

BSSG) Bariatric Surgery Support Group

Meeting Held at N1 City Rooms. Board Room, Medpark 2, 3rd Floor, Douglas Syfrid Street, Goodwood.

Date: 20.08.19 at 6:00pm

Please save my cell number on your phone in order to receive any broadcast messages from me: 073 141 2580 - Bambine

Information and Notes

As noted down in my non-professional understanding of everything discussed at the meeting $^{\circ}$



Meeting attended by Committee: Bambine Rogers (073-141-2580) and Dr. Potgieter

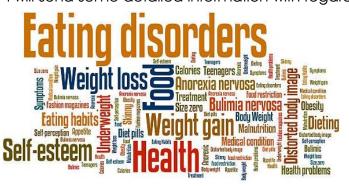


Members are please asked to suggest some ideas of topics that you would want to hear about or to be discussed. This will give us a better idea of what to prepare for meetings. I can then let you know of an agenda so that you can prepare any questions you might have on the topics to be discussed for our Doctors. I have attached a quick questionnaire for you to fill in along with this email. https://forms.gle/3rZQkiiexqWx7FAWA

It will take you just a minute or so to do. We try hard to make the meetings interesting, but can do so much better if we could just get some feedback from members as to what topics are needing to be discussed and are of interest to you.

Much of the meeting was about the differences between a sleeve and Bypass and weight regain after surgery.

I will send some detailed information with regards to that probably next week.



Doctor discussed the difference between an **Eating** disorder and **Disordered eating**:

- Disordered eating can be anything from Staying on liquids, soft eating syndrome, grazing, night eating, eating when vou're full.
 - Eating disorders are things like Anorexia, bulimia.

I have found a nice article and pasted it below

It's pretty easy to diagnose a full-blown eating disorder like Anorexia or Bulimia Nervosa. But more subtle forms of disordered eating are difficult to pinpoint. In our culture there is an obsession with size and weight, diet and exercise--the pervasiveness of disordered eating is astounding.

There are four diagnoses of eating disorders in The Diagnostic and Statistical Manual of Mental Disorders-V (DSM-V), Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder, and Eating Disorder Not Otherwise Specified. Specific diagnostic criteria are listed for each of the four diagnoses. However, falling short of meeting these criteria does not mean a person is maintaining a healthy relationship with food and weight. Individuals who demonstrate disordered eating may still be at risk both physically and emotionally.

Defining and recognizing disordered eating is a complicated issue. What are the signs and symptoms of disordered eating? How do you distinguish disordered eating from an actual eating disorder or even from more normative dieting behaviors? And what can be done to treat these behaviors once they become a problem?

Signs and Symptoms of Disordered Eating

Symptoms of disordered eating may include behavior commonly associated with eating disorders, such as food restriction, binge eating, purging (via self induced vomiting or excessive exercise, and use of diet pills and/ or laxatives). However, disordered eating might also include:



Self worth or self esteem based highly or even exclusively on body shape and weight.

A disturbance in the way one experiences their body i.e. a person who falls in a healthy weight range, but continues to feel that they are overweight

Excessive or rigid exercise routine

Obsessive calorie counting

Anxiety about certain foods or food groups

A rigid approach to eating, such as only eating certain foods, inflexible meal times, refusal to eat in restaurants or outside of one's own home

Disordered Eating vs. Eating Disorders

What distinguishes disordered eating from a full-blown eating disorder? It is all about degree. An individual with disordered eating is often engaged in some of the same behavior as those with eating disorders, but at a lesser frequency or lower level of severity. However, disordered eating is problematic and to be taken seriously, though the symptoms might not be as extreme as those of a diagnosable eating disorder. Individuals with disordered eating may be at risk for developing a full-blown eating disorder and are more likely to have a history of depression and/ or anxiety, or be at risk for anxiety and depression at some point in the future.

Preventing and Managing Disordered Eating

Here are some things you can do to prevent or manage disordered eating:



Avoid fad or crash diet--many diets are both too restrictive in terms of both quantity and variety. This can cause a feeling of deprivation and possibly lead to binge eating. It is healthier to adopt a more inclusive meal plan in which all foods are incorporated in moderation.

Set healthy limits on exercise and focus on physical activities that are enjoyable. For example, it's preferable to take a yoga class instead of staying on the elliptical machine until you burn a certain number of calories.

Stop negative body talk--be mindful of overly critical talk about yourself or your body. Throw away the scale--people with disordered eating often weight themselves daily or multiple times per day.

<u>Treating Disordered Eating</u>

The relationship we have with our bodies, as well as how we experience our size and shape is complex emotionally and physically. Difficulties with self-esteem and body image are common among those with and without eating disorders. Psychotherapy can help people understand these complex relationships, achieve body acceptance, and explore the relationship patterns and other psychological issues that contribute to the disordered eating. In addition, a nutritionist, who specializes in eating disorders and adopts a non-diet approach to food and exercise, can also be a good resource, particularly with respect to increasing attention to the body's natural hunger/fullness cues.

This post is from the Eating Disorders, Compulsions and Addictions Service (EDCAS) of the William Alanson White Institute in recognition of National Eating Disorders Awareness Week (February 23th through March 1th).

Doctor re-iterated how important it is to follow up with your Dietician Post surgery, even just to touch base, get back on track and to see if you might have developed disordered eating.

Thank you to all those who attended the meeting. <u>NEXT MEETING</u>: 17th <u>September at the Durbanville Medi Clinic</u>, 45 Wellington Rd, Durbanville at 6:00pm



Please fill in and complete the attached form for us. https://forms.gle/3rZQkiiexqWx7FAWA

Feedback always appreciated on any issues discussed at the meeting and or questions anyone might have. bambinerogers@gmail.com
073 141 2580

Just a reminder



This Bariatric Support group was started many years ago (in 2008). There are some other support groups in the Western Cape who gives support to patients by other surgeons. We would just like to stress that our particular support group is exclusively for patients of Dr. Potgietter and Dr. Swanepoel only. Please feel free to invite anyone you might know that are interested in this procedure to come and find out more information, they are very welcome to do so... The support after surgery is only for Dr. Swanepoel and Dr. Potgieters patients.