

Great Expectations

Is Reconstructive Surgery Really for Me?

In the 60s, and for many years following, my hair was down to my shoulders, and it was with great trepidation that I joined the 21st century and got a serious haircut. Because my hair is now salt and pepper (think George Clooney), I fully expected that the actor's hairstyle would have me looking like a movie star—not just any movie star, mind you, but Clooney himself! (I can hear you laughing and it hurts my feelings.) It turns out that even psychologists and psychotherapists are not immune from unrealistic expectations.



Patients often approach weight loss surgery in the same way that I approached my haircut. Sally* reveals in a session with me that she hoped her weight loss surgery would result not only in weight loss, but in an improved marriage. She is now thinner, but unfortunately, the problems in her marriage have compounded now that they have nowhere to hide. Fran admits to me her frustration that her weight loss has not been quicker and her belief that she would awaken from the anesthetic thinner. It is apparent that her pre- and post-surgery expectations were not grounded in reality.

How is it that patients maintain these unrealistic expectations despite the information offered during seminars and consultations? This is a syndrome that appears often in my office, and I urge prospective patients to consider and internalize the cons as well as the pros during surgical considerations. When we know what to expect, we can be more successful in dealing with the situation. Knowledge really can be power!

So, unrealistic expectations aside, let's say you have managed to lose 100 pounds (and perhaps more) through hard work and dedication. The surgery was, as promised, a powerful tool, but you deserve the credit for your hard work. Now you are celebrating reaching your goal. You had hoped to be one of the lucky ones, but you can no longer deny that you are carrying excess skin—so much that you may suffer from ulcers along your belt line or back pain because your breasts feel like baggage hanging from your neck. Were it not for the extra skin around your thighs, you should be—no, you would be—in smaller jeans.

Joan seeks consultation to explore her feelings about plastic surgery. While it is not required by the insurance company, she is lucky that her plastic surgeon has made a referral to a psychologist part of her pre-operative workup. She chooses to return for several visits to explore her motivation for, and expectations of, reconstructive surgery. She also explores

her thoughts about recovery, and perhaps most important of all, she talks about what she hopes surgery will accomplish. Despite her significant weight loss, Joan reports that her self-esteem is still poor. She is still reluctant to appear naked in front of her husband, and even though she looks good in clothing, she feels like a fraud. The risks of surgery and the cost appear to be well worth it for Joan.

Rebecca comes to me following body contouring surgery. Interestingly, although she was part of a support group, she had chosen not to mention her procedure to them. For her, speaking with her partner and surgeon extensively prior to surgery was adequate preparation for her breast reshaping. While she continues to think that her weight loss surgery was the most important health decision she ever made, this procedure runs a close second. It has improved her self-image, and the physical change, even in clothing, is remarkable.

The amount of extra skin present following significant weight loss depends on how heavy you were, how long you were heavy, how old you are and your genetic makeup. So, get off the couch and exercise. Putting a layer of toned muscle under your skin can take up some slack and give a pleasing shape. It's the only factor under your control that can affect excess skin during weight loss.

Decisions regarding plastic surgery following weight loss surgery are complex. Recovery is often more extensive and complications more prevalent than with bariatric surgery. Cost is often an issue as well, since the procedures are usually not covered by insurance. As with bariatric surgery, the potential for emotional complications exists, but referral to a psychologist is not a requirement for plastic surgery. Some surgeons recognize the tremendous potential impact on the patient's self-esteem and suggest that the patient seek a consultation, but many do not. Make a list of reasons why you want surgery and ask yourself whether achieving these goals

*All names have been changed.

is dependent upon plastic surgery. Eliminating rashes and ulcers on your skin may be accomplished through surgery, but improving your relationship with your children probably will not.

I hope that this article offers you some suggestions to consider before elective surgery. If you are lucky enough to have a supportive spouse and/or friends, you might explore your thoughts and feelings with them. If you do seek psychological consultation prior to plastic surgery, I feel certain that you will leave it better prepared. Remember that it is not the role of the psychologist or counselor to “approve” surgery for you, or to decide for you whether you should go through with it. Rather, the psychologist will help you have a full conversation in a non-judgmental setting that leads to a deeper understanding of your own thoughts and feelings.



Michael L. Sakowitz, PhD, a Clinical Psychologist, specializes in the treatment of WLS patients. He can be reached in New Jersey at 973-696-0800 or in Arizona at 602-904-3448.



Lynn C. Sakowitz, LCSW, is a Licensed Clinical Social Worker specializing in the treatment of WLS patients. She can be reached at 973-696-5668.

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