DIETARY GUIDELINES AFTER BARIATRIC SURGERY

INFORMATION FOR PATIENTS AFTER SLEEVE GASTRECTOMY OR GASTRIC BYPASS

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What is weight loss surgery?

This information is designed for patients who have undergone weight loss surgery which is also known as bariatric surgery which are operations designed to help reduce your weight to improve your health. These operations include a gastric bypass or sleeve gastrectomy. There is a separate booklet for those who have had a gastric band insertion.

After any bariatric surgery, you will be asked to follow a special diet in order to reduce complications and to ensure continued weight loss and maintenance of weight loss. Although it may be tempting to rush or skip stages, food is slowly reintroduced to reduce discomfort, the risk of vomiting and to let your body heal.

Nutrition is very important once you have had bariatric surgery. You need to ensure your diet contains sufficient nutrients, vitamins and minerals to live healthily and lose weight in a healthy manner.

A balanced diet will also ensure that the weight you lose is mainly fat. Many people, after surgery eat insufficient protein which results in them losing muscle mass instead of fat. Muscle helps you lose weight by boosting your metabolism as it uses up food into energy. Metabolism is the way the body turns food into energy.
What is a Sleeve Gastrectomy?

Sleeve Gastrectomy Surgery reduces the size of your stomach.

The sleeve gastrectomy is usually carried out as a keyhole procedure. The diagram below shows how part of the stomach is removed, leaving the small, gastric sleeve behind. This smaller stomach only holds around 150-200mls (size of an average drinking cup), but will still absorb all the calories (energy) from the foods and fluids that you eat / drink. This restricts the amount of food you can eat and creates a feeling of fullness quickly and so leads to weight loss. Your digestive system remains unchanged.
What is a Gastric Bypass?

The gastric bypass is both a restrictive and malabsorptive procedure.

The stomach is made smaller and a small pouch created. This will hold approximately 15 to 50mls volume (1/2 – 2oz). This pouch is then joined up to the bypassed small intestine. The bypass can vary in length from 75-200cm. This means food bypasses most of the stomach and about a third of the small intestine. This reduces hunger and creates fullness quickly so the amount you can eat is less. A consequence of the surgery is that fewer vitamins and minerals are absorbed as food passes through the intestine.

Food can only be eaten in small quantities because of the small pouch. Because the hole between the stomach and the intestine is small, the food remains in the stomach for longer. Initially the food portions will be small and the range of food eaten limited. This will improve with time.
After weight loss surgery, there are four stages to the food re-introduction.

Stages of the Diet

Stage 1 – liquid only diet - for approximately the first 1-2 weeks after surgery

Stage 2 – blended / puree texture - from approx. 2 week to 4 weeks after surgery

Stage 3 – soft texture - from approx week 4 after surgery until ready for Stage 4

Stage 4 – normal texture - when ready

The time to progress from one stage to the next varies between individuals. It is important not to rush and move on before you are ready. If you move onto Stage 3 (soft texture) too soon, you are likely to experience vomiting and take longer to get to the final stage. You are less likely to have problems if you progress carefully.

Contact your dietitian for advice if you are unsure about your diet at any stage

Avoid vomiting

If you follow your dietitian’s advice and eating rules below, you should not vomit. Vomiting is normally caused by:

- Eating too much or too quickly
- Having food that is an unsuitable texture
- Having fluid or food too close together

Do not progress through the dietary stages more quickly than advised as this is likely to cause vomiting.
Liquid Only Diet (Stage 1) (approximately 1-2 weeks after surgery)

Initially you will have fluids through a drip. Your hospital team will monitor you and advise when you can start to drink. Start with sips of water and slowly build up to small (25-30ml), slow, frequent drinks. Once you start on liquids continue with just liquids for approximately the next 2 weeks then progress to a blended / puree texture before progressing through the stages to a normal texture diet.

It is important to take nutritious liquids through the day during this stage of the diet. Nutritious liquids include:

- Meal replacement drinks such as Slimfast, Meritene (previously known as Build Up) and Complan
- Fortified milk (add 2-4 tablespoons of dried milk powder to 1 pint of skimmed/semi-skimmed milk)
- Smooth, thin soups with added dried skimmed milk powder
- Skimmed or semi-skimmed milk
- Diet, smooth yoghurts (no fruit lumps), fromage frais, low fat, low sugar custard
- Diluted fruit juice (half water and half fruit juice)
- Thin, fruit smoothies (smooth varieties, no bits)

Aim to have at least 2 litres of fluid per day.

It is alright to drink water, tea, coffee and reduce sugar squash but too much of these will fill you up and not allow you to drink sufficient nutritious drinks.

It can be difficult to achieve this in the first week or two, it helps to take small, frequent sips throughout the day, and avoid gulping, as this may give you pain or cause vomiting.

After the initial 1-2 weeks of fluid, if you do not have any problems, progress to a blended / puree texture (Stage 2) for approximately the next 2-4 weeks.
Blended / Puree Texture Diet (Stage 2) (Approximately 2-4 weeks after surgery)
The smooth puree textured diet should be a custard consistency. You will need an electric food blender to achieve this. If the puree is too thick, it will feel uncomfortable and possibly make you sick. The amount of time spent blending will vary depending upon the fibre and fluid content of the food.

Tips on pureeing foods
- If the blended food is too thick / sticky and dry, add extra fluid
- To thin purees, add fluids such as milk, soup, white sauce and gravy
- Small volumes of food do not easily blend into a smooth consistency. It is easier to achieve a smooth puree by blending a larger volume and portioning it into ice cube trays / small containers
- Reheated or defrosted food may require additional sauce / gravy as it tends to be drier
- Herbs and spices are useful to flavour pureed foods
- Remove the skin, bone, fat or gristle from the meat or fish. Cook without fat. After cooking dice into small pieces and blend with a low fat sauce / gravy granules / semi-skimmed milk / water. You may choose to casserole or stew your meat and then blend it
- Mash potatoes with semi / skimmed milk and liquidise or sieve if still lumpy. Instant mash can be used as an alternative
- Soft well-cooked pasta (such as canned pasta) liquidises well. Add extra sauce if required. Try to choose a tomato-based sauce
- Boil vegetables in a small amount of water till tender, drain and blend. Use the liquid the vegetables were cooked in if required
- Blend tinned, fresh or stewed fruit and add extra fruit juice for the desired consistency. Add artificial sweetener if required
- Try to liquidise dishes separately i.e. separate liquidised potato from liquidised meats, appearance and taste are important at this stage
- Try liquidising ready meals, tinned meats and stews

Control Portion Sizes
Try to eat small frequent meals. Aim for between 4-6 small meals / snacks per day to try and ensure you have enough protein in your diet. Each meal may consist of only 2-3 tablespoons such as a small, 25-75g, diet yoghurt. (The menu plans on the following pages provide more information).

Use a saucer or small bowl such as a ramekin to control your portion size. Use a teaspoon or child-sized cutlery to control how much you eat at a time.

Eat slowly. STOP eating as soon as you feel full. Having too much may make you vomit. In time, you will be able to recognise your tolerance level to food and fluid.

Sip at drinks between meals and aim for at least 2 litres of fluid/day. Separate drinks and meals by up to 30 minutes.
Protein is important in the early stages to promote wound healing and prevent muscle loss. Foods high in protein include meat, poultry, lentils, beans, pulses, milk, cheese, eggs and yoghurt. Aim to have a food high in protein at each meal. Milk-based products including yoghurt and cheese are often tolerated better than other foods high in protein at this stage.

You may find it helpful to freeze meals in ice cube containers, so meals are prepared quickly and food is not wasted. Take fluids between meals and at least 30 minutes before or after meals.

The meal plan for Stage 2 gives you an idea of the portion sizes that you should eat. If you eat or drink slightly too much, you are likely to have pain, discomfort and vomit. Wait at least 30 minutes before and after meals for fluids. Remember your new stomach is greatly reduced in size and it won’t take much to fill it completely.
Sample Meal Plan for Stage 2
Breakfast (1 meal = 2-3 tablespoons, equivalent to 6-9 teaspoons)

Choose one option from the following list:
- 2-3 tablespoons Weetabix / porridge / Ready Brek with plenty of low-fat milk
  made to a very liquid consistency
- 1 very soft cooked scrambled egg
- One small pot of diet / light yoghurt / fromage frais

Lunch / Evening Meal (1 meal = 2-3 tablespoons)

Choose one option from the following list:
- 25g (1oz) pureed meat such as chicken, beef, lamb, turkey, casseroled meat
  with pureed mashed potato
- 25g (1oz) pureed tender fish such as haddock, cod or plaice in white sauce
  with pureed mashed potato
- 25g (1oz) pureed canned fish in water, tomato sauce or brine such as salmon,
  tuna, mackerel, pilchards with pureed mashed potato
- 50g (2oz) smooth soft meat / fish / vegetable pate / paste with pureed mashed
  potato
- 50g (2oz) pureed soya protein alternatives/Quorn with tomato based sauce
  with 1 tblsp liquidised potato/pasta and/or 1 tblsp liquidised vegetables
- 50g (2oz) pureed peas / beans / lentils / vegetables
- 1 very soft cooked scrambled egg
- 50g (2oz) grated reduced-fat cheese, light cream cheese of pureed low fat
  cottage cheese or reduced-fat hummus mixed into hot food such as pureed
  potato
- 50g (2oz) pureed low-fat cottage cheese
- 1 meal replacement drink such as Slimfast, Complan and Build Up
- 100-200mls smooth soup containing meat/fish/beans/pulses/lentils, fortified
  with skimmed milk powder

Mid morning / Mid afternoon Snack

Choose one option from the following list:
- 200mls low fat milk (sipped slowly)
- 2-3 tbsp diet / light smooth yoghurt
- 2-3 tbsp fromage frais
- 2-3 tbsp smooth low-fat custard
- 2-3 tbsp light smooth mousse made with low-fat milk
- 2-3 tbsp milky pudding such as tapioca, sago and rice pudding
- 1 meal replacement drink such as Slimfast, Meritene and Complan
Supper

Choose one option from the following list:
- Pureed fruit such as banana, canned peaches or canned pears
- Diet / light malted drink made with low-fat milk (sipped slowly)

Only move on to stage 3 (soft diet) when you feel comfortable eating and drinking pureed foods and liquids. These pureed foods should not cause and vomiting or indigestion.
Soft Texture (Stage 3) (Approximately 4 weeks after surgery)

After approximately 2 weeks of the blended diet, continue to choose the foods from Stage 2 but slowly introduce new foods and replace them with more texture and variety. Portion sizes at this stage are starting to gradually increase. Remember to chew food well and stop as soon as you feel full.

Crispy foods are foods that fall to bits in water. These foods include Melba toast, crisp breads and bread sticks, foods that melt easily on the tongue. Try adding these initially to assess tolerance. They are different from crunchy foods such as raw vegetables and salad. Crunchy foods are likely to cause problems if eaten at this stage.

If you are able to manage a tea plate sized portion, have 3 meals a day and no snacks in between. Foods to try and introduce are:

- Casserole / stew / hot pot / slow cooked meat / fish served with mashed potato / couscous / vegetables
- Canned meat in sauce / gravy such as minced beef / lamb, chicken, ham, stewed steak with soft vegetables
- Cod / haddock in white sauce / parsley sauce (mashed) with boiled / mashed potatoes and soft / mashed vegetables
- Tuna / salmon canned in brine mashed with low-fat mayonnaise, low-fat salad cream or fat-free dressings, and soft / mashed vegetables
- Soft, plain omelette
- Soft-boiled / poached egg
- Well-mashed, mushy beans, lentils and peas, baked beans
- Canned vegetables or softly cooked vegetables such as carrots, cauliflower or broccoli
- Canned meals such as ravioli, macaroni cheese, beans, spaghetti
- 1-2 bread sticks; 1-2 slices of Melba toast; slices of crackers or crisp bread; ½ slice of wholemeal toast (without crust) with low-fat spread / light cream cheese / pate / paste
- Jacket potato with no skin or mashed potato with fillings such as mashed egg, tuna or salmon with low-fat mayonnaise or salad cream; low-fat cheese spread; cottage cheese (plain); baked beans; low-fat meat or fish paste
- Macaroni / cauliflower cheese (mashed) with soft / mashed vegetables / potato
- Fish / shepherds / cottage pie with soft / mashed vegetables
- Soft fruit such as ripe melon, ripe mango, banana, raspberries, strawberries, kiwi and blackcurrants

Only when you are able to tolerate a variety of foods from Stage 3 and you can manage up to a tea plate sized portion should you then move onto Stage 4. Try to introduce a variety of food from this stage before progressing to the next stage.

Normal Texture (Stage 4) (approximately 2-6 months after surgery)

Approximately 2-6 months after operation, you should be able to begin to eat up to a tea plate sized portion of a variety of solid food. It is important to start meals with high-protein foods such as meat, fish, eggs, peas, beans, lentils and soya protein to ensure that you have an adequate daily protein intake.

Aim to have a good variety of high-protein, low-fat and low-sugar foods. Fruit, salad and vegetables should be included at each meal as they contain vitamins and minerals, and help you feel fuller for longer.

Aim for no more than three tea plate sized meals a day. Avoid going back to meals once you feel full, and avoid snacking in between your meals as this will slow your weight loss. Your diet will need to be healthy and nutritious to prevent any nutritional deficiencies and achieve successful long-term weight loss.

If you choose to snack on high-calorie foods such as crisps, biscuits and chocolate, your weight loss will slow and you may gain weight.

Solid foods to include in meals are:
- 50g (2oz) tender, soft meat cut into very small pieces (1cm squares) and chewed thoroughly – try chicken, turkey, pork and beef
- 50g (2oz) tender, soft flaky fish
- 3 tbsp couscous, pasta, rice noodles
- 1 slice of toast (no crust)
- Vegetables or salad
- 1 small, soft, non-fibrous fruit such as a peeled apple, pear or banana

Although bread may remain difficult to eat, over time people find that they may manage wraps, chapattis, pitta bread or starch-reduced bread such as Danish bread.

You should be able to eat a healthy balanced diet such as the sample menu on the following page.
Sample Menu Plan for Stage 4

Breakfast
1 small bowl of branflakes (with skimmed/semi-skimmed milk)

Lunch
1-2 slices of toast (with a thin low fat spread) with scrambled egg
Piece of fruit (take care with the skin)

Evening Meal
2-4 small potatoes, chicken breast in a mushroom sauce and vegetables

Bedtime
2 crispbreads with a thin low fat cheese spread

Drinks
Reduced sugar / no added sugar squash
Tea / coffee with semi/skimmed milk (no sugar / sweetener if required)
Water

Snacks
If you are feeling hungry between meals, try to choose a healthy snack i.e. fresh fruit (take care with the skin), tinned fruit in natural juice, 1-2 crispbreads / breadsticks / melba toast / toast / cracker / rice cakes, low fat / diet / light yoghurt / fromage frais.

A balanced diet is important to keep you healthy and help you maintain the maximum amount of weight possible.
General Points to Consider When Returning to a Normal Textured Diet

- The most important point is that you ensure you make time for meals, sit down, chew food well and stop as soon as you feel full. Mealtimes may take 30 minutes, try not to make them last longer than this.
- Have fluids at least 30 minutes before or after meal times, avoiding having them together.
- If you are eating a tea-plate sized portion aim for 3 regular meals; if the portion size is smaller, aim for 4-6 small meals. If your meals are very small, a glass of low-fat milk or low-fat yogurt in-between meals will help meet your protein needs.
- Try not to replace meals with easily tolerated high calorie snacks such as crisps or chocolate
- It is recommended that you continue to take a vitamin and mineral supplement daily to prevent deficiency
- Choose a diet low in fat and low in sugar
- Aim for 6-8 cups (2-2.5 litres / 3.5-4 pints) of fluid each day to prevent dehydration and constipation. You may find it useful to carry a water bottle to ensure you are drinking enough.
- Take small regular sips when drinking to avoid gulping and swallowing air as you drink
- Choose tender meats i.e. stew, casserole, hot pot or add a low fat sauce or gravy as this may be better tolerated
- Continue to try different foods and have a varied diet – it is normal for foods to be tolerated one day then not the next.
  - If a food causes problems such as vomiting, avoid it for a few days and then try it again. Remember that one bad experience doesn’t mean that you won’t be able to tolerate the food forever.

Physical Activity

As you lose weight, think about how you can be more active. Making activity a long term lifestyle change will help improve your fitness and maintain your weight loss. Walking more, using the stairs instead of lifts or escalators, swimming and dancing are all good ways to start.
Tips for Healthy Eating on a Bariatric Diet

When starting the diet, try to eat 4-6 small meals / snacks each day. This will help you get the nutrients you need, promote wound-healing and fight infections. The diet includes high-protein, high-fibre foods that are low in fat, calories and sugar.

Protein
Having enough protein is vital for your surgery wounds to heal properly. Protein will also help you preserve your muscle and encourage your fat stores to be used as energy. Try to include lower-fat, high-protein foods such as those listed below:
- Fish
- Lean meat
- Eggs
- Peas, beans and lentils
- Soya and tofu
- Reduced-fat / half-fat hard cheese
- Low-fat cottage cheese
- Diet / light yogurts
- Fromage frais
- Low-fat milk (semi-skimmed, skimmed or 1% fat varieties)

Your appetite will be reduced in the early stages following your operation. Therefore, you will only be able to eat limited, small amounts of food. Always try to include some protein in your meals / snacks but remember to eat a variety of foods to make sure that you get all the nutrition you need.

Fat
Fat is very high in calories and can be difficult to digest after surgery. Fat can delay stomach emptying and lead to heartburn. Eating high-fat and fried foods will also slow your weight loss. Avoid high-fat foods to support your recovery and help your weight loss.

Sugary / Sweet foods and drinks
Sugary or sweet food and drinks tend to be high in calories, are often high-fat and provide few, if any, vitamins and minerals. Eating sugary or sweet foods following a bariatric procedure will slow weight loss and can lead to dumping syndrome. Symptoms include dizziness, feeling hot, sweating, palpitations, nausea, diarrhoea and shakiness. Avoid sweet / sugary foods to support your recovery and help your weight loss.

Cooking methods
How you cook your food is important. To reduce your fat and calories intake choose to grill, bake, microwave, stew, poach, boil and steam your food. Avoid frying and roasting.
Fluid

Aim for 6-8 cups (2-2.5 litres) of fluid per day. It is important to drink plenty of fluid to avoid becoming dehydrated and/or constipated. The best choices are listed below:

- Water
- Low-calorie/reduced-sugar/no-added-sugar cordial or squash
- Still diet drinks
- Tea, herbal tea or coffee
- Low-fat milk
- Diluted fruit juice (half water and half fruit juice)
- Thin, fruit smoothies (smooth varieties)

Avoid high-calorie/sugary drinks such as full-sugar fizzy drinks, squash or cordial, and full-fat milk and milky drinks. Remember that although fruit juice/smoothies are nutritious they contain a lot of calories – drinking several each day can significantly increase your calorie intake.

Avoid fizzy drinks following your surgery. They may make you feel bloated and can cause heartburn

Take small, slow, frequent sips of fluid throughout the day. This will help prevent you feeling sick, having pain or vomiting. Try to have at least 2 litres of fluid each day.

Take fluids between meals and at least 30 minutes before or after meals (from Stage 2 onwards).

Alcohol

After your recovery (approx 2 months) you may want to include alcohol in your diet. Always aim to keep the amount of alcohol within safe limits. Following weight loss surgery, think carefully before including it.

- Alcohol is high in energy and can increase appetite, so people often eat more high-calorie snack foods when they drink it. Try to avoid strong ales, normal alcopops and sugary mixers.
- Alcoholic drinks can contain sugar which may cause dumping syndrome
- Fizzy alcoholic drinks such as beer, lagar and sparkling wine can cause discomfort, so should be avoided.
- You will absorb alcohol a lot quicker following surgery, therefore a little alcohol will have a significant effect.

For general health, the NHS recommends:
- Men should not regularly* drink more than 3-4 units of alcohol a day.
- Women should not regularly* drink more than 2-3 units a day.

*Regularly means drinking this amount every day or most days of the week.
The following measures all provide one unit of alcohol:

- Half a pint of standard strength (3.5%) beer, lager or cider
- 1 small glass of wine (100ml)
- 1 standard measure of spirits (25ml)
- 1 small glass of sherry (50ml)

Vitamin and Mineral Supplements

It is essential for good long-term health that following surgery you take the vitamin and mineral supplements that are prescribed for you for the rest of your life. These include:

- Daily multivitamin and mineral supplement e.g. Forceval once a day (soluble or tablet). If you buy over the counter varieties, take 2 a day of complete supplements.
- Calcium and vitamin D supplement e.g. 1 calceous per day
- B12 injection every 2-3 months
- Iron as ferrous fumarate (210mg) 1 per day.

Initial nutritional monitoring via blood tests will be done every 3, 6 and 12 months. As time goes on this will be reduced.

Aftercare will be provided at the hospital clinic for 2 years follow up. After this time, your GP may do your annual nutritional monitoring for life.
## Suggestions for Suitable Alternatives for a Healthy Diet

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<thead>
<tr>
<th>Avoid</th>
<th>Alternatives</th>
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<tbody>
<tr>
<td><strong>Meat, fish and alternatives</strong></td>
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<tr>
<td>• Fatty meats and meat products such as sausage, pate, bacon, burgers</td>
<td>• Fish</td>
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<tr>
<td>• Pies and pastries, pork pie, sausage rolls, scotch eggs, pastries,</td>
<td>• Lean meat</td>
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<tr>
<td>quiche, samosas</td>
<td>• Eggs</td>
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<td>• Fish</td>
<td>• Peas, beans and lentils</td>
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<td>• Soya and tofu</td>
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<td><strong>Dairy</strong></td>
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<td>• Whole / full-fat milk</td>
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<td>• Butter / margarine / lard / dripping / oil / ghee</td>
<td>• Fromage frais</td>
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<td>• Cream</td>
<td>• Diet / light yogurts</td>
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<td>• Full-fat yoghurts</td>
<td>• Reduced-fat / half-fat hard cheese</td>
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<td>• Full-fat cheese</td>
<td>• Low-fat cottage cheese</td>
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<td><strong>Savoury snacks</strong></td>
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<tr>
<td>• Crisps</td>
<td>• Rice crackers</td>
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<td>• Nuts</td>
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<td>• Prawn Crackers</td>
<td>• Seeded crackers</td>
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<td><strong>Sweet food and snacks</strong></td>
<td>• Plain popcorn</td>
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<td>• Mints / toffees / boiled sweets</td>
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<tr>
<td>• Full-sugar jelly</td>
<td>• Sugar-free candy*</td>
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<tr>
<td>• Jam / marmalade / lemon curd</td>
<td>• Sugar-free jelly*</td>
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<tr>
<td>• Honey</td>
<td>• High-fruit content jam, used sparingly</td>
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<td>• Syrup / treacle / glucose syrup</td>
<td>• Artificial sweeteners*</td>
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<td>• Chocolate</td>
<td>• Small handful of dried fruit</td>
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<td>• Biscuits</td>
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<td>• Meringue</td>
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<td>• Puddings</td>
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<td>• Ice cream / sorbet</td>
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<td><strong>Drinks</strong></td>
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<td>• Full-sugar still drinks</td>
<td>• Diet still drinks</td>
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<td>• Fizzy drinks</td>
<td>• Diluted fruit juice (half water and half fruit juice)</td>
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<td>• Full-sugar cordial / squash</td>
<td>• Reduced / no-added-sugar cordial or squash</td>
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<td>• Energy drinks</td>
<td>• “Skinny”, low-fat or light milky drink varieties</td>
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<td>• Full-fat milky drinks such as lattes, mochas, frappes, hot chocolate, milkshakes</td>
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<tr>
<td><strong>Dressing and condiments</strong></td>
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<td>• Condensed milk, evaporated milk</td>
<td>• Light evaporated milk</td>
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<td>• Coconut milk</td>
<td>• Low-fat dressings and mayonnaise</td>
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<td>• Mayonnaise and creamy sauces</td>
<td>• Reduced-fat coconut milk</td>
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<td>• Salad dressing</td>
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*Sweeteners used in sugar-free varieties contain few calories, but may cause a laxative effect if eaten in large quantities*
Potential Problem Foods

There are some solid foods which may not be tolerated in the long term. These foods are more likely to make you vomit. However, everyone is different and if you can manage these foods there is no need to avoid them. Only introduce these foods once all other foods are tolerated.

- Bread particularly soft and white (not toasted)
- Overcooked pasta or rice
- Tough, dry meats
- Nuts
- Pips, seeds, skins, piths from fruit and vegetables
- Stringy vegetables such as green beans, asparagus
- Sweetcorn, mushrooms, lettuce, pineapple, oranges, dried fruits

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<thead>
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<tr>
<td>Bread (soft, white)</td>
<td>Crackers or toast</td>
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<td>Pasta</td>
<td>Use small shapes for soup</td>
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<tr>
<td>Tough/dry/gristly meat</td>
<td>Small pieces / mince Slow cooked / stewed</td>
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<td>Rice</td>
<td>Risotto</td>
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<td>Stringy/hard vegetables</td>
<td>Overcook: Cauliflower, broccoli, carrots</td>
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<td>lettuce, pineapple,</td>
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<td>oranges)</td>
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<td>Fruit pips, seeds, skins</td>
<td>Peel fruit / purée or stew Tinned fruit in juice</td>
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<td>&amp; pithy fruit</td>
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Frequently Asked Questions

Should I expect to be sick or vomit?

After surgery sickness or vomiting isn’t the same as pre-surgery. It can be used to describe times where food is regurgitated or a white phlegm is produced with or without regurgitation.
If this happens ask yourself the following questions:-

- Did I eat too quickly?
- Did I chew the food well?
- Was the food of the correct consistency?
- Did I allow enough time between my drink and my meal?
- Did I overeat?

Try to allow time for regular meals. Try to sit down for meals and chew food well. Try serving your meals on a tea-plate.

What can I do if I get constipation?

If you get constipated you can take a non-bulking agent such as Benefibre, Senna or Lactulose. To prevent constipation ensure you are drinking sufficient fluids and choose foods higher in fibre such as wholegrain cereals, bread, fruit and vegetables. Seek medical help if it becomes a problem.

What can cause diarrhoea?

There are a couple of reasons why people may experience diarrhoea.

- Diarrhoea can be a symptom of “dumping syndrome”. To prevent the symptom try to avoid the food or drink that may have caused it, try to choose low sugar alternatives
- Diarrhoea be caused by foods high in fat. Again consider what you have eaten and its fat content
- If you experience persistent diarrhoea after surgery contact your surgeon / dietitian for advice
Can I ever eat a Normal Textured diet again?

Over time you will find that the texture of food that you can eat will widen so you should be able to eat a varied diet once again. Make sure that you are more conscious that you are chewing food well, taking your time over meals and stopping as soon as you feel full.

I’ve heard that I may lose some hair – is that true?

In the early stages, weight loss can be very fast. Around 3-4 months after surgery some people notice that their hair is beginning to thin. However, providing the rate at which they are losing weight is slowing down and providing the diet is balanced with a good protein intake and that you are taking prescribed vitamin and mineral supplements. The hair will return to its normal condition.

Do I need to take Vitamins and Minerals?

It is essential for good long-term health that following surgery you take vitamin and mineral supplements for the rest of your life.

Please contact your GP or NHS 24
If an emergency please attend A & E

Remember it is important that you keep in contact with your dietitian and surgeon to ensure that you reach your optimum weight loss and remain healthy after surgery.