

I am honored to be considered again for the position of Vice President of the ASMBS.

I overheard a fellow surgeon talking to a colleague at a recent conference this year about the future of our specialty. Our discipline is sick. Their prognosis is grim: “Bariatric surgery has less than 8 years as a viable specialty.”

If that is the case, the ASMBS is needed more than ever. The ASMBS's mission remains steadfast: delivering high-quality surgical care, advocating for equitable access to bariatric treatment, advancing resident and fellowship education, driving groundbreaking research, fostering collaboration across disciplines, and strengthening the continuum of care for obesity treatment. These pillars are the foundation of our profession, and in light of the current challenges, no other organization in the obesity space is better prepared to meet them.

There is no doubt that bariatric surgery is at a pivotal moment in 2025. The rapid evolution of obesity treatment—marked by the widespread adoption of pharmacologic therapies—has created new opportunities and challenges. While these treatments have brought obesity care into the national spotlight, they have also shifted the landscape of patient referrals, reimbursement structures, and public perception of metabolic surgery. We must ensure that bariatric surgery remains central to the conversation and that our role as experts in obesity management is reinforced at every level. The ASMBS must lead in shaping policy, promoting the long-term efficacy of surgical interventions, and integrating innovative endoscopic and pharmacologic strategies into comprehensive patient care.

At the same time, our profession continues to face ongoing hurdles: disparities in access to care, inconsistent insurance coverage, and increasing administrative burdens that impact surgeon well-being and patient outcomes. Primary care providers and policymakers are beginning to recognize the life-saving potential of metabolic surgery. Now, more than ever, we must harness this momentum to secure expanded access, improved reimbursement models, and greater public awareness of obesity treatment options. The Obesity Summit manifests this vision, and we must continue to lead it as an organization.

The ASMBS must remain a unified, strategic, and proactive force to meet these challenges. We need strong leadership to streamline initiatives, optimize the impact of our volunteer members, and ensure our advocacy efforts are targeted and effective.

I refuse to believe that bariatric surgery is doomed as a specialty. I will work tirelessly to prevent this. Through our collective efforts, not only will the ASMBS survive these challenges, but I predict the opposite: we will thrive.

If elected, I will remain accessible and accountable to our membership, advocating for the needs of bariatric surgeons and integrated health professionals. I will work to ensure that every member's investment in the ASMBS translates into tangible value—both in their professional growth and in advancing our field. Together, we will continue to break barriers in obesity care, fighting for a future where all patients have access to life-changing treatment.

Once again, I would be honored to continue serving this incredible organization as an officer of the ASMBS.