

# Type 2 diabetes remission possible with minimally invasive procedure

Three years ago, Allan Cowan received news that most people dread: he was a type 2 diabetic. At the time, Cowan was 64 years old, stood 5 feet and 10 inches tall, and weighed in at a hefty 357 pounds. His body mass index (BMI) was 51, putting him in the obese range.

While Cowan, who lives in Toronto, acknowledges that he'd been the "heavy one" all his life, the diagnosis still left him shaken. "It was a shock and it scared me," Cowan recalls. Suddenly, he needed to take 6 medications, regularly test his blood, restrict his diet, lose weight, and worry about the myriad of complications that face diabetics, such as kidney disease, heart disease, and nerve damage.

But then Cowan's physician made a referral 6 months ago that would ultimately change his life—for the better. Today, Cowan weighs 290 pounds and no longer takes any diabetes-related medication. In fact, his diabetes is in remission, and it's all thanks to a weight-loss procedure that's gaining recognition as an effective treatment for type 2 diabetes: adjustable gastric banding. Considering that 90% of 2 million-plus diabetic Canadians have type 2 diabetes, this is certainly good news.

According to the Canadian Diabetes Association, diabetes "occurs when the pancreas does not produce enough insulin or when the body does not effectively use the insulin that is produced." A strong link exists between obesity and the onset of type 2 diabetes. The Public Health Agency of Canada estimates that at least half of all cases of type 2 diabetes could be prevented if adult weight gain was avoided.

## Adjustable gastric banding: an effective therapy for type 2 diabetes

The results of a study called "Adjustable Gastric Banding and Conventional Therapy for Type 2 Diabetes," which were published in *The Journal of the American Medical Association (JAMA)* last January, were encouraging. While the authors of the study agreed that the results needed "to be confirmed

in a larger, more diverse population and have long-term efficacy assessed," the study concluded that, "participants randomized to surgical therapy were more likely to achieve remission of type 2 diabetes through greater weight loss."

The study further emphasized that type 2 diabetes, although typically thought of as a "lifestyle" disease, responded better to the weight loss surgery than lifestyle changes since "the degree of weight loss, not the method, appears to be the major driver of glycemic improvement and diabetes remission in obese participants."

## Slimband™: laparoscopic implantation of an adjustable gastric band

As studies such as the one in *JAMA* suggest, adjustable gastric banding provides patients with a better chance of attaining dramatic weight loss than they would otherwise be able to attain through dieting and exercise alone. And because adjustable gastric banding is performed through a minimally invasive laparoscopic procedure, incision marks are decreased and patient recovery periods are reduced.

Allan Cowan's physician referred him to Slimband™ ([www.slimband.com](http://www.slimband.com)), which is based out of Prince Arthur Medical Clinic in downtown Toronto. Cowan says the fact that Slimband™ is safer than traditional gastric bypass surgery and is fully reversible were the main reasons he opted to have the Slimband™ procedure. He booked his surgery 2 weeks after his initial consultation.

## How Slimband™ works

Unlike the better-known gastric bypass surgery, the Slimband™ procedure doesn't require intestinal re-routing, it's treated as an ambulatory surgery, and it's reversible. Gastric bypass is a more complex operation and involves a longer recovery period (4 to 12 weeks compared to 2 to 4 days) and results in significant scarring.

Slimband™, on the other hand, is a restrictive implant. The new gastric pouch atop the stomach holds approximately

half a cup of food at a time and helps empty food into the lower portion of the stomach at a delayed pace, which produces a satiety-induced effect to control hunger. The restriction encourages the patient to eat in smaller quantities.

Weight loss results vary from patient to patient. In the immediate post-op period, patients tend to lose weight quickly. Once the patient begins processing solids, weight loss averages 1 to 2 pounds per week. While an adjustable gastric band provides enormous help in losing weight, the patient still needs to adopt healthy eating habits as well as an exercise regimen to experience the best results.

One of the reasons Slimband™ patients experience so much success (over 6 years, more than 1500 patients have been treated) is because of its long-term commitment to patients, which includes an all-inclusive, 3 year support program.

Dr. Patrick Yau, MD, FRCS (C), Canada's leading specialist in advanced laparoscopic surgery and a prominent expert in the field of bariatric surgery, is Slimband's chief surgeon. Yau says, "Proper nutrition and exercise are important tools in any weight loss program. The difference between Slimband™ and many other facilities that provide adjustable gastric band procedures is the long-term counsel we offer our patients for three years post-op, including nutrition, seminars, support groups, fitness and workshops."

Allan Cowan experienced the Slimband™ difference firsthand, noting that all the staff members have been—and continue to be—kind, helpful, and friendly. 3 months after the procedure, Cowan's doctor told him that he no longer needed to take his diabetes medication. Today, 4 months post-op, Cowan has lost 43 percent of his excess body weight, and he says he feels healthier, has more energy, and can breathe more easily. "I would recommend Slimband™ to anyone who has diabetes," Cowan adds.

To learn more about how Slimband™ can effectively treat type 2 diabetes, visit [www.slimband.com/diabetes](http://www.slimband.com/diabetes)