

## Permission Not to Be Perfect

*The truth: Perfectionism is overrated. So give yourself a break. Here's how to find your "sweet spot"—and what to do on days that are less than sweet.*

We need to put something out there: There is no perfect weight. No perfect diet. No perfect exercise routine. What really matters is finding the things that work for you and your health...and getting back on track when you have a lapse (which is completely normal, by the way).

"A lot of people think of weight loss as all or nothing. They're perfectionists about their program," says Lisa M. Steres, PhD, a licensed clinical psychologist practicing in San Diego, California, who has special expertise in preparing patients for bariatric surgery. The problem with this black-or-white thinking, says Dr. Steres, is that when people have a setback, they completely go off their diet. A better approach? Realize that it's okay to be at 70 percent most of the time, says Dr. Steres. Here's how to make the most of that 70 percent so you can feel 100 percent good about what you're doing for yourself.

### Let the band "think" for you.

"One of the most stressful things about dieting [before LAP-BAND® surgery] was that it seemed so extreme: 'I'm going to start on Monday and not eat this or that,'" says Laura King, 33, of Haslett, Michigan, who has had her LAP-BAND® System since January 2008 and has gone from 276 pounds to 168 pounds (only 15 pounds from her goal weight). "But now my band does all my thinking for me when it comes to my diet. When I eat, my body gives me the signal if I need to stop."

### Find your own way.

King says that she hasn't given up her favorite foods; she just eats certain ones in moderation. "Ice cream is one of my favorite things," she explains. "And I still have it pretty often. I just have to make sure I also get the nutrients I need during the rest of the day." Likewise, if you don't look forward to your current workout, try something else. "The strongest predictor of what will work in the future is what has worked in the past," says Dr. Steres, who uses a "personality test" to help patients create a workable plan. Think about an activity you enjoyed when you were a kid, a teen, a 20-something—then do it (or something similar).

### Don't let lapses stop you.

"Sometimes I'll have a bad day and I'll suck on M&M's®, but I just make sure I get back on track and do my workout," says King. Don't beat yourself up about it or use it as an excuse to do more self-destructive things. Just pick up where you left off as soon as possible.

### Get in the zone.

The Red, Yellow, and Green Zones are good indicators of whether your band is adjusted properly. If you're losing at a healthy pace (based on your doctor's guidelines), keep doing what you're doing. If you are gaining weight, are often hungry, or have hit a weight-loss plateau and aren't yet at your goal, talk to your doctor about what you should do to get back on track. If you're having trouble swallowing and eating or are sliming and regurgitating often, you might need some fluid removed from your LAP-BAND®. (Sometimes tracking what you're eating helps you understand why you're not losing or gaining weight.) Let your doctor know whenever you're not in the Green Zone. Likewise, try to figure out if you're "in the zone" with workouts: If you dread them, it's time to try a different approach. If you look forward to them, you've found your fitness sweet spot.

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## Important LAP-BAND<sup>®</sup> Safety Information

**Indications:** The LAP-BAND<sup>®</sup> System is indicated for weight reduction for patients with obesity, with a Body Mass Index (BMI) of at least 40 kg/m<sup>2</sup> or a BMI of at least 30 kg/m<sup>2</sup> with one or more obesity related comorbid conditions.

It is indicated for use in adult patients who have failed more conservative weight reduction alternatives, such as supervised diet, exercise and behavior modification programs. Patients who elect to have this surgery must make the commitment to accept significant changes in their eating habits for the rest of their lives.

**Contraindications:** The LAP-BAND<sup>®</sup> System is not recommended for non-adult patients, patients with conditions that may make them poor surgical candidates or increase the risk of poor results (e.g., inflammatory or cardiopulmonary diseases, GI conditions, symptoms or family history of autoimmune disease, cirrhosis) who are unwilling or unable to comply with the required dietary restrictions, who have alcohol or drug addictions or who currently are or may be pregnant.

**Warnings:** The LAP-BAND<sup>®</sup> System is a long-term implant. Explant and replacement surgery may be required. Patients who become pregnant or severely ill, or who require more extensive nutrition, may require deflation of their bands. Anti-inflammatory agents, such as aspirin, should be used with caution and may contribute to an increased risk of band erosion.

**Adverse Events:** Placement of the LAP-BAND<sup>®</sup> System is major surgery and, as with any surgery, death can occur. Possible complications include the risks associated with the medications and methods used during surgery, the risks associated with any surgical procedure and the patient's ability to tolerate a foreign object implanted in the body.

Band slippage, erosion and deflation, reflux, obstruction of the stomach, dilation of the esophagus, infection or nausea and vomiting may occur. Reoperation may be required.

Rapid weight loss may result in complications that may require additional surgery. Deflation of the band may alleviate excessively rapid weight loss or esophageal dilation.

**Important:** For full safety information, please visit [www.Lapband.com](http://www.Lapband.com), talk with your doctor or call Allergan Product Support at 1-800-624-4261.

**CAUTION:** Rx only.