



Eating after a Nissen Fundoplication

A patient's guide

What is a Laparoscopic Nissen Fundoplication?

Laparoscopic (keyhole) Nissen Fundoplication is an operation to relieve chronic heartburn when it cannot be controlled with medication and/or lifestyle changes.

Heartburn is an uncomfortable burning feeling that usually starts in the middle of your chest, behind your breastbone, and moves upwards towards your neck and throat.

Heartburn is usually caused when the contents of the stomach are pushed back into the gullet (oesophagus), causing irritation of its sensitive lining.

The causes may include:

- Gastro intestinal reflux disease (when acid from the stomach flows back up into the oesophagus).
- Hiatus hernia (when part of the stomach slides into your chest cavity).
- Certain foods, smoking and alcohol may make the symptoms of heartburn worse.

Surgery can relieve your symptoms of heartburn, however in a small number of cases the symptoms can come back. Please discuss any concerns you may have with your surgeon.

Eating after a Laparoscopic Nissen Fundoplication

The long-term success of your Laparoscopic Nissen Fundoplication operation is dependent upon you complying with the following dietary recommendations.

- During the three weeks following the operation no solid foods should be eaten. This
 is because solid food can create pressure on your surgery site and may lead to vomiting
 and discomfort.
- It is important that you consume foods from all food groups, to ensure that your body gets the nourishment it needs, especially after having had surgery



Week 1 – A liquid diet

To ensure an adequate intake of energy, protein and other nutrients, the liquid diet must be based on milk. Aim for at least two pints (1.2L) of milk or a milk alternative a day. If you are unable to tolerate milk, speak to your dietitian who can suggest alternatives.

Fluids allowed

- Milk
- Nutritional supplement shakes or soups (e.g. Complan or Meritene)
- Yoghurt drinks and smoothies
- Soya milk with added calcium
- Still mineral water
- Still low-sugar squashes
- Smooth soups e.g. cream of tomato or chicken; or oxtail
- Tea and coffee
- Unsweetened pure fruit juice

Tip: To ensure that you are meeting full energy and protein requirements try adding sugar/syrup/cream to beverages and butter/cheese to soup.

- Gradually build up your volume of liquid taken over the first few days until you establish the amount of liquid that you can tolerate.

Suggested meal plan

Breakfast 1 glass of Meritene /Complan shake

Mid AM 1 glass of milk

Lunch 1 cup of soup (as above)

1 glass of liquid yogurt drink

Mid PM 1 glass of milk

Evening 1 glass of Meritene /Complan soup/Nourishment or

similar

1 glass of Meritene /Complan shake/Nourishment or

similar

Late snack 1 glass of milk

It is recommended that you take a **daily vitamin and mineral tablet** to ensure your body is getting all the nutrients it needs. This can be bought over the counter from a pharmacy or supermarket.













Weeks 2 and 3 – A soft moist diet

After two weeks, gradually start introducing foods with a soft moist texture.

- Foods should be broken into pieces or mashed with a fork.
 Some people prefer to blend or puree their foods.
- To start with you can only manage a few mouthfuls at each meal (2-3 tablespoons) but this will increase. To start with try things such as Weetabix with milk or mashed potato with gravy.





	Food suggestions
Cereals	- Weetabix or instant oats/Ready Brek with milk
Main courses	 Fish in white sauce Minced meat or chicken in tomato sauce Tender meat casseroles, stews or curries Soft pulses with stock/sauce e.g. dhal Soft omelette/scrambled egg Macaroni cheese/cauliflower cheese Fish pie Cottage pie Lasagne/cannelloni
Vegetables/ Potatoes	 Mashed potato/jacket potato without the skin Sweet potato, boiled plantain, carrot, broccoli, cauliflower, courgette, swede mashed with a fork
Fruit	 Stewed fruit Tinned fruit in natural juice Mashed banana
Puddings	Yoghurt / mousse/ fromage fraisCustard



Week 4 onwards - Return to a balanced, healthy eating diet

- It is important to eat three meals a day, with suitable small snacks in between.
- Try not to eat and drink at the same time and take your time when eating.
- Aim to include food from all four food groups.

Carbohydrates should form the basis of the diet and be eaten at each meal. For example bread, rice, pasta, potatoes and cereal. Choose wholegrain or high fibre options.

Protein helps make collagen and new tissue. Aim to have three to four portions each day. For example, meat, fish, beans, pulses, eggs, dairy, soy.

Vitamins and minerals help provide immunity to infection, are involved in blood clotting, skin repair. These are found in fruits and vegetables. Aim to have five portions each day. These can be fresh, frozen, dried or canned.

Fat is needed in small amounts to help protect and insulate the body. Fat is a source of essential fatty acids, which the body cannot make itself and helps the body absorb fat-soluble vitamins A, D and E. Examples of foods high in fat include butter, ghee, lard, cheese, oils, processed meats/cakes and biscuits.

For more information on a healthy balanced diet, see: https://www.nhs.uk/livewell/healthy-eating/Pages/Healthyeating.aspx



Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or whh-tr.whitthealthPALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3182. We will try our best to meet your needs.

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