

BARIATRIC SURGERY: YOUR NUTRITION GUIDE

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PRE-OPERATIVE NUTRITION PLAN

My 1 or 2 Week Pre-Op Diet

Dr. LaMar will prescribe a one or two week pre-operative diet based on your body mass index or BMI. There is supporting evidence that preoperative weight loss reduces the size of the liver, making the laparoscopic surgery safer as well as reduces operative time. This diet is high in protein, vitamins, and minerals while low in calories to prepare your body for surgery.

I will follow this diet for ___ week(s).

My Pre-Op Daily Requirements:

- 90 grams of protein from a liquid protein supplement
- You should consume ***at least*** 64 ounces of fluid daily (water, herbal tea, sugar-free drinks such as Crystal Light, Propel, vitaminwater zero, and Gatorade Zero)
- Non-caloric foods/liquids include: water, herbal tea, broth/bone broth/bouillon, sugar-free popsicles, sugar-free Jell-O, and sugar-free drinks such as Crystal Light, Propel, vitaminwater zero, and Gatorade Zero
- 3 all-purpose multivitamins with iron
- Calcium with Vitamin D
- Vitamin B12

Foods Not Allowed: Drinks with sugar, drinks with carbonation (anything that fizzes, like Diet Coke, etc.), drinks with caffeine, whole milk, alcohol, and **all** solid foods.

Strict compliance with this diet is mandatory and will make your surgery easier.

Attention Diabetics! Be sure to monitor your blood sugars and contact you primary doctor or endocrinologist to inform them of diet change.

Tips

- Carefully review this guide for nutrition following surgery; start shopping for the ingredients of the first Phase of your post-operative diet
- You will require 1-2 weeks off from work after your operation – please make arrangements
- Notify the office of any cold, sore throat, fever, or any other new illness you develop.

PRE-OPERATIVE INSTRUCTIONS

Let's recap what you need to do once you are scheduled for surgery. You are to follow the following pre-operative instructions unless otherwise instructed by Dr. LaMar.

- Birth control & Estrogen – will need to be stopped 30 days prior to surgery. If you haven't stopped, please notify the office immediately.
- 10-14 days prior to surgery – if you are on Steroids, Coumadin, Plavix, or other anti-coagulating agents, arrangements for stopping them should be in place as per your discussion with the surgeon.
- Stop Aspirin, Motrin, Advil, Celebrex, or other NSAIDs 10-14 days prior to surgery. You may take Tylenol for pain.

The Day Before Surgery

The day before your surgery you will be on **clear liquids**. This includes:

- Water
 - Sugar-free Jell-O
 - Broths (chicken, clear beef, vegetable)
 - Sugar-free popsicles
- If you use a CPAP machine for sleep apnea, be sure to bring it with you to the hospital.
 - Pack your hospital bag – See below.
 - Arrange for a responsible adult to drive you to the hospital and stay at the hospital until you are out of surgery.
 - Nothing to eat or drink after midnight! If you have any undigested food in your stomach, your surgery will be rescheduled.**

Suggestions (from other patients) for your hospital bag...

- | | |
|---|--------------------------|
| ○ Lip moisturizer/ChapStick | ○ Robe or zip-up sweater |
| ○ Non-slip slippers | ○ Book or Magazine |
| ○ Baby wipes/face wipes | ○ Tooth brush |
| ○ Deodorant | ○ Extra pillow |
| ○ Lotion | ○ Socks |
| ○ Comfortable clothes for the ride home | ○ Extra blanket |

The Day of Surgery

Medications:

- You may take your blood pressure medication with a small sip of water

Coming to the Hospital:

- Take a shower before coming to the hospital.
- Male patients: your face **must** be clean shaven
- Do not bring money, valuable belongings, or jewelry (including wedding rings, earrings, piercings).
- Do not wear make-up, fingernail, or toenail polish.
- Wear loose fitting, comfortable clothing.
- Bring your CPAP or BIPAP machine.

Reminder!

- After discharge, be sure to call the office as soon as possible to schedule your post-op appointment with Dr. LaMar. He would like to see you 10-14 days after your surgery, unless otherwise instructed.

IN THE HOSPITAL: WHAT TO EXPECT

Our hospital team will be there to help you at each step after your operation. Immediately following surgery you will be “NPO” or “nothing by mouth”. Once cleared to advance, you will be offered small sips of water to start. If you have preferences or protein shakes, you may bring your own from home.

You will be given 1 ounce medicine cups to take small sips at a goal rate of 1 ounce every 15 minutes. This rate ensures you stay hydrated. You will take these medicine cups home with you to encourage small sips, alternating between fluids and protein. Once you get used to taking in small amounts of fluid frequently throughout the day, you can discontinue this practice.

You will be discharged with the following medications:

- Narcotic pain medication
- Proton Pump Inhibitor (PPI) – to be taken daily for 3 months
- Actigall (gastric bypass) – used to prevent gallstones, to be taken for 6 months
- Anti-nausea medication (sleeve gastrectomy)

Nutrition Guide Following Gastric Bypass or Sleeve Gastrectomy

It will be necessary for you to follow a specific nutrition plan designed to allow healthy healing and recovery after weight loss surgery. Your new stomach pouch will be about the size of a roll of quarters. Initially, you will only be able to eat about 2 ounces at each meal. Eventually, this will increase to about 6-8 ounces at each meal. However, this volume may vary from patient to patient. You will need to chew your food very carefully and thoroughly and eat slowly from now on to avoid damaging your pouch. Initially you will compensate for the limited pouch size by sipping small amounts of liquids throughout the day. Eventually, you will be eating regular solid food but in smaller portions. The surgery works in two different ways:

- **Restriction:** The amount of food you can eat at any one time is greatly reduced due to the small size of the sleeve or pouch. You will feel full after eating very small meals and will therefore eat less overall. (Sleeve gastrectomy patients only have restriction.)
- **Malabsorption:** The intestinal bypass portion of the gastric bypass procedure slightly reduces the amount of calories absorbed from food.

The purpose of the dietary progression that you will follow after surgery is to allow adequate recovery of the digestive tract. Textures of food increase from liquid to soft foods as swelling decreases, allowing the food to pass through the digestive tract more easily. Your goals during this progression will include:

- Avoid dehydration with adequate fluid intake
- Preservation of lean muscle with adequate nutrition focusing on protein
- Preventing nutrient deficiencies with adequate vitamin and mineral supplementation
- Preventing adverse side effects including nausea, vomiting, dumping syndrome, discomfort, or pain with appropriate food choices

PROTEIN

Protein is an important nutrient for building new tissue. It is especially important immediately after bariatric surgery to help wounds heal. Protein is also necessary to help you maintain muscle while rapidly losing weight. The goal is to lose fat, not muscle. Without enough protein in your diet, you may feel tired or hungry, lose hair, have slow wound healing, or muscle breakdown.

You will need to consume a liquid protein supplement until you are able to eat enough solid food to meet your protein requirement of 60-90 grams of protein per day.

Choosing a Protein Supplement

Protein supplements are available as powders that are added to fluids or as ready-to-drink beverages. When choosing a protein supplement it is important to choose a high quality complete protein. The best sources of protein in a supplement include milk protein (whey/casein), soy protein, or egg white protein.

Numerous brands are available commercially at grocery stores, nutrition specialty stores or retailers. New products are entering the market all of the time, so it is important to read the labels to ensure they meet the criteria listed below. If you are not sure, take a picture of the label and call the office.

When reading the label, look for the following nutrition information to meet recommended criteria as some brands/products are higher in fat, calories, and sugar than recommended:

- At least 20 grams of protein per serving
- Less than 5 grams of sugar per serving
- Less than 5 grams of fat per serving

Protein Supplements to Avoid

Protein supplements that contain hydrolyzed collagenic protein as their primary protein source should not be used. Collagen is a poor quality, incomplete protein. Products to avoid include “test tube” or “protein shot” products such as New-Whey, Profect, Body Choice, and Met-Rx Protein Plus.

For Protein Powders:

Look for protein powder sold as “isolates” (versus concentrate) as they tend to have more protein and mix better. Powders can come in flavors like vanilla or chocolate, but can also be sold as plain/unflavored. Use water to mix with your powder; then once you’re in Phase 5, you may use nonfat or 1% milk, Lactaid, or unsweetened milk substitutes.

Tips for Protein

- Mix up your brands and flavors so you do not get bored!
- Try flavor extracts like almond, coconut or mint
- Spices like cinnamon, nutmeg, or spice blends like pumpkin pie spice
- Blending shakes with ice cubes for a colder, thinner texture; even make ice cubes out of your favorite protein shake

Vitamin & Mineral Supplementation

It is important that you take vitamin and mineral supplements every day for the rest of your life after having bariatric surgery. If you do not take your vitamin and mineral supplements, you could become malnourished. This is because you are less able to absorb nutrients and because you will be consuming a smaller volume of food.

Multivitamins with Iron

You will need to take a chewable multivitamin with iron 3 times per day. For better absorption the supplement should be taken at meals. About 3 months after surgery you should switch to a non-chewable multivitamin with iron. You will continue the same dosage, 3 times per day. The chewable multivitamin with iron should contain:

- 15-18 mg of iron per serving
- 300-400 mcg of folic acid per serving

Calcium with Vitamin D

You will need to take a chewable form of calcium with vitamin D. It is important to avoid taking the calcium and multivitamin with iron supplements at the same time. Calcium can interfere with iron absorption, so they should be taken 2 hours apart from one another. Your supplement should provide:

- At least 1000-1200 mg of calcium per day

B12

You will no longer be able to digest and absorb sufficient amounts of B12. You must take B12 in a form that directly enters the blood stream. Here are a couple of ways to do this:

- Sublingual (under the tongue) B12 tablets or drops
 - 500 mcg daily or
 - 1000 mcg (or more) twice weekly
- Monthly B12 injections at your primary care physician's office

Blood Tests

Following surgery, blood tests will be ordered at 6 months, 12 months, and on an annual basis thereafter to monitor your vitamin and mineral status. This will allow Dr. LaMar and your primary care doctor to correct any nutritional deficiencies with proper supplementation.

Tips for Vitamins

- No Gummy vitamins
- Take multivitamin with iron separate from calcium (2 hours apart) – they do not absorb well if taken at the same time
- Take your vitamins and supplements as instructed, complete your lab work on schedule and attend your follow-up appointments. This will allow Dr. LaMar and your primary care doctor to correct any nutritional deficiencies with proper supplementation.

POST-OPERATIVE DIET

Phase 1: Clear Liquids – 1 to 2 Days

Phase 1 will start in the hospital after your surgery. It will consist of clear liquids. Sip all liquids slowly and avoid drinking from straws.

Daily Requirements

- You should consume approximately 4 ounces of clear liquids per hour each hour you are awake.
- You should consume 64 ounces of fluid per day.

Phase 2: Liquids Only – Your First Two Weeks After Discharge

Your focus your first two weeks is on healing, with **fluid** and **protein** as your priority. You will start slowly by using your medicine cups from the hospital; then, continue this habit by having small sips alternating fluids and proteins throughout the day.

Daily Requirements

- 60-90 grams of protein from a liquid protein supplement
- You should consume 64 ounces of fluid per day (consume approximately 4 ounces of fluid each hour you are awake)
- 3 all-purpose multivitamins with iron
- Calcium with Vitamin D
- Vitamin B12

Fluids Allowed	Goal
<ul style="list-style-type: none"> • Water • Herbal tea, sugar-free drinks such as Crystal Light, Propel, vitaminwater zero, and Gatorade Zero • Broth/bone broth/bouillon • Sugar-free popsicles, sugar-free Jell-O 	64 ounces of fluid *includes protein drinks

Phase 3: Full Liquids – Weeks 3 & 4

Phase 3 start date: _____

This phase will be introducing full liquids into your diet. Full liquids are fluids and foods that turn to liquid when they are at room temperature. Phase 3 foods are to be added at breakfast, lunch, and dinner. You should consume 2 ounces of full liquids per meal. You will also continue with your protein supplement, calorie free liquids, and water.

Examples of full liquids that are allowed:

- Yogurt (plain or sugar free, low or nonfat, without fruit chunks)
- **Strained** cream soups
- Low-fat milk, skim milk, light soy milk
- Sugar-free pudding
- Thinned hot cereal such as cream of wheat, farina, cream of rice

Daily Requirements

- 2 ounces of full liquids per meal, 3 meals per day
- 60-90 grams of protein from a liquid protein supplement
- You should consume 64 ounces of fluid per day (consume approximately 4 ounces of fluid each hour you are awake)
- 3 all-purpose multivitamins with iron
- Calcium with Vitamin D
- Vitamin B12

Fluids Allowed	Goal
<ul style="list-style-type: none"> • Water • Herbal tea, sugar-free drinks such as Crystal Light, Propel, vitaminwater zero, and Gatorade Zero • Broth/bone broth/bouillon • Sugar-free popsicles, sugar-free Jell-O 	64 ounces of fluid *includes protein drinks

Tips for Phase 3

- Do not use sugar for sweetening. Sugar substitutes (Stevia, Splenda, Equal, etc.) are allowed

Phase 4: Pureed Foods – Weeks 4 & 5

Phase 4 start date: _____

This phase will be introducing pureed foods into your diet. Pureed foods are extremely soft semi-solid foods with a smooth texture; they are the consistency of a soft creamy paste or thick liquid. You should consume 2 ounces of pureed foods per meal. You will also continue with your protein supplement, calorie free liquids, and water.

Examples of pureed foods:

- Scrambled eggs or egg substitute
- Unsweetened applesauce
- Low-fat or fat free refried Beans
- First stage baby food (fruits, vegetables, meats)
- Mashed Cottage Cheese (low or nonfat, small curd)

Daily Requirements

- 2 ounces of pureed foods per meal, 3 meals per day
- 60-90 grams of protein total from a liquid protein supplement or pureed foods/full liquids
- You should consume 64 ounces of fluid per day (consume approximately 4 ounces of fluid each hour you are awake)
- 3 all-purpose multivitamins with iron
- Calcium with Vitamin D
- Vitamin B12

Fluids Allowed	Goal
<ul style="list-style-type: none"> • Water • Herbal tea, sugar-free drinks such as Crystal Light, Propel, vitaminwater zero, and Gatorade Zero • Broth/bone broth/bouillon • Sugar-free popsicles, sugar-free Jell-O 	64 ounces of fluid *includes protein drinks

Tips for Phase 4

- Do **not** blend solid foods into a pureed consistency

Phase 5 – Weeks 6 and Beyond

Phase 5 start date: _____

This phase will begin 6 weeks after surgery and will last for life. The first part of Phase 5 will last for a few months after which you will transition into what you’ll be eating for the rest of your life.

Getting started...

The early part of this phase will last for a few months. You will introduce **soft solid foods** into your diet. This may include soft meat, fish, poultry, cooked vegetables and. As you are able to tolerate more advanced textures of protein and vegetables, you will be able to have a more general diet, focusing on wholesome foods in small portions.

Food Guide

Protein	<ul style="list-style-type: none"> • Eggs • Seafood • Chicken, turkey, beef, and pork – ground meats will be better tolerated at first • Tofu and meat substitutes • Dairy such as yogurt and cottage cheese 												
Vegetables	<ul style="list-style-type: none"> • Low carbohydrate cooked vegetables: <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Asparagus</td> <td style="width: 33%;">Broccoli</td> <td style="width: 33%;">Brussel sprouts</td> </tr> <tr> <td>Carrots</td> <td>Cauliflower</td> <td>Cucumber</td> </tr> <tr> <td>Green beans</td> <td>Mushrooms</td> <td>Onions</td> </tr> <tr> <td>Spinach</td> <td>Tomato</td> <td>Zucchini</td> </tr> </table>	Asparagus	Broccoli	Brussel sprouts	Carrots	Cauliflower	Cucumber	Green beans	Mushrooms	Onions	Spinach	Tomato	Zucchini
Asparagus	Broccoli	Brussel sprouts											
Carrots	Cauliflower	Cucumber											
Green beans	Mushrooms	Onions											
Spinach	Tomato	Zucchini											
Carbohydrates <i>*Only add once daily required protein has been achieved</i>	<ul style="list-style-type: none"> • Hot cereals (oatmeal, grits, Cream of Wheat) • Breads • Rice • Pasta <p>*Very small servings, limit to 3-4 servings per week</p>												

** Consume 2 ounces of soft solid foods per meal, 3 meals per day. Add 1 ounce of solid food per meal every 2 weeks until a total of 6 ounces per meal is reached.

Continuing on...

As you advance, you will be able to eat foods of regular consistency. This does not mean you can go back to your old eating habits and patterns.

Things to remember for Phase 5:

- Always consume protein-rich foods first
- To help avoid any difficulties, **avoid raw vegetables and salads for the first six months.**
- Chew all solid food until it is the consistency of applesauce
- You must stop drinking 30 minutes before you eat and wait 30 minutes after you have eaten to resume fluid intake
- You must consume 60-90 grams of protein per day. You can reduce intake of protein supplement as you increase your protein from solid food
- Consume a total of 64 ounces of non-caloric liquids per day
-

Tips for Phase 5

- Everyone advances through these phases at a different rate. If needed, go back to basics with soft foods and protein shakes.

Exercise

One of the most successful ways of achieving and maintaining weight loss after surgery is with appropriate physical activity. Do not rely only on the bariatric surgery to achieve your weight loss.

Establishing an exercise routine even before the surgery will help in the recovery phase, so get started today!

- Establish your own fitness program by following the next steps:
 1. Choose an exercise from each of the following categories:

Cardiovascular exercise: Walking, treadmill, dancing, water exercise

Strength exercises: Resistance bands, free weights, yoga

2. **Schedule timing of exercise:** if your fitness level is low then start with 5-10 minutes 3 times per day and increase as tolerated. The goal is 45 minutes daily.
 3. **Set up frequency of exercise:** Number of exercise sessions per week. The goal is 6-7 times per week.
- Implement your fitness plan as soon as you can. Start now!
 - Be consistent.
 - Monitor your progress by keeping an exercise log.

Tips for Exercise

- Start as soon as you receive this guide!
- You are clear to start exercising 2 weeks after surgery
- If you have any concerns or questions about exercise, you can discuss this further with Dr. LaMar during your 2 week post-op appointment.

Medications to Avoid

The medications listed below are known as **Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)**. If these medications are taken orally, they can cause stomach ulcers and bleeding. Your pouch/sleeve may be more susceptible to these complications if you take these medications. Any **oral steroids** (e.g. Prednisone, Medrol) also put your pouch at risk.

If you or your doctor feels you need and of these drugs, please call your surgeon for advice.

Note: Anti-Inflammatory Drugs and Oral Steroids may be administered by other routes (IV, topically, intramuscularly, etc.)

Advil	Fiorinal
Aleve	Ibuprofen
Alka-Seltzer	Indocin
Anaprox	Lodine
Arthrotec	Midol & similar drugs
Aspirin	Mobic
Bextra	Motrin
Bufferin	Nalfon
Cataflam	Naprelan
Celebrex	Naprosyn
Clinoril	Orudis
Coricidin	Pepto-Bismol
Cortisone	Ponstel
Dolobid	Relafen
EC-Naproxyn	Toradol
Ecotrin	Trilisate
Excedrin – all types	Vanquish
Feldene	Voltaren

*Please note – There are always new drugs being released. Be cautious when taking any medications for pain, arthritis, and inflammation.

Medications That Are Safe to Take After Surgery

Medications recommended for colds

- Benadryl
- Dimetapp
- Robitussin
- Sudafed
- Triaminic
- Tylenol Cold Products

Medications usually well tolerated

(Try to obtain sugar free or diabetic formulas for any of these products)

- Tylenol
- Gas-X
- Stool Softeners
- Milk of Magnesia
- Dulcolax Suppositories
- Glycerin Suppositories
- Tums
- Over-the-counter antacids

Troubleshooting: Some Problems You May Encounter

Constipation

Constipation is a common side effect of the pre and post-operative diets. A change in bowel habits may occur, but over time this usually goes back to being close to your normal pattern. It is not uncommon to have several days between bowel movements because you are eating less food and eating less fiber early after surgery. Increasing fluid and activity is helpful. Over-the-counter products recommended are:

- A stool softener (Colace, Peri-Colace, Senokot) during you pre-operative diet as well as for 2- weeks after surgery.
- A fiber product such as Benefiber and comes in sugar-free version that can be added to water.
- Laxatives such as Milk of Magnesia may be added if the above does not provide relief. However, laxatives should not be used routinely.
- If constipation continues, a suppository or enema may be used

If the problems persist despite hydration, fiber, exercise, and over-the-counter products, contact the office.

Diarrhea or Loose Stools

Loose stools may occur early after surgery due to the liquid consistency of the diet. This usually will improve over 2-4 weeks as solid food is gradually introduced. If you have diarrhea with fever, chills, weakness, dizziness and you cannot maintain your fluid intake, please call the office.

Dumping Syndrome

Dumping syndrome is a direct effect of the gastric bypass surgery that occurs when foods high in sugar or fat pass quickly through the stomach and into the small intestine after gastric bypass. Before gastric bypass surgery, food was gradually released in small amounts from the stomach into the small intestine. After surgery, food can “dump” into the small intestine very quickly and then pass through the shorter digestive tract. This can lead to one or more of the following symptoms:

- abdominal cramping
- diarrhea
- cold sweats
- increased heart rate
- lightheadedness
- weakness
- nausea
- fatigue

Symptoms usually occur within one hour after eating and may last for more than 24 hours. **There is no specific therapy for dumping syndrome other than avoiding the types of foods high in sugar and fat that lead to it** such as:

- Sweets
- French Fries
- Soda
- Honey
- Salad Dressings
- Pastries
- Jams/Jellies
- Gravies
- Cookies
- Fruit Juices
- Ice Cream
- Teriyaki Sauce
- Milkshakes
- Heavy Sauces
- Pies
- Fried Chicken
- Ketchup
- Cake
- Mayonnaise

Nausea, Vomiting, and/or Heartburn

Nausea, vomiting, and/or heartburn can occur from any of the following:

- Eating and drinking too quickly
- Not chewing food well enough
- Eating too much (volume)
- Eating rich or sweet foods, fried, or high-fat foods
- *Drinking fluids with meals*

**** If you are vomiting and none of the above situations apply to you, call the office immediately***

Remember:

STOP eating before you are full.

Hair Loss

Changes in hair quality or even hair loss can occur as a side effect of rapid weight loss. Hair loss is seen in about 1/3 of patients after surgery. This is temporary, but it can be frustrating. It generally lasts about 6-12 months and reverses without intervention. Take your vitamins and supplements as instructed and be sure you are eating 60-90 grams of protein every day. In addition, ask your hairdresser for topical product or conditioner recommendations that may assist (e.g., Nioxin®)

Food Intolerances

Food intolerances varies widely. One individual may tolerate a food that disagrees with another person. The following are common foods that may be difficult to digest, especially for the first few months after surgery.

- Tough meats – dry gristly meats can be difficult to digest. Choose meats that are moist. Be sure to chew your meat completely.

** We recommend staying away from pork and steak for the first 6 months

- Bread, pasta, and rice – these food items can form a ball and “gum up” or block the opening from the stomach to the intestines.
- Seeds and skins of some fruits and vegetables – dried fruit, fibrous “strings” from vegetables like corn, asparagus, and celery, or membranes from citrus fruit can block the opening from the stomach. Be sure to chew your fruits and vegetables completely.
- Nuts
- Coconut

Frequently Asked Questions

Why do I have to take a Proton Pump Inhibitor such as Prevacid®, Nexium®, or Prilosec® after surgery?

To prevent ulcer formation in the new stomach pouch/sleeve, as well as prevent gastric reflux. It is recommended that you take the PPI daily for 3 months after surgery even if you are not experiencing gastric reflux.

Can I chew gum?

Some people may experience discomfort from increased gas pains after surgery when air is entered in the mouth while chewing gum. Please wait at least a month before chewing gum and if experiencing symptoms, discontinue.

Can I use straws?

The short answer: no. Straws can cause people to gulp beverages at a far quicker rate than they want to after surgery. Because we want you to focus on small sips of liquids spaced throughout the day, straws are not recommended.

Can I drink caffeine?

Avoid caffeinated beverages for 6 months after surgery. Caffeine can act as an irritants to the stomach, which can increase the risk of ulceration.

Can I drink alcohol?

You will be very sensitive to the effects of alcohol after surgery. Like caffeine, alcohol can act as an irritants to the stomach, which can increase the risk of ulceration. The recommendation is to wait at least 6 months before having alcohol.

Can I have carbonated drinks?

Avoid carbonated beverages for 6 months after surgery. Carbonation can cause irritation to the stomach, as well as gas and discomfort from bloating. It also takes up valuable space in your limited sleeve/pouch for more nutrient-dense foods such a protein and vegetables. If you choose to have a carbonated beverage 6 months after surgery, make sure it is sugar-free.

Lifestyle CHANGE for Success

- C** Chew and eat slowly. Chewing is very important to avoid getting food stuck after eating. Chewing also increases the release of endorphins which makes you feel satisfied. You will not feel satisfied by eating soft, mushy foods that do not require chewing. Soft foods can be eaten in big portions and are mostly carbohydrates (e.g., mashed potatoes and mac and cheese).
- H** Hydrate! The brain does not recognize the difference between thirst and hunger. You will have cravings when you are dehydrated. Try to drink at least 64 ounces of non-caloric liquids per day in between meals. Drinking during a meal will wash food through the pouch too quickly and allow you to eat too much, too fast. Do not drink your calories! High calorie liquids like popular coffee drinks, juice, or soda will defeat the operation and poorly affect your weight loss.
- A** Avoid breads, pasta, tortillas, and other starches. These foods should generally be avoided. Avoid overcooked and dry meats that are also difficult to eat. Drink minimal carbonated beverages to avoid cramps and bloating. Carbonation will make you gassy. Avoid excessive alcohol.
- N** Nutrition! Eat healthy and take your vitamins. Do not skip meals – it can cause cravings and headaches. Remember, protein first! Protein makes you feel fuller than carbohydrates. Start meals with protein rich foods like meat, fish, and eggs.
- G** Grazing will sabotage your success. Nibbling on high fat snacks and sweets will cause weight gain and provide no nutritional value. Examples include crackers, chips, candy, and cookies. **Do not graze!**
- E** Exercise at least 4-5 times per week and try to lead an active lifestyle. Focus on resistance exercise. Exercise will directly burn calories and builds strong muscles.

Things to Remember | Life After Bariatric Surgery

1. Always eat our protein first. Even after you have progressed through the dietary phases, consume your proteins first before any other food item. **When you feel full, stop eating.**
2. When you feel full, stop eating and do not eat again until the next meal of the day. Do not overeat.
3. Always follow the “30-Minute Rule” to fluid intake. Do not drink with your meals. You must stop drinking 30 minutes before you eat and wait 30 minutes after you have eaten to resume fluid intake.
4. Consume at least 60-90 grams of protein per day (or more if recommended by your doctor).
5. Take your vitamin and mineral supplements every day unless otherwise instructed by your doctor.
6. Consume at least 64 ounces of fluid per day. Do not wait until you feel thirsty to drink.
7. Keep your scheduled follow-up appointments.
8. Do not skip meals. Have 3 meals per day: breakfast, lunch, and dinner.
9. Sip fluids slowly throughout the day. Do not gulp. Do not use a straw.
10. No smoking is allowed after bariatric surgery.
11. Take small bites of food and chew properly before swallowing. Food should be a “mushy” consistency before you swallow.
12. Always check your tolerance for foods. If a food does not agree with you, stop eating it and try again at another time. If that food continues to be intolerable, discontinue eating it altogether.
13. Oral anti-inflammatory drugs (NSAIDs) and oral steroid should be avoided.
14. Be physically active every day.
15. Remember, bariatric surgery is not the cure for obesity. It is a tool that can assist you with weight loss.