

# **A guide to eating and drinking after Gastric Bypass**

Information for patients and carers



A practical guide to changes in eating and drinking after gastric bypass surgery

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## Introduction

Gastric bypass surgery is a demonstrated, effective way to help people lose weight. Many people find it helps them make the necessary long term changes to their diet to lose weight and keep it off. However, it isn't a 'quick fix' or a certainty that you will lose weight. Successful weight loss will be entirely down to you making good dietary choices and increasing your physical activity.

This guide should guide you through the post-operative stages step-by-step, to help you make the necessary changes to your eating pattern following a gastric bypass operation and answer any questions you may have. Please read the entire booklet before your operation and approach a member of your treatment team with any questions you may have.

You should ensure that all your questions have been answered before you sign the consent form.

## How the gastric bypass helps you to lose weight

In the initial period after surgery you will only be able to eat very small portions and will probably not feel hungry. Both these factors may change with time. You will also not absorb some of the food you eat, meaning you could lose valuable nutrients from some of the foods you eat.

It is important to realise that we don't always eat because we are hungry. We might eat out of habit or because we have learned to turn to food as a comfort when we are bored, or upset, or even happy. This "head hunger" does not disappear with surgery and you must learn to overcome this if you want to be successful with your weight loss.

## What should I eat after surgery?

The following advice is designed to reduce the likelihood of any complications following surgery. It is therefore very important that you follow this advice closely. There are 4 stages. Do not be tempted to skip stages or rush things. The advice is designed to help you get all the nutrients you need while helping the wounds heal in your digestive system and helping you recover from surgery.

We recommend that you spend between 1-2 weeks in each stage but you must spend a **minimum of 1 week on each stage**. You should be led by your body and how you are feeling. Do not try to copy or follow anyone else who has had a bypass; everyone is different. If you progress too quickly and then struggle, go back to the previous stage for a few days more. You should aim to be eating 'normal' foods approximately 2 months after your operation.

### **Immediately after your surgery, once your surgeon has advised that you may sip freely:**

Start taking your calcium and multivitamin/ mineral supplements and commence Stage One (as below).

## Stage one – Fluid Phase (first 1-2 weeks after surgery)

- All drinks should be smooth (no bits or lumps) and be able to be sucked through a straw.
- Start with sips and if these feel comfortable, gradually increase the amount you take in one go. Be careful not to gulp your drinks as this may result in vomiting.
- Aim to have a minimum of 2 ½ litres (4 pints) each day to avoid becoming dehydrated. At least 1-1.5 litres of this should be nutritious liquids (see below).
- Avoid all fizzy drinks.
- While it is fine to drink tea, coffee, squash, water etc you should make sure these are in addition to any drinks with a nutritional content (see below), not instead of.

### Nutritious liquids:

- Skimmed or semi-skimmed milk fortified with skimmed milk powder (1-2 tablespoons per 200ml)
- Build-Up, Complan (or own-brand equivalents) – please note that these supplements are suitable for diabetics in the quantities prescribed below.
- Slimfast
- Smooth soup (homemade or tinned) fortified with 1-2 tablespoons skimmed milk powder.
- Smoothies. (Fruit blended with milk) Homemade will be best. Shop-bought varieties will be too high in sugar.
- Unsweetened fruit juice (limit to 1-2 small glasses a day)

### Example meal plan

Breakfast	Fruit smoothie (200ml)
Mid morning	Fruit juice (200ml)
Lunch	Complan or Build-Up or glass semi-skimmed milk including 2 tbsp skimmed milk powder (200ml)
Mid Afternoon	Slimfast (200ml)
Dinner	Fortified soup (200ml)
Supper	Build-Up or Complan (200ml)

(Plus tea/coffee/sugar-free squash etc in between)

When you feel ready, move on to Stage 2 for 1-2 weeks....

## Stage two – Soft Blended/ Puree (weeks 3-4 after surgery)

- It is still important to avoid lumps at this stage. Make sure foods are blended well.
- Texture-wise you are aiming for yoghurt consistency.
- Have 4-6 'meals' a day. Aim to have about 1-2tbsp of the following every couple of hours during the day.
- Start with 1-2 tablespoons per meal and increase this gradually if and when this feels comfortable (to no more than 4 tablespoons). You may need to have 5-6 small meals per day at this stage.
- Chew well and eat slowly. Stop as soon as you feel full.
- Do not drink at meal times. Wait at least 30 minutes after you eat before you drink anything.
- Make sure you include a protein source at each meal. This is important to help wound healing.
- Continue to have 1 pint of skimmed or semi-skimmed milk a day. Use this to blend foods rather than water to increase the nutritional content.

### Sample meal ideas/plan (Stage 2)

Breakfast	Virtually fat free yoghurt/fromage frais Soggy weetabix or ready brek (runny) Homemade fruit smoothie (made with yoghurt)
Mid morning	Blended tinned fruit (unsweetened) Virtually fat free yoghurt/fromage frais Sugar-free Angel delight/custard
Lunch	<b>An example would be one of the following:</b> Thick, smooth soup (add skimmed milk powder if it doesn't contain meat, fish, chicken or lentils) OR Blended baked beans and mashed potato OR Blended fish in sauce with mashed potato OR Liquidized meat/chicken/fish stew with liquidized vegetables and mash OR Liquidized pasta with cheese and vegetable sauce
Mid afternoon	As mid morning
Dinner	As lunch

When you feel ready, move on to Stage 3.....

## Stage three – Soft texture (weeks 5-6 after surgery)

- The texture you are aiming for now is mashed food you could eat with just a fork or spoon.
- Lumps are now allowed! It is important you chew all food well and take your time.
- You should reduce the frequency of meals to 3-4/day (or 3 plus a snack) and avoid eating in between. Try to establish a routine for having three meals a day, even if you are not hungry initially at these times. This will help you to lose weight in the long term.
- Continue to separate drinks from meals.
- You **do not** need to add any extra milk, fruit juice, Slimfast etc any more as you can now have regular foods.

### Meal ideas.... 1 of the following options

¾ cup low sugar cereal (**not** muesli) with skimmed/semi-skimmed milk,

3-4 tablesp scrambled eggs

3-4 tablesp baked beans

3-4 tablesp minced meat or turkey e.g. cottage or shepherds pie, bolognese sauce

3-4 tablesp fish in sauce/fish pie

Soft ready meals e.g. cauliflower cheese, lasagne, macaroni cheese

.....with soft (overcooked) pasta, cous cous or mash potato

.....and soft (overcooked) vegetables (tinned are often soft)

### Snack ideas

Rice pudding, yoghurt, fromage frais, stewed or soft tinned fruit, cottage cheese, sugar-free mousse/whip/custard

## **Stage four – Normal texture (approximately 6-8 weeks after surgery)**

- Now aim for 3 meals a day with 1-2 small snacks. The long term aim is to have 3 tea plate sized meals a day, with nutritious snacks such as a piece of fruit or a tub of yoghurt between your meals.
- You **do not** need to add any extra liquid calories or additional protein any more. You no longer need to have extra milk, skimmed milk powder, fruit juice or Slimfast.

### **Hunger and appetite**

You may not be hungry due to changes in hormone levels resulting from your operation. It is still important to have 3 meals a day - you need the nutrients! It might be tempting to skip meals if you aren't hungry as a way to speed up weight loss but this will result in you becoming malnourished or developing unhelpful eating behaviours. Hair loss can result as a consequence of under-nourishment after bypass surgery. This is usually a sign of general under-nourishment as opposed to a specific vitamin or mineral deficiency. For this reason, you should be aiming to eat a healthy balanced diet in the long-term after your operation. If you are struggling to eat all of your meal, eat the protein portion of the meal first, then the carbohydrate portion followed by the vegetables.

You should try to include all types of textures now (remembering to chew really well). If it is a new food, put only a very small amount in your mouth and chew extra well.

You can now refer to the booklet '**Healthy Eating after Bariatric Surgery**' for further guidance around how to eat once you have completed the post-op diet.

## **Dietary goals for successful weight loss after Gastric Bypass**

- Have 3 small meals a day, even if you do not feel hungry
- Plan a small snack such as a piece of fruit or a yoghurt between meals
- Eat slowly: put a small amount of food in your mouth at a time and chew this very well. Eating at a table without any distractions and putting down cutlery between mouthfuls can help
- Do not aim to eat until you are 'full'. Overeating will stretch your stomach pouch, cause discomfort and may make you vomit
- Do not drink with meals. Wait at least 30 minutes after a meal before you have a drink. Make sure you have at least 2 litres of fluid a day
- Avoid all fizzy drinks
- Choose a diet based on 'Healthy Eating' guidelines. In particular avoid sugary foods to minimize the chances of suffering from Dumping Syndrome
- There are some foods that some people find a problem after bypass. This can include chewy meats, white bread, fibrous fruit and vegetables, nuts, seeds and rice. These should be avoided at the beginning and re introduced slowly once a 'normal' diet has been established. Everyone is different to what they can manage and you will need to find out what is right for you by trial and error.

## **Key points to remember**

Following is some advice to help with your weight loss journey:

- Always stick to the recommended food portions
- You will not come to harm by eating very small portions just three times a day (egg-cup sized stomach)
- Your meal should take between 20-30minutes to eat - do not override the restrictive effect by eating excessively slowly
- Chew your food thoroughly before swallowing
- Do not eat and drink at the same time.
- If you feel hungry between meals, take a drink to make sure you are not confusing this with thirst.
- If you are still hungry have a small snack from the foods listed on the previous page.

## **Fluids**

As your diet becomes more solid and you progress through the stages, it is still important to maintain your fluid intake. Suitable choices would include water, no-added sugar squash, tea and coffee and up to 1/2 a litre skimmed/semi-skimmed milk per day. Avoid fizzy drinks as these may cause discomfort.

You should not drink with your meals – you may find this difficult at first particularly if you are used to drinking with your meals. However, your new stomach is not big enough to cope with this any more and if you do eat and drink together, you may vomit. Aim to wait 30 minutes after a meal before drinking.



## Frequently asked questions

### **Are there any foods I should avoid after gastric bypass?**

You may find it difficult to tolerate some foods, and this varies from person to person. Common foods known to cause problems may be dry meat, soft white bread, stringy or very fibrous vegetables, sweetcorn, nuts, dried fruit, pips and seeds. Avoid these until you have established yourself on your solid diet and always try foods cautiously. If you don't tolerate a food, try it again in a few weeks time. There is a lot of adaptation in the first few months. It is highly likely you will manage it with time.

### **Can I drink alcohol after gastric bypass?**

It is not recommended that you drink alcohol for the first two months after operation and remember that you will feel the effects of the alcohol much more quickly than before. Please take special care when driving as it may affect your legal limit and your reaction speed.

Remember that alcohol is very high in calories (particularly alco-pops and stronger wines or lagers) and contains no nutrients. It can also stimulate appetite – another reason not to drink frequently.

### **Why should I avoid sugar and too much fat afterwards?**

Most people after a bypass are unable to eat sugary (and sometimes fatty) foods and drinks. If these are taken after surgery, even in small amounts, you will suffer from 'Dumping Syndrome'. The symptoms of this are diarrhoea, nausea, light-headedness and cramping. Good reasons to therefore avoid these types of foods!

If you experience this (nausea, sweating, feeling faint, diarrhoea, cramping) after eating you should sit or lie down until the symptoms pass. The symptoms can be made worse by drinking with meals or having foods with a high fat content.

Some people find lying down helps relieve the feeling. To prevent dumping you should avoid foods high in fat and sugar and use artificial sweetener in place of sugar where possible.

Avoiding foods high in fat and sugar will also help you stick to a healthy diet and optimise your long term weight loss.

### **Will I need to take vitamins after my operation?**

You will need to take supplements for the rest of your life. A multi vitamin and mineral supplement and calcium are recommended. You may also need to have 3 monthly vitamin B12 injections. Some people need additional supplements; this will be assessed by regular blood tests at your review appointments.

It's important to take your calcium supplement at a different time to any supplements containing iron (e.g. multivitamin and mineral). Taking them together reduces the absorption rate.

### **How should I take my vitamin tablets after my operation?**

During the first few weeks after your surgery you may not wish to swallow a whole capsule. The following advice should be followed until you feel confident to swallow capsules or tablets:

Forceval – this capsule can be bitten, swallow the contents and spit out the shell.

Ferrous sulphate – can be broken in half with a pill-cutter.

Calcichew – this is to be chewed so should not present any problem.

## **Possible problems and solutions after a gastric bypass**

### **Vomiting**

You should not expect to be sick after a bypass. If you are, it is likely you have either:

- Eaten too much
- Eaten too quickly
- Not chewed the food enough
- Had a drink too near to the meal.

Ask yourself if any of these could be likely causes and try to avoid repeating the 'mistake' at the next meal.

If you continue to be sick and it can't be explained by the above, you should contact your surgeon or GP.

### **Constipation**

If you are suffering with this, check you are drinking enough fluid. You should have at least 2½ litres a day. Try to choose more high fibre foods such as wholegrain products, fruit and vegetables. Regular exercise will also help to alleviate constipation. If constipation persists then you can safely take laxatives such as Resource Optifibre, milk of magnesia or Senna.

### **What to do if food gets stuck?**

This may happen if you have eaten a food that was too solid, eaten too fast or too much, or as a result of eating certain 'problem' foods. This will feel uncomfortable and you may wretch or vomit. It usually resolves itself, but you can try repeatedly swallowing small quantities of cold sparkling water or Diet Coke, as the fizz may help to dislodge the lump. If the trouble persists, please contact your GP or if out of hours, accident and emergency.

## **Where can I get more information?**

### **The British Obesity Surgery Patient Association**

[www.bospa.org](http://www.bospa.org)

### **Weight Loss Surgery Information**

[www.wlsinfo.org.uk](http://www.wlsinfo.org.uk)

### **Weight Concern**

[www.weightconcern.com](http://www.weightconcern.com)

## **Contact Information**

If you have any queries relating to diet following your surgery or about this booklet please contact your dietitian:

Kathryn Waller

**Specialist Bariatric Dietitian**

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If your query is of a medical or surgical nature, please contact your surgeon or GP. In the case of a medical emergency please contact your nearest accident and emergency department.