

# INDUSTRY™

fashion • entertainment • lifestyle

B R O O K L Y N

## HOME + DESIGN

ISSUE

THE BEST  
DÉCOR  
ACCESSORIES  
DREAM HOMES  
AND INTERIOR  
DESIGN IDEAS

SPAIN'S  
SAN SEBASTIÁN  
THE KINGDOM  
OF CULTURE

THE 570S  
McCLAREN  
YOUR FIRST  
SUPERCAR

## SPRING FASHION

99

HOT PICKS  
GORGEOUS  
BLOUSES TO  
PRIMO PUMPS

PETER LUGER  
STEAK HOUSE  
THE LEGEND  
ENDURES

THE CITY  
POINT PROJECT  
REINVENTS  
DOWNTOWN

# BEN AFFLECK

NOW A DISTINGUISHED 43 YEARS OLD AND WITH AS MANY MOVIE ROLES IN THE REARVIEW, BEN DONS THE CAPE OF HIS MOST CONTROVERSIAL CHARACTER YET—A BATMAN WHO BREAKS THE CINEMATIC MOLD

INDUSTRYM.com





# SHAPE OF THINGS TO COME

ADDRESSING WEIGHT ISSUES IS JUST ONE WAY NEW YORK METHODIST HOSPITAL'S SURGICAL WEIGHT REDUCTION PROGRAM ASSISTS PATIENTS

BY MEGAN SCHADE • PHOTOS BY AMESSÉ PHOTOGRAPHY

**“Morbid obesity is a public health crisis,”** said Piotr Gorecki, M.D., chief of laparoscopic and bariatric surgery at New York Methodist Hospital. “The medical establishment is realizing that obesity is a disease and not just a condition that can be reversed through diet and exercise. Along with that shift in understanding is the appreciation for the life-changing benefits of weight reduction (bariatric) surgery. For the first time, we have a solution to morbid obesity that works—and continues to work, in the long run.”

If Dr. Gorecki seems especially animated, it is only because “I have seen the lives of far too many patients transformed for me to be ambivalent about my field,” he explained. “Patients get their lives back with these surgeries, and these lives are healthier, more active, and more engaged than they could have imagined. The field continues to expand, and with it the ability to help even more people.”

Dr. Gorecki (pronounced “Goretzky”) didn’t plan on becoming a specialist in weight loss surgery. “As I was finishing my surgical residency at New York Methodist Hospital in the mid-1990s, laparoscopic surgery was really coming into its own,” he said. (Laparoscopic surgery involves inserting tiny surgical instruments and a miniature camera through small incisions in the skin.) “I was intrigued by laparoscopy, that working through tiny openings rather than larger incisions could be a better alternative to traditional open surgery.

**Facing page:** Piotr Gorecki, M.D., chief of laparoscopic and bariatric surgery at New York Methodist Hospital.

**Right:** Dr. Gorecki confers with program coordinator, Krystyna Kabata, P.A.





Laparoscopic surgery allows for a quicker recovery times, less scarring and blood loss, and fewer post-operative complications. If there was a way to treat some conditions with this minimally invasive method, I was all for it.”

Dr. Gorecki went to the Mayo Clinic to complete a fellowship in advanced laparoscopy and then, in 2001, returned to NYM as chief of laparoscopic surgery. At the time, he says, laparoscopic surgery was fairly limited in its applications—hernia repairs, gall bladder removal, and appendectomies were the primary procedure for which it was used. But soon surgeons began to use it for more advanced intestinal and foregut surgeries, and then, eventually, for bariatric procedures.

Bariatric surgery (from the Greek *baros*, meaning “weight”) was first performed in the mid-twentieth century and became more established by the late 1960s. There are currently a variety of techniques, but the most commonly performed are the gastric bypass, lap band surgery and sleeve gastrectomy (also

known as gastric sleeve and “banana” procedure). During a gastric bypass, the surgeon creates a smaller stomach pouch and then attaches a Y-shaped section of the small intestine directly to the pouch. This allows food to bypass a large portion of the stomach and small intestine, which absorbs calories and nutrients. Lap band surgery requires the placement of an adjustable band around the stomach that manipulates the stomach’s size. In sleeve gastrectomy, the surgeon creates a small, sleeve-shaped stomach (resembling the shape and size of a banana). Weight loss is primarily stimulated by reduction of hunger and more immediate satisfaction with smaller portions of food. Currently, the “sleeve” operation is becoming the most popular, but all options are considered, and the final choice is based on an individual patient’s needs and expectations.

“Before the emergence of laparoscopic surgery, weight loss surgery was not common,” explained Dr. Gorecki. “However, once laparoscopic bariatric

surgery techniques were developed and the benefits of laparoscopy were coupled with the benefits of bariatric surgery, the field exploded. Patients were requesting it, doctors were prescribing it.

“As the field evolved, additional benefits beyond significant weight loss became apparent. These include the decrease or overall resolution of diabetes, sleep apnea, high blood pressure, arthritis, cancer risk, asthma, infertility, and many other health issues associated with obesity.”

In 2005, Dr. Gorecki established NYM’s Surgical Weight Reduction Program, one of the first in the tri-state area to be officially designated a “Center of Excellence” by the American Society of Bariatric Surgery. The Program provides treatment for severely obese patients who have not been able to achieve weight loss through non-surgical means, such as modified diet and exercise

Obesity is a complex and multifaceted disease, and the Surgical Weight Reduction Program is staffed to treat its

**Facing page:** Dr. Gorecki shares research on the benefits of bariatric surgery with his colleagues. From left: Ahmel Arshad, bariatric surgical clinical reviewer; Megan Williams, M.D.; Jeremy Weingarten, M.D., chief of pulmonary and critical care medicine; Krystyna Kabata, P.A., program coordinator; Denise Spence, R.N., nurse manager; Dr. Gorecki; Yesenia Vargas, administrative assistant; Leslie Hayes, M.D., chief of adolescent medicine; and Rachel Goodman, clinical dietician. **Right:** Dr. Gorecki discusses bariatric surgery options with a patient.

various components. In addition to Dr. Gorecki, the Program's team of specialists includes surgeon Charlene Chao, M.D., program coordinator Krystyna Kabata, P.A., nutritionists, psychologists, endocrinologists, and clinical social workers.

The increase in patient volume and the expansion of bariatric surgical procedures and techniques provide unique and fertile opportunities for study and research.

"We gather data on a number of clinical outcomes of bariatric surgery—short- and long-term weight loss, resolution of complications such as diabetes and sleep apnea," added Dr. Gorecki. "The research allows us to further improve patient satisfaction and also to decrease the length of the hospital stay. That helps us get our patients back to their lives as quickly as possible, usually after about one week."

"Dr. Gorecki is an advocate for advancing health and longevity through bariatric surgery. He has nurtured the Surgical Weight Reduction Program since its inception and it has become a nationally recognized and respected center of bariatric surgery," added Anthony Tortolani, M.D., chairman of the Department of Surgery. "We are very proud of the consistently great outcomes for our patients."

Since 2005, more than 2,000 minimally invasive bariatric surgeries have been performed at NYM, and the program continues to grow. Nationally, weight loss surgery is one of the most commonly requested elective surgeries, with close to 250,000 performed annually.

The Program hosts a monthly information session for people interested in the surgery, and a support group for post-operative patients. "These sessions allow people who are ready to make a change learn accurate clinical information about the surgical process, as well



ask questions of the post-operative group members," Dr. Gorecki explained. "The sessions are designed to help a person—pre- or post-operative—feel more comfortable, surrounded by others living a similar experience and familiar with its unique challenges."

"I don't apologize for being enthusiastic about the Surgical Weight Reduction Program here at NYM," Dr. Gorecki concluded. "So many lives have been transformed. The field of bariatric surgery continues to expand with new treatments

and new possibilities. For instance, in response to the epidemic level of obesity in children, weight loss surgery is beginning to be considered for pediatric and adolescent patients, and the initial data is very promising. The Program at NYM is and always has been at the forefront of weight loss surgery. We've been changing lives for over fifteen years, but I feel we are just getting started." ●

**New York Methodist Hospital**  
506 Sixth Street / 718.780.3000 / nym.org