

CULTURE

I am a 47-year-old lesbian working in Portland and living in the woods west of St. Helens with Rita, my partner of 15 years. In December 1999 I had gastric bypass surgery, because at 419 pounds, I rapidly was becoming immobilized and sick from the many related complications.

It was a decision that did not come easily to me. I'd been a strong supporter of loving oneself regardless of shape or size. I gave speeches on "Fat Is a Feminist Issue" at California National Organization for Women conventions. I really believed what I preached.

And then age and my weight caught up with me. It became harder to find a job, harder to move, harder to breathe.

Rita, who's a health nut anyway, was always gently encouraging me to get healthy. I knew she loved me regardless of my size, but toward the end of my time as a malignantly obese woman, she was having to do all of the housework and yardwork, take care of our pets, help me with my personal hygiene issues and work a full-time job. It was too much for all of us.

This led to a sort of catharsis: Clearly, I was going to die if I didn't have medical intervention. And I knew another diet wasn't the answer.

F lash-forward to today, nearly two years after the gastric bypass, more commonly known as weight loss surgery. I am weighing in at 218 on a 5-foot-4 petite frame, which is considered Class II obesity.

However, many of my complications are gone. I am actively participating in life, have a great job doing public relations for the oldest law firm in Oregon and love the fact that I don't get stared at or hear rude comments about me anymore.

Other benefits include the ability to ride in smaller cars or airplanes without needing a seat belt extension, to walk more quickly, to play with my dogs and to get a new wardrobe every six months!

I owe my amazing change to Dr. Mal Fobi of Los Angeles. He created a revolutionary surgical gastric bypass to replace the old stomach-stapling procedure, which had many failures and health risks.

The Fobi Pouch removes 98 percent of the stomach, leaving a small pouch the size of the human thumb. It is hand-stitched, not stapled,



Gigi Gordon before...



...and after her surgery

Unfortunately, most insurance carriers still refuse to cover gastric bypass surgery, even though it is safer and more effective than ever before. I now no longer have sleep apnea, severe arthritis and many other health problems that plagued me.

My medical risks have reduced considerably, so one would think that footing the bill for the surgery would make much more sense to insurance companies than paying for years of procedures, drugs, etc. Most people who need this surgery have to fight their carrier for the benefit—even when it *does* claim to cover it. Something needs to change in the way obese patients are seen by insurance companies.

I also moderate a national online support group for gays and lesbians who are researching weight loss surgery, have had it or are planning to have it. (Although we do have a few men among the 137 members, I'd guess about 93 percent are women.) It seems like so much additional pressure is placed on gay men and lesbians with regard to physical appearance.

Many who have had the gastric bypass don't want to "come out" about it. The scars are explained away as gall bladder or hysterectomy surgeries.

One of the recurring themes online is body image. For many, it's the unfamiliarity of our new bodies. The wrinkles and saggy skin, no longer housing a mountain of fat, become a concern.

Plastic surgery is another issue. Can we learn to love our new bodies as they are, or will we need to have further surgery to improve our self-esteem as well as our outward appearance? We all have ongoing struggles with these concerns.

Many people have seen changes in relationships. For some, the surgery only strengthens the love. For others, the weight loss and increased self-esteem bring on personality changes that lead to breakups.

Losing more than half of who you are really can mess with your head! I'm not saying weight loss surgery is for everyone; it's a tremendous paradigm shift. But the important thing to know is that the technology exists to make being "normal" again a real possibility. ☐

Contact GIGI GORDON at ggg317@yahoo.com. Find the online support group at ossg-lesbian-and-gay@yahoogroups.com.

Less is more

Oregon woman finds more options when there's less of her to go around

BY GIGI GORDON

and secured with a silastic ring at the base to cause it to empty more slowly into the digestive tract, thus giving the feeling of fullness.

My weight always has been a deeply personal issue. Until now, I never wanted to talk about it.

I'm opening up because I see so many people in wheelchairs and on oxygen because of their obesity, and it breaks my heart. I so much want to whisper, "Your life doesn't have to be like this."

I've become a missionary with regard to weight loss surgery. I hate to see anyone suffer the way I did, thinking, "If I just could stay on


my diet, it might work." I know there's an alternative that, although drastic and life-altering, works very well.

Rita is thrilled with my improved health and participation in our relationship. She has experienced a slow evolution from caregiver back to loving partner.

We don't know what toll nearly 30 years of morbid obesity has had on my body, but the most evident

one is I need to have both knees replaced within the next year. My only regret is that I didn't come to my senses and do this sooner.

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