

## Open Wide: New Incision-Free Procedure Helps Patients Achieve Weight Loss

May 06, 2009 | Jackie Carr

**“W**hen you’re overweight people stare at you. They make fun of you. You can see the negative reaction in their face,” said Maria Rusak, 53, resident of San Diego. “In a world where everyone is trying to be a skinny minnie, who wants to date a 350-pound girl?”

Rusak, like 15 million other Americans, suffered from obesity and related health complications such as arthritis, high blood pressure and gallstones. Nine years ago, she pursued gastric bypass surgery to lose the weight.



Rusak has lost more than 50 pounds after the ROSE procedure.

“Losing the weight felt incredible. Gaining the weight back did not,” said Rusak. “After the gastric bypass I weighed 190 pounds but then I slowly got back up to 264 pounds. I was so discouraged. The gastric bypass stopped working. ”

Weight gain after gastric bypass surgery is not uncommon. Over time, the small stomach pouch created by the surgery stretches out. More calories are consumed and the feeling of fullness after eating disappears.

“Gaining weight after gastric bypass surgery is extremely frustrating,” said Garth Jacobsen, MD, bariatric surgeon with the Center for the Treatment of Obesity at UC San Diego Medical Center. “Gastric bypass is a major surgery that alters a person’s anatomy. Patients expect the excess weight to stay off. Unfortunately, that is not always the case.”

Every year more than 100,000 US patients undergo gastric bypass surgery. More than 20 percent of these patients encounter weight regain one year after the procedure.



Rusak before gastric bypass surgery.

“There are not many options to repair a failing gastric bypass. Revision surgery is risky and other available techniques don’t have data proving sustained weight loss, until now,” said Jacobsen. “UC San Diego Medical Center now offers a minimally invasive procedure to correct the problem of weight regain by going in through the mouth.”

During an outpatient procedure, a small, flexible endoscope and tools are inserted through the mouth, down the esophagus, and into the stomach pouch. The tools, developed by USGI Medical Inc., are used to grasp, fold and stitch tissue to reduce both the diameter of the stomach opening and the volume of the stomach pouch. No cuts are made into the patient’s skin.

“My gastric bypass required a long recovery starting with a stay in the intensive care unit and ending with large scars on my abdomen. When I heard about a procedure that could tighten up my stomach without incisions, I said ‘sign me up,’” said Rusak.

“The results are immediate,” said Jacobsen. “Patients can expect to lose one to two pounds per week. The procedure has been scientifically vetted as weight loss procedure in a clinical database.

In our opinion, this is a more durable method of reducing the size of the stomach pouch—evidence we have seen in post operative clinic visits.”

The one-hour procedure, called “ROSE” (Restorative Obesity Surgery, Endolumenal) is performed on an outpatient basis. The most common side effect is a sore throat.

“I experienced weight loss right away,” said Rusak. “I have lost 50 pounds in the last eight months. I feel incredible. I am having my clothes taken in at the tailor’s. My pants are down to a size 14. I am the ‘new me’ again.”

Ideal candidates for the surgery are patients who were successful losing weight after their gastric bypass and now are regaining weight. Before the procedure, patients undergo an initial screening, followed by a series of evaluations including nutritional and dietary counseling, a full medical exam, and endoscopy.

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