

Making Obesity Disappear:

Helping Patients Who Struggle with Weight Gain

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Are you ever asked what "internal medicine" is?

Often! At least once a week for the last 20 years. I came up with a pat answer: Internal medicine is the medical specialty that deals with the skin and everything inside of it."

How has your field or the way you practice medicine changed over the last two decades?

All specialties of medicine constantly change. As long as humans maintain their curious nature, there will always be new discoveries and consequently more to learn. When I was in medical school, my anatomy professor told me to read at least 30 minutes of medicine every day. I have tried to maintain this practice, but there is still so much to learn! Mainly, the constant addition of new technology and the unraveling of the double helix have changed the way that we practice medicine.

How do you think that the improved understanding of the genetics of disease will change medicine? Do you think that people will be judged by their genomes?

That is certainly a hot topic in medicine. I think that people will want to believe that if their genes are good that they will be impervious to disease. And, on the other side of the coin, there may be people who are told at a young age that they will die in their 40s from a heart attack, so they will live their whole lives as though they will die by 45. But, the truth is, humans are more than their genes! Certainly, we can carry certain genetic determinants, but our behaviors and even our inner strength are capable of altering the expression of these potentially deleterious genes.

Are you talking about the difference between phenotype and genotype?

Yes. Someone can have perfectly good genes but eat badly, smoke, never get exercise, and die at an early age of CAD or cancer. In other words, an individual can have

a perfectly good genotype but their phenotype can be unhealthy. And, conversely, there will be individuals like Stephen Hawking who should have passed on 20 years ago, but whose mental strength seems to keep him alive.

You mentioned several unhealthy behaviors as being a cause of early death. Smoking has certainly become less popular over the last 20 years. Is there a new medical public enemy number one?

Obesity! It is absolutely an epidemic. Obesity related diseases such as diabetes mellitus II, hypertension and hyperlipidemia are now found in elementary school children. Twenty-five years ago, these disease states would only have been expected in mature and likely obese, adults. Truly, nearly 50 percent of pre-teens and teens are clinically obese. It's amazing and does not bode well for future rates of CAD and CVA.

Do you have any suggestions to put a halt to the obesity epidemic?

Diet and exercise! For several 100,000 years our ancestors lived as hunter gatherers. Thus, fresh fruit, vegetables and lean meats are what we are supposed to eat. Fatty foods, fried foods, soda, juice and processed carbohydrates (e.g. bread, noodles, pasta, tortillas) are definitely our health enemies! But, even armed with the knowledge of what foods are good and which activities are healthy, most patients will not follow these suggestions without substantial persuasion.

Do patients often claim that they can never lose weight, and that they have tried everything?

Yes, I hear this claim daily. But, when I historically dissect what the patient is saying, I typically find that attempts at weight loss are short term. Truly, for long term weight loss, diet and exercise must be addressed for the long term.



Do you think that there is a solution to lack of patient follow through in terms of weight loss and health?

I think that the easiest way to make weight loss more than "an attempt" is to have a patient enter a bariatrics program.

You mean like the lap-band?

No, not typically surgery, except in extreme cases. Bariatrics is the science of the cause, prevention and treatment of obesity. Thus, bariatrics includes not only a surgical arm, but the specialty of medical weight loss as well. With calorically controlled foods, one can stimulate fairly impressive weight loss; and, if you can get the individuals who are losing weight to begin a consistent weight loss regimen and help them to maintain a sensible and healthful diet for six to nine months, one can create lifelong healthy habits. Yes, it can take a lot of work, but even a 5 percent weight loss (sometimes only 10-20 pounds) produces measureable improvements in blood pressure, lipids and glucose levels.

Where can patients find a bariatrician?

Most major cities have practitioners who specialize in obesity and weight loss. Knowing what the future holds for my patients, I have made the decision to become board-certified in bariatrics. In fact, I have even started my own clinic for medical weight loss in Pasadena. I certainly hope that I can finally help patients find the confidence and make the lifestyle choices to be able to lose weight. Given consistent direction and follow through, motivated patients can lose 60-75 pounds without surgery.

Any further comments about obesity and health?

Ben Franklin said, "An ounce of prevention is worth a pound of cure." When it comes to health, I believe this statement could not be more truthful. Statistically, trim, athletic people have healthier, happier lives. Thus, as clinicians and as a society, we need to not only treat those who have developed obesity related disease states, but we also need to work with the youth of today so that they have a healthier tomorrow. I want to see our nation filled with robust, healthy individuals whose lives are not as often marred by disease and illness. For this dream to be a reality, we need to focus on stamping out the obesity epidemic as we once worked to combat other life threatening epidemics such as tuberculosis or polio.