

N E W S R E L E A S E



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Lourdes Burlington Physician Earns Nationwide Reputation for Bariatric Surgery

Willingboro, NJ — Imagine throwing up after nearly every meal for 21 years and still gaining weight uncontrollably. Page 1 of 2

Stephanie Hopper of Murphy, North Carolina was 15 years old and weighed 256 pounds when she had a vertical banded gastroplasty, a procedure that creates a small stomach pouch to reduce food intake and thereby induce weight loss. Hopper dropped 86 pounds, but almost immediately after the surgery, she began throwing up after meals.

“The only food I could keep down were carbs, which are not very good for you,” she said. “I had to have something done. I was miserable. I had ballooned up to 368 pounds.”

In June 2007, Hopper’s husband underwent successful bariatric surgery. His surgeon would not perform another procedure on Hopper, but suggested she look on the Web site obesityhelp.com. She found David Greenbaum, M.D., Medical Director of the Bariatric Surgery Program at Lourdes Medical Center of Burlington County.

“Dr. Greenbaum was the only surgeon who picked up the phone and called me personally and answered my questions. I just clicked with him immediately,” she said.

Hopper traveled to Dr. Greenbaum’s Willingboro office, and in April he performed a “revision,” converting the previous operation to a duodenal switch, removing two-thirds of the stomach and then bypassing a large portion of the small intestine. In two months, Hopper, 36, has lost 50 pounds and has not thrown up once.

Revisions are becoming increasingly necessary today as the number of weight-loss operations has increased from about 20,000 per year 10 years ago to between 150,000 and 200,000 annually now, according to Dr. Greenbaum.

“Even though the results are becoming more standardized and better today, there will always be a certain percentage of patients who fail weight-loss surgery for one reason or another. Even if it is only 10 or 20 percent, which would be quite good, that means that there could be as many as 40,000 people who fail their initial weight-loss operation and would benefit from a surgical revision,” he said.

Indeed, Dr. Greenbaum, accredited by the American Society for Metabolic and Bariatric Surgery and the Surgical Review Corporation, has developed a nationwide reputation for performing revisional surgery. Patients have traveled from up and down the East Coast and as far as Chicago to see Dr. Greenbaum. Like Hopper, many of these patients have learned about Dr. Greenbaum from obesityhelp.com, which features physician profiles and reviews and forums on procedures such as revisions.

“Dr. Greenbaum spent an hour and a half with me on the phone. You’re lucky if you get 10 minutes with your doctor. He went through the procedure backwards and forwards with me,” said Lori Bradshaw, 33, of Chicago. “I knew before I got off the phone he would be my surgeon.”

Bradshaw, whose duodenal switch corrected a procedure performed nine years ago, added, “There are quite a few of us who have traveled far and wide just to go to him.”

Dr. Greenbaum said many surgeons shy away from revisional surgery because the risk of serious complications is high.

“Performing even the most complex weight-loss operation is not as potentially risky as performing a revision. So, finding the appropriate weight-loss surgeon is very important,” explained Dr. Greenbaum. “But, once you are in the situation where you failed the initial weight-loss operation, you are now in a much more difficult situation and this requires finding someone who is very well versed in revisional surgery or the likelihood of having a less-than-satisfactory result is quite high. The more complex the operation, the more important it is to have the appropriate surgeon, and revisional surgery applies here.”

Dr. Greenbaum has established a special approach to meet the needs of his long-distance patients. He requires patients to remain in the area for 10-to-14 days following surgery to ensure that serious complications do not occur, and then sets up telephone interviews at similar times as he would if the patients were local.

“I discuss everything over the phone, and also answer questions by e-mail. I keep in touch with their family physician, including sending information on how to care for surgical weight-loss patient,” Dr. Greenbaum said. “I do, however, request that patients return annually for check-ups.”

Dr. Greenbaum’s patients say the phone consults, in conjunction with their hometown primary care appointments, make up for not seeing him in person.

“Dr. Greenbaum calls to check in on me,” Hopper said. “He’s been wonderful. I can’t wait to come back up next April.”

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Editors and reporters: Interviews with Dr. Greenbaum and his patients are available upon request. Photographs also are available. Or for more information, please visit <http://www.duodenalswitchdoc.com>