



Dr. Kahlil A. Shillingford Offers Three Options in his Specialty of Laparoscopic and Obesity Surgery

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Dr. Shillingford, who has been surgically treating patients with obesity issues since 2,000 says, “My goal is to help people achieve a long term success with controlling their weight to enjoy a more healthy life. I stress that all three of these procedures are tools. The surgeries will provide weight loss, but the other half of the story is the patient’s dedication to exercise and eating proper nutrition to maintain that weight loss.”

His office is located in suite 235 at 9960 Central Park Blvd. N in Boca Raton. He’s on the staff of West Boca Medical Center, Coral Springs Medical Center, Northwest Medical Center and North Broward Medical Center. Dr. Shillingford is a graduate of the University of Michigan Medical School. He completed his general surgery residency at the University of Maryland followed by a fellowship at the Cleveland Clinic in Florida in advanced laparoscopic and bariatric surgery.

The three surgical options are as follows:

Adjustable Gastric Band: The band is placed laparoscopically, using multiple small incisions, around the top of the stomach to restrict the amount of food that can be consumed. This procedure leads to the feeling of fullness with less food consumed. Most studies show a loss of up to 60 percent of excess weight within two years.

The Gastric Sleeve divides and removes most of the stomach. The remaining stomach, or sleeve, holds far less food and leads to a feeling of fullness with much less food. Up to 70 percent of

excess weight is the estimated loss within two years.

The Gastric Bypass involves creating a small pouch and connecting it directly to the middle portion of the small intestine (Jejunum), bypassing the rest of the stomach. This results in less food being consumed and less calories being absorbed. Weight loss from this procedure within two years is 75 to 80 percent of excess weight.

Shillingford does not tell a prospective patient which procedure to use. He says,

“I attempt to educate them on each and the choice becomes a mutual decision. For the least obese, Lap Band works best. For the morbid obese, Gastric Bypass is the most effective.

Bypass turns out to be very successful for diabetics, causing a decrease and even elimination of diabetic medicines. In fact, these surgeries are being considered and researched right now to determine if diabetics carrying normal weight could benefit.”

One of his patients was happy to share her success story with the Pelican, but asked for personal reasons not to be named. She said, “I had bariatric surgery early in May and in the few months since, I’ve lost 50 pounds and even more important, I am no longer diabetic and take no meds for diabetes. That’s really exciting to me. My dress size went from 20 to 14. I returned to my job just four weeks after my surgery and I feel wonderful. Asked about old temptations, she says, “It’s not a problem to me. I’m in sales so I walk around for eight hours a day. That’s my exercise. I used to drink up to 10 diet cokes a day and now I drink water or mineral water. I eat much less which means very small portions of fruits, veggies and salads with chicken or tuna. Dr. Shillingford is a wonderful, understanding human being and I am thrilled with this change in my life. My job associates ask what I’m doing to lose all this weight, I tell them I’m eating healthy and a lot less, and that’s true.”

Every patient is evaluated by a psychologist or psychiatrist and spends a good deal of time with a nutritionist in a pre-surgery work up. Patients have a nutrition counselor available before surgery and after if there are issues.

Before any surgery is considered, potential candidates are told to attend the free information seminars. Post surgery, patients are encouraged to become part of a support group and to benefit from continued education on nutrition and exercise. Shillingford says, “Our newest support group is called Back on Track for those who feel they have strayed too far.”

He describes most of his patients as people who have tried every diet in the books, lost weight and then regained it. “These surgeries are effective for two years and after,” he says, “if the patient builds in exercise and avoids starvation by eating properly. That means eating normally, but controlling portion sizes. Protein, vegetables and fruit can be enjoyed in one meal, but the portions remain much smaller.

Asked about the loose skin that is left when the weight is lost, the doctor says age is a major factor. “If the patient is young, the elasticity of the skin will handle that issue. The older the patient, the more likely plastic surgery is needed to remove it.”

Potential patients can attend a free seminar in person or on line. Call 561-483-8840 or visit his website at www.drshillingford.com

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