not safe with me because of my weight. In fact, I had been obese my children's entire life. On many occasions, my children were teased



BEFORE

Did you ever wonder what you would do if you were given a chance to be thin?

I did all of the time...but I kept eating. I needed help -- serious surgical help. I was morbidly obese for 20 years. I knew the definition of morbid obesity, but I went through my daily routine as if I was not morbidly obese. Looking back I was trying to fool myself into thinking somehow everything would be fine. Thank goodness that reality kicked in and I woke up.

It all started at the park two and half years ago with my grandson, who was a year old. I saw a woman about my age and size try-

AFTER

because of my weight --something they had no control over. I know they also wondered if they, too, would become fat. It's only natural. Now here I was with my grandson, knowing he may not be safe, and potentially relive the same patterns. This craziness needed to stop!

I decided I would get strong. I stopped fooling myself into thinking that one more diet, one more pill, one more exercise routine would help. I had tried all of these things and would lose some weight, but as soon as I changed the routine of the moment, I would gain back all I had lost, plus more. Then I found Dr. Frantzides. I



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r. Frantzides is the Director of Minimally Invasive Surgery at Evanston Northwestern Healthcare and professor of surgery at Northwestern University. He is recognized worldwide as an expert in the field of laparoscopic surgery and is a charter member of the United States Laparoscopic Founders' Society. His experience in laparoscopic gastrointestinal surgery is one of the most extensive in the U.S.

He has traveled internationally to perform and teach laparoscopic operations. During the last 16 years, he has organized 31 laparoscopic courses through which 331 surgeons were trained in laparoscopic surgery, he has made more than 200 contributions to medical literature and has published 2 books on laparoscopic surgery. Dr. Frantzides has been the recipient of several awards and honors, as well as grants from the National Institutes of Health (NIH) and from the surgical industry. He is also credited with inventing two surgical instruments used in laparoscopic surgery. Because of his academic activities in laparoscopic surgery, as well as his surgical skills, he was given the "Achievement award for advanced laparoscopic surgery" by the American Society of General Surgery. See complete curriculum vitae for Dr. Frantzides at www.laparoscopicexperts.com.

remember waiting to see him and in my mind I was thinking that he would look at me and think, "What a loser. How did she let herself go?" But just the opposite happened. I was treated with so much respect, reassured that everything would be alright and that my quality of life would improve. I left the office armed with a surgery date and I have never looked back, other than to think about how much time I wasted not having the surgery sooner. The day of my surgery I weighed 270 lbs. That's more than some of the Chicago Bears football players!

The first day of the rest of my life was March 7, 2004. It has been a wonderful journey. I now weigh 130lbs. It's hard to believe that I lost more than I currently weigh. I chase after my grandson all of the time now. I'm healthier than I think I have ever been. I

learned so much about myself during this process, as well. It was not until after I started losing weight that I became honest about how compromised my former life had been. My only regret has been not doing the surgery sooner. I will never be able to give back to Dr. Frantzides what he has given me. My life is priceless. As for Dr. Frantzides, he finds joy in knowing that no other surgery he does has the ability to change a person's life in the manner that gastric bypass does. It's comforting to know that I will be healthier in my 50's, 60's and beyond. I know that one day I will die, but I WILL NOT DIE FROM OBESITY.

For more information visit: www.laparoscopicexperts.com.

Laparoscopic Procedures Preformed by Dr. Frantzides

BARIATRIC SURGERY

Laparoscopic Gastric Bypass (Weight loss surgery)

COLON/RECTUM/SMALL INTESTINE

Laparoscopic Enterectomy (Resection of small bowel)

Laparoscopic Ileocecectomy

(Resection of small intestine and cecum)

Laparoscopic Colectomy

Laparoscopic Low Anterior Resection of the

RECTOSIGMOID COLON

Laparoscopic Abdominoperineal Resection

Laparoscopic Total Proctocolectomy

Laparoscopic Rectopexy

Laparoscopic Appendectomy

ESOPHAGUS

Laparoscopic Fundoplication (Gastroesophagea

I Reflux Surgery)

Laparoscopic Hiatal Hernia Repair with or without

Laparoscopic Esophagomyotomy (Heller Myotomy - For the treatment of Achalasia)

Laparoscopic Esophagectomy

Laparoscopic Transgastric Esophageal Mucosal

Resection (For the treatment of severe dysplasia)

Hernia

Laparoscopic Inguinal Hernia Repair

Laparoscopic Ventral/Incisional Hernia Repair

Laparoscopic Femoral Hernia Repair

Laparoscopic Diaphragmatic Hernia Repair

(Congenital or Traumatic)

Kidney/Adrenal

Laparoscopic Nephrectomy (Kidney removal)

Laparoscopic Donor Nephrectomy

Laparoscopic Adrenalectomy

LIVER/BILE DUCTS/GALLBLADDER
Laparoscopic Cholecystectomy (Removal of the gall

bladder)

Laparoscopic Common Bile Duct Exploration

Laparoscopic Liver Biopsy

Laparoscopic Hepatectomy (Removal of a segment of

the liver)

Laparoscopic Liver Cyst Drainage/Removal

Laparoscopic Radiofrequency Ablation of Liver

Tumors

Pancreas

Laparoscopic Pancreatectomy (Resection of a segment of pancreas for benign/malignant disease)

Laparoscopic Pseudocystojejunostomy/

Pseudocystogastrostomy (Drainage of

Pancreatic Cyst)

SPINE

Laparoscopic Anterior Spinal Fusion

SPLEEN

Laparoscopic Splenectomy

Sтомасн

Laparoscopic Highly Selective Vagotomy (For treat

ment of duodenal ulcers)

Laparoscopic Truncal Vagotomy and Pyloroplasty

Laparoscopic Gastrectomy Partial/Total (Resection for benign and malignant disease)

Laparoscopic Gastrojejunostomy

Laparoscopic Gastrostomy

OTHER

Diagnostic Laparoscopy

Laparoscopic Peritoneal Dialysis Catheter Placement

Laparoscopic Mesenteric/Retroperitoneal Lymph Node

Laparoscopic Omental Flap