



# Weight Regain Orientation

Bariatric Surgery Program

# Today's Topics

## ➤ Why does weight regain happen after bariatric surgery?

## ➤ Weight management options:

- 1:1 Clinician Appointments
- Psychosocial Group Sessions
- Bariatric Medical Program
- Obesity Medications (OMs)
- UHN Cardiac Rehab Exercise Program
- Additional surgery

## ➤ Things you can do right away



# Guidelines

- Please **hold your questions** until our Q&A session at the end
- Please save **personal** stories and questions for clinician appointments
- It is **not permitted** to record, take photos, or screenshots of the slides. They will be shared after class.



# Why Some People Regain Weight?

- Obesity may be a chronic condition
- Weight regain is a natural feature of obesity
- Typically, 20% of patients experience weight regain after bariatric surgery
- Obesity often requires life-long management
- Often requires multiple therapies to manage weight in the long-term (eg: surgical, medical, nutritional, psychological)



# Why Some People Regain Weight?



# Why Some People Regain Weight?

## Psychosocial Factors

- Emotional eating, stress, anxiety, lack of social support
- Significant life events, loss, shift in mental health

## Lifestyle Factors

- Irregular meal pattern, unbalanced meals, and lack of physical activity
- Shift work, poor sleep, travel for work

## Environmental Factors

- Housing insecurity
- Cost of groceries and barriers to support programs
- Fewer opportunities for physical activity



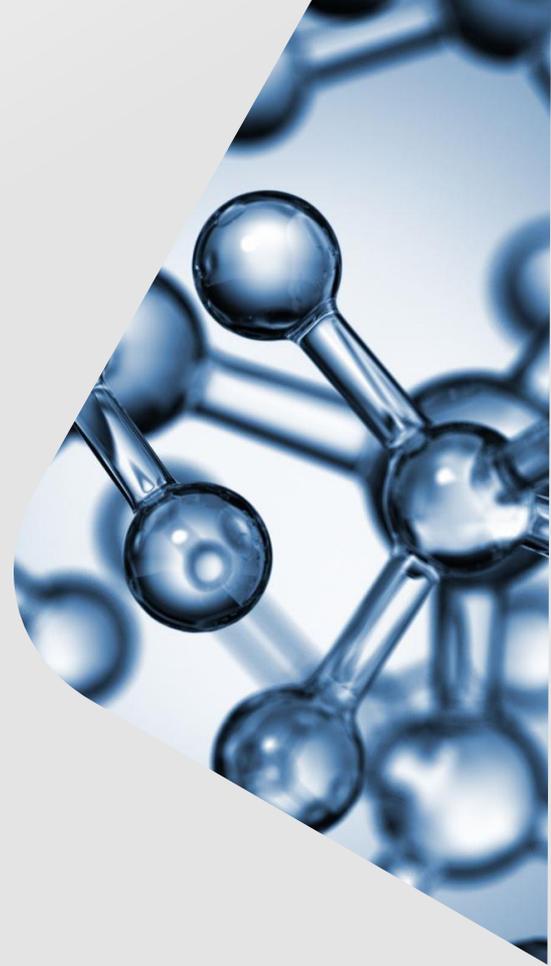
# Why Some People Regain Weight?

## Biological Factors

- Metabolic Adaptation – The body tries to return to its previous weight by slowing metabolism and increasing hunger hormones
- Hormonal & Gut Changes – Changes in gut bacteria and hormone levels can affect appetite and adipose tissue storage

## Medical/Surgical Factors

- Previous surgery that may impact weight, dilated anastomosis, hormonal challenges and endocrine disorders, fistula, etc.
- Medications that may cause weight regain



# How Much Weight Regain is Normal?

## Beyond Expected

- If you regain more than 15% from your lowest weight, you may need an assessment and medical guidance.

## For example:

- If your lowest weight was 200 lbs, and you regain more than 30 lbs, you may want to seek medical guidance.

King, W. C., Hiherman, A. S., & Courcoulas, A. P. (2020). Weight regain after bariatric surgery: a systematic literature review and comparison across studies using a large reference sample. *Surgery for Obesity and Related Diseases*, 16(8), 1133-1144.

Noria, S. F., Shelby, R. D., Atkins, K. D., Nguyen, N. T., & Gadde, K. M. (2023). Weight regain after bariatric surgery: scope of the problem, causes, prevention, and treatment. *Current diabetes reports*, 23(3), 31-42.



# What to Expect?

## Your expectations may be impacted by

- Weight biases from others
- Internal weight bias from societal messages
- Diet culture and media

## Goal of treatment

- Improve your **quality of life** and **health** conditions
- **NOT** to get you to your lowest post-op weight or an "ideal" BMI
- Further treatment may not get you to your lowest post-op weight



# Options for Weight Regain

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# Ways We Can Help?

## Treatment options depend on many factors

- Past Medical History
- Type of surgery
- Time since surgery
- Assessment by the Bariatric Team (e.g.: Surgeon, Nursing, Social Work, Psychology, Dietitian)





# 1:1 Clinician Appointments

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# 1:1 Nurse Practitioner Appointment

- **All patients** who attend Weight Regain Orientation Class will be booked for 1:1 Initial Assessment with a Nurse Practitioner (NP)
- Review surgical and medical history
- Help determine next steps to address weight regain
- Option to discuss Obesity Medications



# 1:1 Dietitian Appointment

## For patients who are:

- **Less than 5-years since surgery**
- Interested in reviewing their meal routine, eating habits, food choices, and portion sizes
- Interested in learning more about nutrition recommendations
- Having difficulty meeting nutrient requirements



Information for  
having bariatric

# 1:1 Social Work Appointment

## For patients who are:

- **Less than 5-years since surgery**
- Having trouble affording healthier food
- Having trouble with support from friends and family
- Experiencing life stressors that negatively impact their eating
- Looking for ways to improve their self-care and coping strategies
- Experiencing issues with body image
- Interested in being connected to community supports

**OR**

- **Individual CBT focused on improving eating habits:**  
Regular 1-hr appts for 7-10 weeks



# 1:1 Psychology Appointment

## For patients who are:

- **Less than 5-years since surgery**
  - Struggling with eating habits
  - Wanting tools to improve their relationship with food
  - Struggling with mental health issues after surgery (eg: anxiety, depression, etc)
  - Looking for bariatric or community support groups
- OR**
- **Individual CBT focused on improving eating habits:**  
Regular 1-hr appts for 7-10 weeks (~1-year wait list)



# 1:1 Psychiatry Appointment

## For patients who are:

- **Less than 5-years since surgery**
- Support for psychiatric conditions that maybe impacting weight
- Review of psychiatric medication





# Psychosocial Group Sessions

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# Psychosocial Group Sessions

For patients who are:

- **Less than 5-years since surgery**
- **Dialectical Behaviour Therapy (DBT) Skills Group.** Learn and practice skills for managing emotions and habits that lead to problematic eating. The group is 5 weekly 2-hour sessions.
- **Mindful Eating Group.** Learn and practice mindfulness and mindful eating skills to improve eating. This group is 9 weekly 2-hour sessions.
- **Body Image Group.** Helps with lowering distress and dissatisfaction about your body, including weight. This group is 4 weekly,2-hour sessions

Appointments are virtual via MS Teams

Wait list for all groups 6+ months



# Bariatric Webinar

For anyone pre- or post-surgery  
Topics change monthly

3rd Wednesday each month

Drop-In

6:00 to 7:00pm

Connect MS Teams

No wait list





# Bariatric Medical Program

Bariatric Surgery Program

# Bariatric Medical Program

## For patients who are:

- **More than 5-years since surgery**
- Meal Replacement (~\$600 – \$1200 / year)
- Anti-Obesity Medication (~\$260- \$750 / month)
- Weekly Group Education classes
- You will be followed by a medical doctor, dietitian, and psychosocial team member, such as a social worker or psychiatrist, if needed
- 1-year commitment with some in-person appointments

**Wait list ~6 months**





# Obesity Medications

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# Obesity Medications (OMs)

## For patients who are:

- **Less than 5-years since surgery**
- Consult family doctor or bariatric NP
- OMs are pay-out-of-pocket, if not insured, not covered by the program

## For patients who are:

- **More than 5-years since surgery**
- Consult family doctor or transfer to Bariatric Medical Program
- OMs are pay-out-of-pocket, if not insured, not covered by the BMP



# Obesity Medications (OMs)

- Expected weight loss is 5-10% for most OMs.
- Expected weight loss is 10-20% for tirzeptide (eg: Mounjaro, Zepbound)
- **OMs must be taken long-term to maintain weight loss**, just like other medications you may take to treat your chronic condition(s).
- **Check your insurance coverage first.** You may not be covered if you do not have diabetes, but can payout-of-pocket.



# Obesity Medications (OMs)

- **Tirzepatide** (eg: Mounjaro, Zepbound) - weekly injection
- **Semaglutide** (eg: Ozempic) - weekly injection
  - covered by ODB, if you have type 2 diabetes
- **Semaglutide** (eg: Wegovy) - weekly injection
- **Liraglutide** (eg: Saxenda) - daily injection
- **Bupropion-Naltrexone** (eg: Contrave) - oral tablets
  - may be useful if you struggle with emotional eating and/or cravings

**New OMs are expected to come on the market over the next few years**



# UHN Cardiac Rehab Exercise Program

# UHN Cardiac Rehab Exercise Program

## For patients who are:

- Living with cardiovascular disease (eg: angina, heart attack, arrhythmia, PVD, CHF, stroke, etc) or living with pre-diabetes or diabetes
- **Medically Supervised Exercise Program**
  - Intake assessment and exercise stress test
  - In-person, virtual, or hybrid options
  - Access to exercise equipment, gym, indoor/outdoor tracks
  - 16 weekly sessions (both exercise and education)
- **Requires referral** from family doctor, specialist, or nurse practitioner
- **More Information Available Online**  
[https://www.uhn.ca/PatientsFamilies/Health\\_Information/Health\\_Topics/Pages/brochure.aspx?itemid=820](https://www.uhn.ca/PatientsFamilies/Health_Information/Health_Topics/Pages/brochure.aspx?itemid=820)





# Additional Surgery

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# Single Anastomosis Duodenal-Ileal Bypass (SADI)

## For patients who:

- Had a sleeve gastrectomy more than 1-year ago
  - BMI>40
  - Obesity-related health issue (eg: diabetes, poor mobility, high blood pressure, sleep apnea, etc)
  - Demonstrate adherence to bariatric guidelines
- 
- SADI is a 2nd surgery to further improve your health
  - It is a malabsorptive procedure, re-routing the small bowel
  - Requires increased protein intake (120g daily)
  - Requires increased vitamin-mineral intake, multiple times daily
    - MVMs, B12, Calcium, Vitamins A, D, E, K

Those interested will attend SADI Orientation and thorough assessments.  
Approval for SADI is not guaranteed.



# Transoral Outlet Reduction (TORe)

## For patients who:

- Had a RYGB more than 1-year ago
- Experiencing weight regain
- Experience uncontrollable dumping (eg: chronic diarrhea)
- Demonstrate adherence to bariatric guidelines

## The TORe procedure is:

- Performed through the mouth (no stomach incisions)
- Reduces the size of the opening between the stomach and small intestine
- May result in an average 3.5 to 8.8% weight loss

## To qualify you will need:

- Endoscopy to assess if you are eligible
- Interdisciplinary assessment (eg: Nursing, Social Work, Psychology, Dietitian)

Approval for TORe is not guaranteed.





# Next Steps

# Preparing for Next Steps

## Reflect on your own weight regain

- When did it happen?
- Medical conditions or medications?
- Lifestyle or family changes?
- Changes in eating habits?
- Mental health challenges?
- Changes in exercise habits?



# Things You Can Do Now

- **Keep a food journal**

- Are you eating 3 meals and 2 snacks daily?
- Are you including a high protein food at each meal and snack?
- Are you including a high fibre food at each meal and snack?
- What makes it difficult?

- **Keep an activity journal**

- Are you engaging in aerobic activity at least 30 min, 5 days per week (eg: walking, aquafit, dancing, aerobic video, etc)?
- Are you engaging in resistance training at least TWICE a week?
- What makes it difficult?

- **Keep a mood journal**

- How do you feel (eg: happy, sad, angry, lonely, stressed, tired, etc)?
- Do you need support managing stress or emotions?
- What makes it difficult?



# Things You Can Do Now

- **Nuture yourself**

- Are there times when you eat for comfort, reward, or to re-energize?
- What is something you enjoy that does not involve food?

- **Plan ahead**

- Think about the week and things that might make it difficult to follow a healthy diet and physical activity
- What can you do to prepare ahead of time?

- **'Ride the Crave'**

- Acknowledge the craving --> Breathe --> Identify triggers --> Let go of judgement --> Make a plan --> Encourage yourself
- Think of other activities that you can do (e.g.: knitting, reading, walk with friend, video game, phone a friend or family member, etc.)

- **Eat Mindfully**

- Slow down, listen to your body, avoid distraction, engage all 5 senses



# Next Steps

- You will be booked with Nurse Practitioner to review your surgical and medical history in detail and determine which options are best for you.
- Check your appointment date & time in your **myUHN portal**
- **For myUHN portal support**
  - Phone 416-340-3777
  - Email: [myuhn@uhn.ca](mailto:myuhn@uhn.ca)



# Questions?

\*Please save questions about your personal health for your 1:1 appointments.

A Healthier  
World



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Hospital

**THANK YOU!**