

Surgery

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“There’s nothing easy about this,” Fishman said. “It’s not like you don’t have to make any changes, it’s not like you wake up from surgery and all of a sudden the weight just falls off. There is a certain responsibility and you have to take ownership of it.”

More than 36 percent of adults and more than 17 percent of youth are obese, according to the Centers for Disease Control and Prevention. Fishman called it an epidemic, and cited exponential increases in the number of people with BMIs over 30, and people with BMIs over 50, between 2001 and 2010. A BMI, or body mass index, is a ratio of weight-to-height, with 18-25 considered healthy and 25 to 30 considered overweight.

“Our country is getting bigger at a faster rate than ever before,” Fishman said.

That’s also concerning because obesity is associated with a number of other conditions. Fishman said research has found the risk of developing cancer for a person with a BMI over 40 is about twice that of the general population. And it also can lead to migraines, depression and other chronic conditions such as high blood pressure, high cholesterol and diabetes.

Nick Lewyckyj never let his weight define him, but at 17, it was costing him his teenage years — and years of life. While the Lower Moreland resident was healthy at the time, his doctors at what is now Abington Hospital-Jefferson Health told him he would be dead by 35 if something didn’t change.

“That’s what kind of threw me for a loop,” said Lewyckyj, now 22. “I was defeated because I would lose weight here and there ... but then I would just gain it back.”

Lewyckyj said he tried everything, but exercise was difficult. “Being 520 pounds, it’s kind of hard to move around,” he said.

Dr. Gintas Antanavicius, associate director of Abington’s Institute for Metabolic and Bariatric Surgery, which has a pediatric division, said bariatric surgery is less commonly considered for young people, but it is an option generally for those in their late teens like Lewyckyj was in 2011.

At that time, Lewyckyj had a sleeve gastrectomy, in which 80 percent of the stomach is removed to reduce the amount of food ingested, leaving only a portion about the size and shape of a banana.

Two years later and 150 pounds lighter, Lewyckyj got a duodenal switch, which involves rerouting parts of the small intestines to reduce the absorption of food. He’s now down to 205



WILLIAM THOMAS CAIN / FOR THE INTELLIGENCER

Janessa McCracken, 36, of Lower Salford, holds up the jeans she wore when she weighed 300 pounds as she speaks about the bariatric surgery she had one year ago that helped her lose 150 pounds.



CONTRIBUTED

McCracken is surrounded by her family on her wedding day.

pounds and called weight-loss surgery “the greatest decision I ever made.”

McCracken also was worried about her future when she decided to get bariatric surgery. Her struggle with weight began at age 18, when she was diagnosed with infectious mononucleosis, also known as mono. Unable to go to school or exercise, McCracken gained weight as hurtful rumors circulated that she was pregnant.

She also said she tried everything to lose weight, from meal plans and diet fads, to prescription medications and exercise regimens.

“But, with that, I never fixed what my real issue was, and my real issue was not food,” she said, noting that therapy has helped her get past her hurt. “My real issue was more myself, and being happy with the person that I was and being more in control of the person I was. Food was my go-to for how to handle all of that.”

After trying to have a baby and getting blood work that signaled trouble for her cholesterol and blood sugar levels, McCracken went to an informational meeting on bariatric surgery presented by Fishman at Grand View.

“Dr. Fishman probably has no idea exactly how much of an impact he really had on me,” McCracken said. “I remember walking into that (meeting) room at one of the lowest points of my life and coming out of that room, calling my husband and telling him that I was going to have the surgery.”

Grand View launched its bariatric program in West

Rockhill in January 2015 and the surgeries began a few months later. The program offers three surgical options: gastric banding, which involves placing an inflatable band around the stomach to reduce its size; gastric bypass, which involves rerouting the small intestine and attaching it to a smaller portion of the stomach; and a sleeve gastrectomy, which is what McCracken chose.

Fishman said he’s performed about 60 surgeries at Grand View, and next year, the hospital plans to apply for accreditation as a center for excellence in bariatric surgery by the American Society for Metabolic and the Bariatric Surgery.

The sleeve has become more popular in recent years and Fishman said he hasn’t put a gastric band in a patient in about five years as people don’t like having a foreign object inside them, and it requires maintenance to stay inflated.

With the sleeve gastrectomy, the body burns more energy, Fishman said, and — coupled with eating less — it results in significant weight loss without the need to reroute the small intestine. Research also has shown the surgery can cure several associated diseases, including diabetes, Fishman said.

“We’re not meant to carry that much weight, so when we do, it stresses our body and it makes things go out of whack and that’s when we start developing medical problems,” he explained. “And that’s why when we start losing the weight, those medical problems go away because our

body sort of figures out how to work again.”

Many insurance companies cover bariatric surgery, but require patients be above a certain BMI or have some medical problems to be eligible for it. They also typically require patients to participate in nutrition and diet counseling and complete a psychiatric evaluation before the surgery.

Fishman said the evaluation is used to look at life stressors that could make it hard for patients to focus on themselves and their success after surgery. In Grand View’s program, patients also come back for follow-up visits every year to help them stay accountable and avoid regaining weight.

A self-described perfectionist, McCracken diligently followed the advice of Fishman and her nutritionist to achieve her weight goal of 160 pounds.

“I wanted to be Dr. Fishman’s favorite patient,” she admitted, laughing. “I was at the point where I was like, if I am cutting out my stomach, I am not going to fail.”

McCracken had to relearn how and what to eat, and sometimes her body said “no.” Since her stomach is so much smaller and fills up so much faster, she has to stop drinking liquids about 20 minutes before a meal.

After surgery, some patients also find they have loose, sagging skin that continues to affect their quality of life and health, Fishman said, adding that it also can cause problems with infections and mobility.

Lewyckyj had plastic surgery in September to remove 10 pounds of extra skin on his stomach, but it took about a year and a half of fighting for his insurance to cover it. He’s hoping to have surgery again to remove the skin on his legs.

“It’s very uncomfortable,” he said.

The mind also takes a little longer to adjust after surgery, McCracken said.

“When I look in the mirror, I can still see the person I was. So if I didn’t have pants that literally (show) the number was smaller, I would probably still think I was that other person,” McCracken said.

It was hard at times, McCracken acknowledged, but having a support team at home and at Grand View, including regular follow-ups with Fishman, got her through. She wants to do the same for other people who have had the surgery and started a blog about her experience. She also plans to become certified in health and wellness coaching.

“I honestly feel like I could change the world, which is a very bold statement,” McCracken said. “But I feel like if I can help even just one person I will have changed at least one person’s world.”

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Mold

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Heiland said the building doesn’t have any base flashing and when rain hits the side of the building “it gets in and there’s no way for it to get out.”

Magnum Inc., the general contractor, is recommending removing the bricks and installing a moisture barrier and repairing the window flashing. Reinstalling the bricks is labor-intensive, Heiland said, which increases the cost.

A less costly option would be to replace the brick with a metal panel. A dollar amount will be provided to the board by its Dec. 13 meeting.

“We’re looking for a more cost-effective solution,” said Chris Berdnik, the district’s business manager.

“We bought the building because it was brick,” Lynch said. “I’m with Mr. Adams now. Board it up.”

Miller, Pollock and Michael Hartline

suggested tabling a decision and rebidding the work, hoping to get a better price.

“Put a bid on the street, we may get lucky,” Hartline said.

Miller added that he didn’t see a need for an architect on the mold issue as their fee adds to the cost. “I don’t see any reasons why we should be paying a penalty for mold remediation,” he said.

But David Shafter, the board’s vice president, said “there’s too much risk to bring in another contractor.” Shafter is a financial analyst with the Camden City School District and a former business manager with the East Windsor Regional School District, also in New Jersey.

Miller, however, wasn’t satisfied. “I think we need a fresh set of eyes on the project. I don’t have confidence in what I’m seeing.”

The board tabled any decision until Dec. 13.

“Two more weeks is not going to make or break the project,” Berdnik said.

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Correction

The EPA health advisory level for perfluorooctanoic acid (PFOA) and perfluorooctane sulfonate (PFOS) contamination is 70 parts per trillion for both chemicals. Incorrect information appeared in a story in Thursday’s edition.

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Pick 4: 3-2-4-4
Cash 5: 3-6-30-31-42
Xtra: 2
Pick 6: 6-9-27-37-39-48
Xtra: 4
Midday Pick 3: 0-4-1
Midday Pick 4: 3-4-0-1
5 Card Cash:
4H 1D 1C 2C 8C

PENNSYLVANIA

Pick 2 Day: 5-8, Wild: 0
Pick 2 Evening: 4-6, Wild: 7
Pick 3 Day: 4-4-9, Wild: 0
Pick 3 Evening: 0-6-5, Wild: 7
Pick 4 Day: 9-2-7-8, Wild: 0
Pick 4 Evening: 5-9-6-4, Wild: 7
Pick 5 Day: 7-6-4-2-5, Wild: 0
Pick 5 Evening: 3-2-6-2-2, Wild: 7
Cash 5: 2-12-18-24-38
Match 6: 16-17-19-21-31-32
Treasure Hunt: 3-19-27-29-30

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