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By 2030 (only 6 years from now), 1 out of 2 Americans will have obesity and 1 out of 4 will have severe obesity. Obesity is the root cause of numerous devastating diseases. In the past decade, I have continuously tried to inform the public and medical community that health consequences of obesity can be prevented or reversed by bariatric surgery. Specifically, through near 30 publications in high-impact journals such as *JAMA*, *NEJM*, *Diabetes Care*, *J Am Coll Cardiol*, and *Annals of Surgery*, I could show that bariatric surgery can decrease the risk of developing heart failure by 62%, nephropathy by 60%, heart attack by 31%, stroke by 33%, atrial fibrillation by 22%, NASH cirrhosis by 88%, severe COVID-19 by 60%, cancers by 32%, and improve survival by 41%. Striking findings of this collection were widely covered by mainstream media including the *TIME magazine*, *NY Times*, *Wall Street Journal, Washington Post, CNN, Newsweek, CBS, Reuters*, and *NPR* for numerous times, indicating their importance from public health perspective. I am really hopeful that my efforts in the last decade could educate public, health care providers, and referring physicians on safety and efficacy of bariatric surgery. I am certain that these publications have advanced our field and helped numerous patients and many bariatric surgery programs in the US and around the world.

I am the Director of Bariatric and Metabolic Institute at the Cleveland Clinic and a Professor of Surgery at the Cleveland Clinic Lerner College of Medicine. Since I joined the ASMBS over 12 years ago, I have tried to have a '*meaningful*' presence in '*our*' Society. I feel extremely privileged that some colleagues recognized my efforts and nominated me for the *ASMBS Secretary/Treasurer* position. With continuous efforts of our past and current leaders, impressive changes have occurred in the access to care, insurance coverage, public education, quality improvement, bariatric surgery training, and research.

Despite all these phenomenal works, still a small fraction of eligible patients undergoes bariatric surgery. My ultimate goal is to move the needle and meaningfully increase the utilization of bariatric surgery. Although the introduction of new AOMs is considered a threat to bariatric surgery practice by many, I believe that can actually be an opportunity to potentially increase the surgical volume and improve the quality of care if we address the issue correctly by partnership with our nonsurgical colleagues in different disciplines and industry. My main purpose for this job is to use my strengths to help our Society and bariatric programs around the country to achieve this goal. I am going to reduce my other activities during my term at ASMBS, make myself available, and relentlessly work toward this goal. I believe I have proven that I am a person that generates idea and gets things done. I am certain that by careful planning and engaging our surgeons and integrated health professionals from independent and community practice, academic setting, military, international centers, and our nonsurgical colleagues, we can move toward that goal together.