

# CHICAGO SUN-TIMES



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NEWS



Condoleezza Rice was interviewed on CBS's "60 Minutes" Sunday. -AP

## Rice says on TV: 'I would really like' to testify but can't

National security adviser Condoleezza Rice said the principle of separation of powers keeps her from testifying publicly before the Sept. 11 panel. **Page 22**

## WHERE'S YOUR HBO?

Many Comcast cable customers lost their premium channels over the weekend and now need a converter box. **Page 6**

STARTING TODAY

### The Chicago Way

Tom McNamee's column debuts with a visit to a school that went overseas to find teaching nuns. **Page 18**



**ALSO, CLICK HERE:**  
**WE'LL SHARE OUR FAVORITE PLACES ON THE INTERNET**  
Business, **Page 58**

SPORTS

### FINAL FOUR FEVER

It's down to Georgia Tech, Oklahoma State, Duke and UConn. **Pages 104-109**

**STARTING TUESDAY:**  
**FINAL FOUR COLLECTOR'S POSTERS**

Collect all four Sun-Times NCAA playoff posters beginning Tuesday.

**HAWKS IN CRISIS**  
Part Two, **Page 100**

# CHICAGO IS NO. 2 IN HEROIN DEATHS

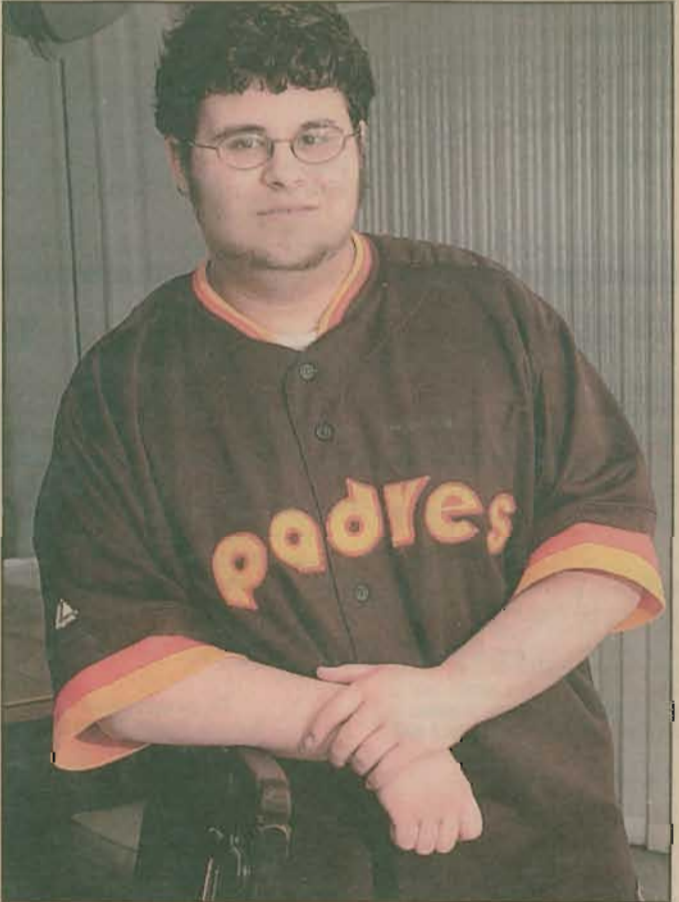
## Cops seize more drugs, more young suburbanites dying of overdoses

A new study shows the Chicago metropolitan area ranks second only to Philadelphia in the number of heroin-related deaths. The report found that heroin overdoses in the Chicago region claimed 352 lives in 2001 — a 57 percent increase from just five years earlier. Experts say one reason for the surge in deaths is the increasing purity of the drug that's available here. **STORY BY DAN ROZEK, PAGE 3**

## Obese teens take drastic step — they get stomachs stapled



-JEAN LACHAT/SUN-TIMES



-RICHARD A. CHAPMAN/SUN-TIMES

Korsica Merrell, 14, weighed 265 pounds and was tired of being called "Miss Piggy." Charlie Fabrikant, 15, weighed 350 pounds and had to quit his sports teams because he couldn't run anymore. Both teens turned to gastric bypass surgery for help losing weight. **STORIES BY JIM RITTER, PAGES 8-9.**

At 265 pounds, 14-year-old Korsica Merrell simply got tired of being called 'Miss Piggy.' Fifteen-year-old Charles Fabrikant stopped going to sporting events because he couldn't fit his 350 pounds into a stadium seat. Two teens with the same problem — and the same solution.

# Obese teens turn to surgery of last resort

Gastric bypass offers help, but long-term effects unknown

BY JIM RITTER  
Health Reporter

After her weight had climbed to 265 pounds, Korsica Merrell decided the only way to trim down was to get her stomach stapled.

But Korsica was still a kid, 14 years old. Was that too young for a gastric bypass surgery that would rearrange her digestive tract and reduce her stomach to the size of a golf ball?

Korsica's mother, Anita Merrell, had undergone the surgery herself. Anita knew how much it hurt and how difficult it would be to adjust to tiny meals like two crackers and three bites of tuna.

Day after day, Anita asked her daughter, "Are you sure you want the surgery? You see what I'm going through."

Korsica, who lives in south suburban Dolton, never wavered. She recently had the surgery at Evanston Northwestern Healthcare and already has lost more than 25 pounds.

Korsica said she insisted on the operation "so I could get smaller." She was tired of her brother calling her Miss Piggy, of not fitting into clothes, of kids talking about her weight. And she was terrified of getting diabetes, like her mother and grandmother.

"I can't stand needles," she said.

There were 103,000 weight-loss surgeries in the United States last year, a more than fivefold increase since 1993. Dr. Thomas Inge of Cincinnati Children's Hospital estimates that perhaps 1 percent of patients — about 1,000 a year — are adolescents.

Some weight-loss surgeons refuse to operate on adolescents, and many insurance companies resist paying bills for surgery and related care that total \$20,000 to \$50,000. Nevertheless, at least three Chicago area centers have performed the surgery on several dozen teens under age 18.

"An increasing number of adolescents will go through this surgery," said Korsica's surgeon, Dr. Constantine Frantzides.

Others doing adolescent weight-loss surgery include four surgeons at the WISH Center in Downers Grove and Dr. Santiago Horgan at



Korsica Merrell (left) of Dolton had gastric bypass surgery in February at age 14. Her mother, Anita Merrell, knew how little she would get to eat afterward because she has had the surgery, too. —JEAN LACHAT/SUN-TIMES

the University of Illinois at Chicago.

About 16 percent of adolescents are overweight, more than triple the rate in 1970. "We have never

seen this much obesity in teenage years before," said WISH Center surgeon Dr. Jeffrey Rosen.

Rosen said severely obese adolescents may be better off having

the surgery now, while they are still healthy, "instead of trying 20 years of diet and exercise."

Obese adolescents often suffer from depression and low self-



esteem and are more likely than obese adults to be ridiculed. "They are scarred by psychological and mental abuse," Frantzides said.

Adolescents are less set in their ways and therefore more likely to make the lifestyle changes necessary to ensure long-term success, Horgan said. "Adolescents seem to do better than adults."

But there have been no definitive studies on long-term outcomes of adolescent weight-loss surgery. Restricting food intake to less than 1,000 calories a day is great for losing weight, but is it safe for teens? An adolescent hasn't reached his or her full height, and bones, muscles and brain tissue still are growing.

"There's some development going on, and that's a reason to be cautious," said University of Chicago weight-loss surgeon Dr. John Alverdy, who doesn't operate on adolescents.

Doing surgery at an early age eliminates the possibility an adolescent could lose weight solely through diet and exercise, which everyone agrees are safer than surgery.

Many overweight adolescents are not yet suffering severe complications of obesity, such as diabetes and heart disease. Adolescent obesity "does not put the patient in imminent danger," Alverdy said. "What's the hurry?"

Alverdy said obese adolescents no doubt suffer excessive teasing. But treating this with surgery

# Patients can lose 100 pounds, but 35% gain it back

For some obese patients, not even weight-loss surgery is a permanent fix.

Patients typically lose 100 pounds or so, mostly during the first 18 months.

But even though a patient is restricted to tiny portions, it's possible to consume as much as 3,000 calories a day by constant nibbling.

Five years after a gastric bypass surgery, 35 percent of patients gain back a significant amount of weight, said Dr. John Alverdy, a University of Chicago weight-loss surgeon.

Among patients who undergo an alternative technique called Lap-Band, the five-year failure rate is as high as 50 percent, Alverdy said.

In a gastric bypass, the surgeon creates a golf ball-size pouch at the top of the stomach. A segment of

small intestine is attached to the pouch. Food bypasses most of the stomach and the first part of the small intestine. In this shortened digestive tract, fewer calories are absorbed.

The surgery can cause "dumping syndrome": Food moves too rapidly through the small intestine, resulting in nausea, weakness, sweating, faintness and perhaps diarrhea. Some patients are unable to eat foods such as red meat, milk or sugar.

Because the digestive tract does not absorb nutrients very well, patients must take vitamin and mineral supplements to reduce the risk of anemia, osteoporosis and other problems.

Other possible complications include infection, hernia, gallstones, blood clots and bowel obstruction. Estimates of the chance of dying from the surgery range from 1 in

1,000 to 1 in 50.

In Lap-Band surgery, the surgeon places a band around the upper part of the stomach. Food slowly passes from this small upper pouch through a narrow opening to the rest of the stomach.

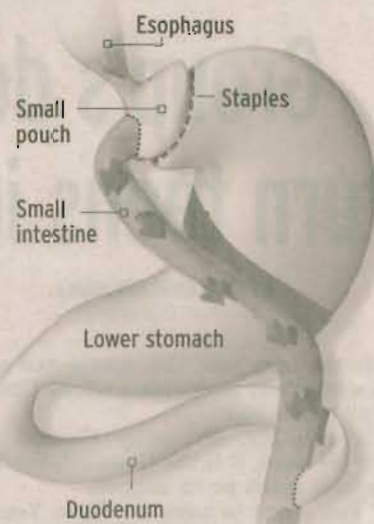
After the surgery, a doctor can inflate or deflate the band. This changes the size of the opening and therefore how much a patient is able to eat.

Lap-Band is less invasive than gastric bypass. There's a quicker recovery, and patients do not suffer nutritional deficiencies or dumping syndrome.

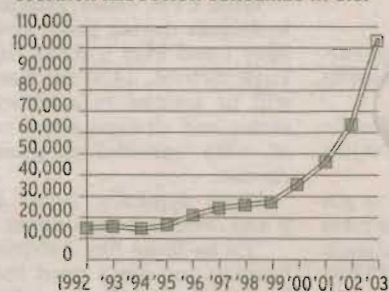
But Lap-Band does not work as well for weight loss as gastric bypass because patients suffer fewer consequences from eating too much of the wrong foods, said weight loss surgeon Dr. James Madura of Rush University Medical Center.

## GASTRIC BYPASS OPERATION

First a small stomach pouch is created with staples to restrict food intake. Next a section of the small intestine is cut and attached to the pouch to allow food to bypass the lower stomach. In order for digestive juices from the lower stomach to assist in digestion, the duodenum is reconnected to the lower section of the small intestine.



## STOMACH REDUCTION SURGERIES IN U.S.



SUN-TIMES GRAPHIC / GREG GOOD

There's an unsightly side effect to drastic weight loss — sagging skin. Outstretched arms look like wings, breasts sag, belly skin hangs to mid-thigh, and excess skin in inner thighs makes it hard to walk, said Dr. Rod Rohrich, president of the American Society of Plastic Surgeons.

Last year, plastic surgeons performed 52,000 "body contouring"

procedures to remove excess skin, and the association predicts the number will increase 36 percent this year.

Body contouring generally requires two or three major operations, each costing \$10,000 to \$15,000, and they usually aren't covered by insurance, Rohrich said.

Jim Ritter

## 'I always stuck out like a sore thumb'



Charlie Fabrikant, 15, of Buffalo Grove, has lost 80 pounds (right) since having surgery last December, when he weighed 350 pounds.

He loves baseball and basketball, but 15-year-old Charlie Fabrikant had to quit his teams because he weighed 350 pounds and couldn't run anymore.

Charlie also stopped going to sporting events because he couldn't fit in the seats, and he didn't go to parties because he felt self-conscious.

"I always stuck out like a sore thumb," said Charlie, who lives in Buffalo Grove.

But Charlie said the reason he had gastric bypass surgery at the WISH Center "wasn't for looks or appearances. It was for saving my life."

Since the Dec. 15 operation, Charlie has lost 80 pounds. He would like to get down to 180.

Charlie said he is overweight partly because of genetics and partly because he would eat too much, especially when he was depressed or in a bad mood.

Charlie's mother, Wendy, lost 75 pounds after undergoing gastric bypass surgery in 2001. Charlie said her experience "reassured me that this was the correct choice."

Jim Ritter

"seems a little draconian."

Surgeons generally agree that adults with a body mass index greater than 40 (about 80 to 110 pounds overweight, depending on height) qualify for surgery. But there are no uniform standards for adolescents, in part because there's a lack of scientific evidence.

Some doctors apply adult guidelines to adolescents. Others are stricter. Inge, of Cincinnati Children's Hospital, recommends surgery for children with a BMI greater than 50 (130 to 180 pounds

overweight). Surgery should be considered at 40 BMI for adolescents who have severe complications, such as diabetes.

Inge said surgery should be performed only after a child has reached 95 percent of adult height, generally age 13 for girls and 15 for boys.

Doctors agree surgery should be a last resort, after diet and exercise have failed.

Korsica tried to lose weight, without success. She tried Slim Fast, but the shakes "were nasty"

and didn't keep her from eating other foods, she said.

Korsica's father and two brothers are trim, but her mother said Korsica has a slow metabolism. Korsica also has a weakness for fried chicken, barbecued ribs, macaroni and cheese, buttered popcorn and chocolate milk. And, she watches too much television.

Before her surgery, Korsica would lie in bed after dinner and watch TV while munching on cookies and potato chips. In summer, she would watch all day long.

"I can't live without TV," she said.

Korsica's weight did not trouble her emotionally. But physically, the pounds were taking a toll. Korsica joined the volleyball team, but she couldn't run practice laps. She couldn't walk very far, and her back, knees and calves hurt all the time.

Korsica underwent surgery Feb. 17 and was lucky to have an insurance plan that paid.

Ninety percent of gastric bypass patients lose 60 percent to 70 per-

cent of excess body weight the first year.

As Korsica loses weight, she plans to ride her bike, lift weights and perhaps join the softball team.

Korsica believes the transformation likely will make a difference when she begins dating.

"Most of the attention goes to the small girls," she said.

But her mother has some advice on that front. She tells Korsica that if a boy didn't talk to her before, "then don't bother with him now."

-RICHARD A. CHAPMAN/SUN-TIMES