PSYCHOSOCIAL FACTORS AND BARIATRIC WEIGHTLOSS

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What Are Psychological Disorders?

Distressing and dysfunctional thoughts, emotions, and/or behaviors that significantly interfere with daily living and are not considered part of normal development.

Two Classification Systems

- ICD-World Health Organization
- Diagnostic and Statistical Manual of Mental Disorders

Disorders Cont’d.

- Medical and Mental
  - Medical conditions have psychological factors
  - Psychological conditions have medical factors
    - Depression
      - Thoughts, Attitudes, Beliefs
      - Neurotransmitters (e.g. Serotonin)
    - Obesity
      - Metabolic, Thyroid, Physical Pathology
      - Thoughts, Attitudes, Beliefs
Bio-Psycho-Social

- An approach that encompasses the entire person is best.
  - Medical Treatment (Bio)
  - Psychological Treatment (Psycho)
  - Environmental Changes (Social)
- **Not** Nature *versus* Nature
- Nature *and* Nature
This is the current version of the DSM

- Provides specific diagnostic criteria for several disorders
- **AXIS-I Disorders**
  - Depression
  - Anxiety
  - Substance Abuse
- **AXIS-II Disorders**
  - Personality Disorders

Why Have a Pre-Surgical Evaluation?

- To determine if co-morbid disorders or psychosocial stressors are present that may complicate surgical outcomes.

- Patients’ behaviors following Bariatric surgery are the most predictive variable of success.

  - Psychopathology can greatly influence individuals’ behaviors

Bauchowitz et al., 2005 and Kalarchian et al., 2007
What to Expect

During your pre-surgical evaluation, you will:

- Take 2-3 hours of written tests (e.g. True/False)
  - Tests are not your enemy; They are good!
    - Less subjectivity
    - Less awkward
    - Aid with insight
- One hour face-to-face session
  - Discussion of lifestyle
  - Discussion of knowledge
  - Go over test results
  - Recommendations
Relax......

- Mental health professionals are not trying to keep you from having the surgery
- In fact, denials are rare
- The purpose is to increase the chances of a positive outcome
  - Other areas that need to be addressed
  - Skills training
  - Education
  - Symptom Reduction
Behaviors and Disorders

Depressed People may....

- Be lethargic and inactive
- Remain socially isolated
- Over / Under Sleep
- Have erratic or unhealthy eating habits
- Feel hopeless and “give-up”
- Become suicidal

Behaviors and Disorders

Anxious People may....

- Be frustrated and quick to anger
- Be fearful and less trusting
- Feel tired and sick
- Experience pain and lead restricted lifestyles
- Become depressed

General Top Predictors of Poor Bariatric Outcomes

- High Anxiety
- Emotional Lability
- Suicidality
- Poor Reality Contact
- Binge Eating
- Current Illicit Drug-Use

Think About It

- All of these make it difficult for the patient to maintain a self-care regimen
- Also, people with low stress-tolerance become more dysfunctional as psychosocial stressors become present.

Bauchowitz et al., 2005
Sarwer et al., 2006
Most Common Disorders

- Obese Patients and Psychological Disorders
  - 27.3%-41.8% have Axis-I (Mood Disorders most common)
  - Depression most common
  - Anxiety Second most common
  - Binge-Eating ranges from 10%-50%

Surgery Is a Stressor

- Lifestyle Changes
- Eating Changes
- Family Changes
- You’ll Look Different

Complications

• The better you cope with these, the more positive the outcomes are likely to be
Good News!

- Some evidence has shown that Bariatric Surgery improves:

  - Depressive Symptoms
  - Anxiety Symptoms

Gernry et al., 1984; Gertler & Ramsey-Stewart, 1986; Larsen, 1990; and Powers et al., 1997; Hafner et al., 1990; and Larsen, 1990
<table>
<thead>
<tr>
<th>Do</th>
<th>Don’t</th>
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<tbody>
<tr>
<td>Get Informed</td>
<td>Avoid Information</td>
</tr>
<tr>
<td>Talk to your doctor</td>
<td>Avoid your doctor</td>
</tr>
<tr>
<td>Involve your family</td>
<td>“Go-it” alone</td>
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<tr>
<td>Ask, Ask, Ask</td>
<td>Smile and Nod</td>
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<td>Go to support groups</td>
<td>Oppose your doctor</td>
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<td>Follow doctor’s orders</td>
<td>Kid yourself about treatment</td>
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<td>Seek treatment</td>
<td>“Fake Good”</td>
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<td>Be honest</td>
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Treatment

- Psychotherapy
  - Cognitive Behavioral Therapy (CBT)
    - Events-Thoughts-Emotions
    - Patient Highly Involved
    - Relatively Brief
    - Here-and-now focused

- Medications
  - SSRI’s
  - Anxiolytics
  - Mood Stablizers
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References

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