defined by gastric band (**600**), the liquid within gastric band (**600**) may be initially displaced below the food bolus (i.e., from upper portion (**622**) to lower portion (**624**)), then eventually back above the food bolus (i.e., from lower portion (**624**) back to upper portion (**622**)). In other words, the liquid in bladder (**622**) may initially be more voluminous in upper portion (**622**), then in lower portion (**624**), then back in upper portion (**622**). In some settings, such shifting of fluid in bladder (**620**) may assist in passage of food through the stoma passageway while still slowing the passage of food through the stoma passageway.

[0054] Another exemplary gastric band (**700**) is shown in FIGS. **16**A-**16**B. Gastric band (**700**) of this example comprises a flexible strap (**702**) and a bladder (**720**). The ends of strap (**702**) may be secured relative to each other when gastric band (**700**) is sufficiently wrapped about the patient's stomach (**2**). For instance, strap (**702**) may include buckle features similar to those described in U.S. Pat. No. 7,416,528, entitled "Latching Device for Gastric Band," issued Aug. 26, 2008, the disclosure of which is incorporated by reference herein. In addition, while strap (**702**) is flexible in this example, strap (**702**) substantially resists stretching along its length, such that bladder (**720**) expands and exerts inward forces on the gastro-esophageal junction of the patient when fluid is added to bladder (**720**) (e.g., using a needle inserted through septum (**16**) of injection port (**12**), etc.). Of course, strap (**702**) may have any other suitable configuration.

[0055] Like various bladders described above, bladder (**720**) of the present example is also substantially asymmetric about a horizontal plane (not shown) that bisects gastric band (**700**). In particular, the inner wall (**730**) of bladder (**720**) has a wavy configuration presenting a series of peaks (**732**) and valleys (**734**). When gastric band (**700**) is installed about a patient's gastro-esophageal junction may substantially conform to the configuration of inner wall (**730**), such that the peaks (**732**) and valleys (**734**) provide a generally tortuous stoma passageway from esophagus (**4**) to stomach (**2**). Such a tortuous passageway may substantially slow the passage of food from esophagus (**4**) to stomach (**2**), providing the patient with a desirable early sense of satiety, while not creating an undesirable "backup" of food in pouch (**6**) or esophagus (**4**) and the undesirable results that may appertain to such a backup of food in pouch (**6**) or esophagus (**4**). In some settings, the configuration of peaks (**732**) and valleys (**734**) may reduce the likelihood of undesired migration of gastric band (**700**) along the exterior of esophagus (**4**) and/or stomach (**2**).

[0056] Bladder (**720**) of the present example is preformed to include peaks (**732**) and valleys (**734**), such that gastric band (**700**) presents peaks (**732**) and valleys (**734**) both when bladder (**720**) is substantially non-inflated (as seen in FIG. **16**A) and when bladder (**720**) is substantially inflated (as seen in FIG. **16**B). In some versions, bladder (**720**) also includes internal webs (**736**) or ribs that secure valleys (**734**) to the opposite wall (**738**) of bladder (**720**), thereby restricting the separation of valleys (**734**) from opposite wall (**738**) to help ensure presence of valleys (**734**) even when bladder (**720**) is fully inflated. Other suitable ways in which gastric band (**700**) may be formed will be apparent to those of ordinary skill in the art in view of the teachings herein.

[0057] Yet another exemplary gastric band (**800**) is shown in FIG. **17**. Gastric band (**800**) of this example comprises a flexible strap (**802**) and a bladder (**820**). The ends of strap (**802**) may be secured relative to each other when gastric band (**800**) is sufficiently wrapped about the patient's stomach (**2**). For instance, strap (**802**) may include buckle features similar to those described in U.S. Pat. No. 7,416,528, entitled "Latching Device for Gastric Band," issued Aug. 26, 2008, the disclosure of which is incorporated by reference herein. In addition, while strap (**802**) is flexible in this example, strap (**802**) substantially resists stretching along its length, such that bladder (**820**) expands and exerts inward forces on the gastro-esophageal junction of the patient when fluid is added to bladder (**820**) (e.g., using a needle inserted through septum (**16**) of injection port (**12**), etc.).

[0058] Bladder (**820**) of the present example is substantially symmetric. However, gastric band (**800**) of this example still defines an asymmetric opening due to the configuration of strap (**802**). In particular, strap (**802**) is configured such that an upper portion (**806**) of strap (**802**) defines an inner diameter that is greater than the inner diameter defined by a lower portion (**808**) of strap (**802**) when the ends of strap (**802**) are secured to each other. This configuration provides an inclined inner surface (**810**) to which bladder (**820**) is secured. A plurality of annular ribs (**804**) assist in maintaining this inclined configuration, even when gastric band (**800**) is installed in a patient. As seen in FIG. **17**, ribs (**804**) become progressively wider along the height of strap (**802**). The end result in the present example is tapered engagement between gastric band (**800**) and the patient's gastro-esophageal junction, such that the stoma passageway is similar to stoma passageway (**56**) shown in FIG. **8**. While bladder (**820**) is itself substantially symmetrically shaped in the present example, it should be understood that bladder (**820**) may have any suitable alternative shape. It should also be understood that the tapered configuration defined by strap (**802**) in the present example is merely illustrative, and that strap (**802**) may alternatively provide any other suitably shaped profile. Furthermore, it should be understood that ribs (**804**) and/or other features may provide variably compliance along the height of gastric band (**800**) (e.g., the strength of ribs (**804**) may vary along the height of strap (**802**), etc.). Still other suitable configurations for gastric band (**800**) will be apparent to those of ordinary skill in the art in view of the teachings herein.

[0059] It will become readily apparent to those skilled in the art that examples described herein may have applicability to other types of implantable bands. For example, bands are used for the treatment of fecal incontinence. One such band is described in U.S. Pat. No. 6,461,292, entitled "Anal Incontinence Treatment with Wireless Energy Supply," issued Oct. 8, 2002, the disclosure of which is incorporated by reference herein. Bands can also be used to treat urinary incontinence. One such band is described in U.S. Pat. No. 7,621,863, entitled "Urinary Incontinence Treatment with Wireless Energy Supply," issued Nov. 24, 2009, the disclosure of which is incorporated by reference herein. Bands can also be used to treat heartburn and/or acid reflux. One such band is described in U.S. Pat. No. 6,470,892, entitled "Mechanical Heartburn and Reflux Treatment," issued Oct. 29, 2002, the disclosure of which is incorporated by reference herein. Bands can also be used to treat impotence. One such band is described in U.S. Pat. No. 7,442,165, entitled "Penile Prosthesis," issued Oct. 28, 2008, the disclosure of which is incorporated by reference herein. Various ways in which the teachings herein may be incorporated with the teachings of these patent references will be apparent to those of ordinary skill in the art.