

ON TRACK WITH BARIX

Support to Keep You On Track With a Healthful Lifestyle

Arthritis



Identifying the Risk Factors | Healthy Lifestyle Choices



One in three Americans suffers from arthritis or joint pain. Arthritis means inflammation of the joints. It is a chronic condition where joints become inflamed causing pain, stiffness, tenderness and sometimes a loss of function. Inflammation is a natural reaction of the body to disease or injury although if it becomes chronic, as with arthritis, it can cause tissue damage. There are more than 100 types of arthritis. The most common types include osteoarthritis, rheumatoid arthritis, and gout.

Osteoarthritis (OA), also known as degenerative joint disease, is the most common type of arthritis. It often starts subtly as the cartilage covering the end of the joint bones gradually wears away. Eventually

the bones begin to rub together, causing inflammation. Any joint can be affected, but osteoarthritis is most common in the joints of the hands, knees, hips and spine. Osteoarthritis is strongly associated with body weight. It is estimated that walking produces a force of three to six times one's body weight on the knees. That means that with each step, there is an increased force on the knees of 30-60 pounds with just 10 pounds of excess weight. This increased force stresses the knee joints and hastens the breakdown of cartilage.

In addition to excess weight, researchers at Duke University have found a potential link between the hormone leptin and OA. Leptin is well-known as an appetite regulator, but has not previously been looked at as a contributor to arthritis. Because OA occurs in the non-weight-bearing joints of the hands, researchers hypothesized that something other than excess weight must be involved. They compared mice that were leptin-deficient to normal mice. The leptin-deficient mice, although obese, did not form knee osteoarthritis. Those with normal leptin levels did. This research may lead to treatments that block the inflammatory response that causes arthritis.

Rheumatoid arthritis most commonly affects the joints of the hands, wrists and knees, but can also affect the skin, eyes and nerves. It is an autoimmune disease in which the body's immune system mistakenly attacks itself causing the joint lining to swell. The inflammation spreads to the surrounding tissues and eventually damages cartilage and bone.

Gout most often affects the big toe, knee and wrist joints. It occurs when uric acid forms needle-like crystals in the joints, causing severe pain and swelling. These attacks usually last for a few days and then resolve, although if left untreated, the attacks may become more frequent and severe. Gout is more common in men and often starts in middle age. High blood pressure and use of diuretics (water pills) increases the risk of developing gout. Obese men have three times the risk of developing gout compared to those at a healthy weight. Weight loss is an effective treatment with a weight loss of ten pounds or more decreasing the risk of gout by 40%. A diet low in purines will lower uric acid levels, decreasing the risk of future attacks.

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Although it is difficult to pinpoint specific causes of arthritis, a disease with over 100 different forms, researchers have identified some risk factors:

AGE—the risk of developing arthritis, especially osteoarthritis, increases with age, although arthritis can occur in very young children.

GENDER—in general, arthritis occurs more frequently in women than in men.

OBESITY—being overweight increases wear and tear on weight-bearing joints, increasing the risk of arthritis, especially osteoarthritis.

REPETITIVE MOVEMENT OR HEAVY LIFTING—can stress the joints and/or cause an injury, which can lead to arthritis, particularly osteoarthritis.

SEDENTARY LIFESTYLE—weak muscles leave the joints under-protected.

POOR DIETARY HABITS—can breakdown muscles and bones.

TRAUMA TO THE JOINT—can decrease the strength of or cause injury to the joint.

Although the painful swollen joints which are the hallmark of osteoarthritis don't often show up until later in life, they often develop during middle age.

IN THE NEWS

Feb. 10, 2010 — More Americans are becoming overweight or obese, exercising less, and eating unhealthy foods.

The Gallup-Healthways Well-Being Index reported in February that obesity is still on the rise with more Americans becoming overweight or obese, eating unhealthy foods and exercising less. The study showed 63.1% of Americans falling into the overweight or obese categories up from 62.2% a year before. The findings are based on telephone interviews with almost 700,000 individuals.

The survey found:

- Normal weight individuals (73.8% exercised at least one day per week) exercised more than overweight (69.9% exercised at least one day per week) or obese individuals (59.2% exercised at least one day per week).
- Obese people are least likely to eat five servings of fruits and vegetables.
- People in the obese category are least likely to say they ate healthy "all day yesterday."

Go to WebMD for more details.



To decrease your risk of developing osteoarthritis:

- Maintain a healthy weight.
- Participate in regular moderate cardio exercise.
- Strength train regularly to maintain muscle strength.
- Avoid repetitive actions that cause trauma.
- Choose a healthy well-rounded diet.

Excess weight is a major predictor of osteoarthritis, increasing both its development and progression. Weight loss can significantly decrease the symptoms of osteoarthritis. Bariatric surgery for weight loss has a significant impact on obesity-related arthritis. The American Society for Metabolic and Bariatric Surgery reports that

41% to 76% of degenerative joint disease and 77% of gout is resolved after weight loss from bariatric surgery.

There are no specific foods that are known to prevent or treat arthritis, (with the exception of a low purine diet to treat gout). Supplements have had conflicting results in scientific studies. Methyl sulfonylmethane (MSM), glucosamine, chondroitin, and SAMe have shown the greatest promise. Discuss supplements with your doctor. Some supplements may interact with prescription or over-the-counter medications. Before having surgery, inform the surgeon of any supplements you are taking.

When the world says,
"Give up,"
Hope whispers,
"Try it one more time."

Author Unknown

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CONSIDERING SURGERY

You've met the surgeon and learned more about the surgery at your consultation. You may be ready to have surgery and start your new life tomorrow. However, for most there are a few more steps that still need to be completed. This time will be busy, getting all of your ducks in a row with your insurance company and completing medical clearances. Here is an idea of what still needs to be done. Keep in mind that there are differences in insurance company requirements and medical clearances required (depending upon your health status). The group practice can help to clarify any questions that arise. They are there to support you as you count down to surgery.

INSURANCE

Commercial Insurance:

The information collected at the consultation is sent to our insurance department. Once our insurance department has received documentation that you have met your insurance company's requirements (the requirements vary from insurance company to insurance company), they will request a provisional insurance approval letter from your insurance company. This letter will indicate that they agree the procedure is medically necessary. This approval can take 90–120 days. You should receive a copy of this approval letter from your insurance company. Please call your insurance coordinator at 1-800-282-0066 with questions regarding the INSURANCE APPROVAL. After receiving this approval letter, we will talk to your insurance company and determine your benefits and your financial responsibility for this surgery. Because you are responsible for any amount not covered by your insurance company, you should also research your benefits, deductible and out-of-pocket expenses.



Private Payment Option: For those without commercial insurance or with a direct exclusion on their insurance policies. Contact your Patient Service Representative if you would like more information.

MEDICAL CLEARANCES

The medical clearances requested by your surgeon at the consultation must be completed prior to scheduling surgery. Copies of the medical clearances must be sent to us and reviewed by your surgeon. Call the group practice with questions regarding medical clearances or if you need help finding providers to complete the clearances.

If you are diagnosed with sleep apnea, you will have to treat this condition prior to surgery. Be sure to bring your c-pap machine with you on the day of surgery.

Notify the group practice if there is any change in your medical condition that causes you to seek medical care, or evaluation for a new medical condition. You must stop smoking at least 6 weeks prior to your surgery.

SURGICAL SCHEDULING

After insurance approval has been received and medical clearances have been completed, the scheduler will call you to schedule pre-admission testing and a tentative date for surgery.

PRE-ADMISSION TESTING

Pre-admission testing is typically scheduled 2 weeks prior to surgery. It includes a nursing assessment, lab tests, ultrasound of your gallbladder, nutrition counseling, pulmonary function test, chest x-ray, electrocardiogram (EKG), and physical exam by a physician at the clinic.

REWARD YOURSELF

This month, you could earn a SPECIAL GIFT for your "It Worked For Me" tips or recipes! Just submit as many recipes and "It Worked For Me" tips as you like. The most original and creative will be awarded a special gift from our online store. Include your name and contact info with your entry—make sure your recipes follow Barix nutritional guidelines. Tips must be submitted by April 30, 2010. Please send comments, ideas, recipes and "It Worked For Me" tips to Deb Hart, RD, LD at dhart@foresthealth.com.

WHAT'S NEW

Supreme Protein® has a new flavored bar to add to its line-up:



Peanut Butter Pretzel Twist. This delicious bar has 15 grams of protein, 210 calories, 3 grams of sugar, and 11 grams of sugar alcohol. This new bar joins the wildly popular Carmel Nut Chocolate Bar, Peanut Butter Crunch Bar, Rocky Road Brownie Bar and Cookies and Cream Bar.

Protein bars can be a convenient way to meet protein needs while traveling, on-the-go or in a pinch. These bars are a delicious option.

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RECONSTRUCTIVE SURGERY

To receive a **FREE RECONSTRUCTIVE SURGERY** guide, call 800-282-0066 or send us an email at rc@barixclinics.com with your name and contact information. Our reconstructive surgery program is currently performed at our centers in Michigan, Ohio, and Pennsylvania. *Call us today for more information!*

OTHERS CARE PLEASE SHARE

Please tell us about the lives that have changed because you shared your weight-loss story. Submit your story to http://www.barixclinicsstore.com/share_your_story.html. What you have to say may be printed in this publication or on our website and can serve as inspiration to all.

QUESTIONS ABOUT FINANCING YOUR SURGERY?

Call a Barix Patient
Service Representative
at 800-282-0066

RECIPES



STRAWBERRY SHORTCAKE

2 cups almond flour
(almond meal)
2 teaspoons baking powder
¼ teaspoon salt
½ cup olive or canola oil
1 cup egg substitute
⅓ cup water
¼ cup Splenda®
2 cups Cool Whip, sugar free
3 cups strawberries, fresh, sliced

Preheat oven to 350 degrees F. Spray muffin tin with non-stick cooking spray. Mix together almond meal, baking powder, salt and Splenda. Add oil and water; mix well. Fill 12 muffin tins about ½ full and bake for 15 minutes or until golden brown.

After muffins have cooled, split in half and fill with sliced strawberries and Cool Whip. Add a dollop of Cool Whip to the top and serve. Makes 12 servings.

NUTRITION INFORMATION
PER SERVING: 230 calories, 6 grams protein, 18 grams fat, 12 grams carbohydrate, 58 mg sodium.



BLUEBERRY CHEESECAKE BARS

¼ cup graham cracker crumbs
¼ cup Splenda
⅓ cup light margarine, melted
12 oz cream cheese, light, softened
⅔ cup Splenda
½ cup egg substitute
⅓ cup sour cream, fat free
2 teaspoons vanilla extract
¾ cup fresh or frozen blueberries
¼ cup apricot preserves,
no-added-sugar
1 tablespoon water

Preheat oven to 350 degrees F. Mix together graham cracker crumbs, ¼ cup Splenda® and butter. Spray an eight-inch square pan with non-stick cooking spray and press mixture evenly in the bottom. Bake 5 minutes and set aside.

Beat cream cheese at medium speed with an electric mixer until smooth. Gradually add Splenda® beating until blended. Add egg substitute and mix well. Add sour cream and vanilla, mix just until blended. Gently stir in blueberries. Pour mixture into prepared pan. Bake for 30 to 35 minutes, or until firm. Remove from oven and cool on a wire rack for 30 minutes. Cover and chill 2 hours.

Topping Directions: Combine apricot preserves and water in a small saucepan. Cook over medium heat, stirring constantly until jam melts. Spread over filling; cut into bars. Makes 20 servings.

NUTRITION INFORMATION
PER SERVING: 71 calories, 3 grams protein, 4 grams fat, 5 grams carbohydrate, 48 mg sodium.