

Contact details

Consultant Surgeon

Mr. P Sufi

020 72885226

Mr. D Heath

Nurse Practitioner

Kirsten McDougall

07769926527

Specialist Dietitian

Lucy Jones

02072885989

Other resources available in this series

- Eating after a gastric bypass
- Eating after gastric banding
- Controlling portions and meal planning
- Good sources of low fat protein following weight loss surgery
- Healthy recipes following weight loss surgery



Eating after a Sleeve Gastrectomy

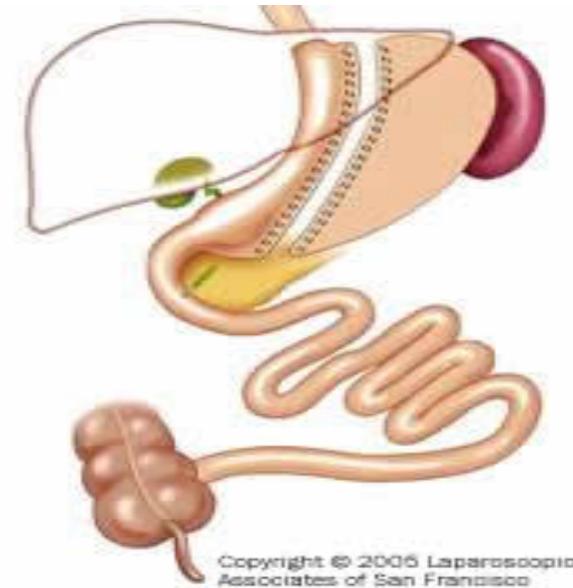


NLOSS
North London Obesity
Surgery Service

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A sleeve gastrectomy reduces the size of the stomach by about 75%. It divides the stomach vertically from top to bottom, leaving a banana shaped stomach along the inside curve and the pyloric valve at the bottom, which regulates the emptying of the stomach into the small intestine. This means that although smaller, the stomach function remains unaltered.



As a result, you will now only be able to eat small meals and will therefore lose weight, especially when you follow a low fat, low sugar diet. You will also keep the feeling of fullness for longer, which will help you to eat just three meals a day. However, you will suffer none of the side effects experienced by gastric bypass patients because your digestion is unaltered.

Introduction

What does a sleeve gastrectomy involve?

Eating after sleeve gastrectomy

The long-term success of your sleeve gastrectomy operation is dependent upon you following the dietary recommendations outlined in this booklet.

- During the four weeks following the operation no solid foods should be taken.
- Instead, you must have a liquid diet for two weeks followed by a soft moist diet for another two weeks. You can then start to add solid food.

Why?

- Solid food can create pressure on your stitches and stretch your new stomach pouch. This may lead to vomiting and discomfort.

Therefore, it is extremely important that you follow our guidelines.

- | | |
|--------|--|
| STEP 1 | Liquid diet for two weeks |
| STEP 2 | Soft moist diet for two weeks |
| STEP 3 | Start to introduce solid food and aim to follow a protein rich, low calorie healthy diet |

Follow the rules of healthy eating

Once your new eating habits have become established it is important that you follow a healthy diet, which will help to maintain your weight loss in the long term. Although your smaller stomach will limit the amount of food that can be eaten, weight gain can still occur if high calorie foods are eaten frequently.

- Ask your dietitian for advice on portion sizes.
- Try to use low calorie sweeteners and low fat spreads.
- Limit the amount of sugar and fats eaten.
- Alcohol is best avoided as it is high in calories and stimulates your appetite. It will also be absorbed more quickly, so even a small amount of alcohol will have a significant effect.

The eatwell plate

Use the eatwell plate to help you get the balance right. It shows how much of what you eat should come from each food group.



Advice on constipation

It is natural to expect some change in the frequency of your bowel habits; this is because the quantity of food you are now eating is considerably smaller than before the operation.

Initially you might find your bowels open less frequently i.e. every two or three days, due to the change in your diet. However, by including some of the foods listed below, your bowel movements should become more regular.

High fibre foods

- Whole-wheat breakfast cereals e.g. All Bran, Shredded Wheat, Weetabix, Bran Flakes, porridge oats
- Pulses e.g. baked beans, kidney beans, lentils, chick peas
- Whole-wheat crackers e.g. Ryvita, wholemeal crispbreads, Jacob's multigrain
- Fruit and vegetables e.g. cauliflower, broccoli, carrots, salad, green beans, peeled fruit, tinned fruit in juice

**It is also important to drink plenty of fluids between meals.
Aim for eight to ten cups a day.**

If constipation persists, try taking benefiber or fibersure, both available from local pharmacy. If this does not help, talk to your GP or a member of the obesity team.

Step 1

Weeks 1 and 2 – A liquid diet

To ensure an adequate intake of protein, calcium and other nutrients, the liquid diet must be based on **milk**. Ideally low fat milk should be chosen, e.g. semi-skimmed or skimmed. **Aim for at least two pints (1.2L) of milk or a milk alternative a day.** Milk can be flavoured with Nesquik or low calorie hot chocolate.

Other fluids allowed

- Slimming drinks e.g. Slimfast or chemist/supermarket own brand
- Complan or Build-up shakes or soups
- Yogurt drinks and smoothies
- Still mineral water
- Still low-sugar squashes
- Clear low-calorie soups
- Smooth soups e.g. cream of tomato or chicken; or oxtail
- Tea and coffee without sugar
- Unsweetened pure fruit juice
- Marmite or Bovril drinks

Take things slowly over the first few days until you establish the amount of liquid that can be tolerated.

Suggested meal plan

Breakfast	1 glass of Build up/Complan/Slimfast 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 Build up/Complan/Slimfast soup 1 glass of Build up/Complan/Slimfast shake
Late snack	1 glass of milk

Take the milky drinks first to ensure you are getting enough nutrients, and then have other fluids after that as required.

Tips

- Start with a couple of sips of fluid and slowly build up the quantity until a sensation of fullness occurs.
- It is important to stop drinking as soon as you feel full.
- If stomach pain or nausea is experienced while drinking stop until the feeling passes.
- If the quantity of fluid taken is too large the stomach will overfill and vomiting will occur.
- DO NOT drink fizzy drinks at any time after sleeve gastrectomy as they cause bloating and will increase your stomach size.

Although milk can provide most of the nourishment required, it does not supply all the vitamins and minerals your body needs. Therefore, it is essential that you take a daily multivitamin and mineral supplement, which includes iron, whilst you are not eating a normal diet. Ideally this should be in a liquid or chewable form or a solid tablet can be crushed or broken down into small pieces before being taken.

You will need to continue crushing or taking a liquid version of these tablets for at least one month and, ideally, for life.

Recommended multi vitamin:

- **Sanatogen A-Z** or **Centrum** (needs to be crushed)
- Or
- **Bassett's Adult Chewable multivitamins with prebiotics & mineral**
- **Wellkid Smart / Sanatogen A-Z for Kids Chewable Haliborange Chewable multivitamins**

Foods that may be difficult to introduce back into your diet

There are likely to be some foods that you may now have problems introducing back into your diet. The ability to tolerate various foods depends on how well you chew and how you cook and prepare the food. Try a food by eating a very small amount of it, if you can't tolerate it wait a month and then try it again.

Foods	Alternatives
Fresh Bread	Toast or crackers
Pasta	Serve in a generous sauce Use small shapes
Rice	Risotto
Certain meats e.g. steak, dry chicken, fried or roast meat, BBQ's	Small pieces/minced meat Marinade/slow cook/stew or casserole
Fibrous vegetables e.g. sweetcorn, celery, raw vegetables, courgette, aubergine	Peel off skins Cook for a long time Cauliflower, broccoli, skinned tomato, beetroot
Fruit e.g. oranges, grapefruit	Peel fruit Puree or stew Tinned fruit in juice e.g. peaches, pears

Pay attention to your body's signals of fullness.

- As soon as you feel full or you feel pressure in the centre of your abdomen stop eating or drinking.
- If you feel nauseous stop eating. One extra mouthful of food after these early signals could lead to pain, discomfort and vomiting.

If you do experience problems try to think back and identify the cause.

- a) Have you eaten too fast or not chewed the food well enough?
- b) Have you eaten too much, taken fluids with the meal or taken fluids too soon before or after the meal?
- c) Have you eaten foods that are difficult to digest?
- Identifying the cause of your discomfort will help you make the necessary changes the next time you eat.
- Keeping a food diary may help.
- If you experience regular vomiting seek advice from a member of the obesity team or your GP.

Eat three meals a day to ensure you are well nourished.

- Do not skip meals and eat “on the run” as this tends to result in food being eaten too quickly with inadequate chewing.
- Also, the types of food that are easy to eat “on the run” tend to be higher in fat and calories.

Continue to take your liquid or crushed multivitamin and mineral tablet unless advised differently by your dietitian or doctor.

Weeks 3 and 4 – 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. Remember to stick to small portions and you may find it helps to eat from a side plate.

	Food suggestions
Cereals	1 Weetabix or 1 sachet of instant oats/Ready Brek with low fat milk
Main courses	Fish in white sauce Minced meat or chicken in tomato sauce Tender meat casseroles or stews Soft pulses with stock/sauce e.g. dhal Soft omelette/scrambled egg Macaroni cheese /cauliflower cheese Fish pie Cottage pie Lasagne / cannelloni Cottage cheese
Vegetables	Mashed potato / jacket potato without the skin Sweet potato Carrot, broccoli, cauliflower, courgette, swede mashed with a fork
Fruit	Stewed fruit Tinned fruit without syrup (not pineapple) Banana mashed
Puddings	Low calorie yoghurt Low calorie mousse Low calorie fromage frais Low calorie custard

Step 3

Week 5 onwards – A protein rich, low calorie diet

It is now safe to gradually start switching over to a diet of healthy protein rich, low calorie solid foods. As a result of the sleeve gastrectomy surgery, your portion sizes are now restricted, so your protein intake can fall. So it is very important to make sure that you have enough protein in your diet every day.

Take things slowly until you're sure about the amounts and types of foods you can tolerate. Experiment to find out what quantities and types of food work for you.

To help achieve your weight loss goal, keep in mind that your new diet needs to be **low fat, low calorie** and **portion controlled**.

Examples of good sources of protein

Aim for 2 to 3 portions a day from a variety of foods.

Dairy	Skimmed or semi skimmed milk Add skimmed milk powder to milk & sauces Low calorie/diet yogurts, yogurt drinks Low sugar/low fat custard and milky puddings Low fat cheese & cottage cheese
Eggs	Scrambled, omlette, poached
Pulses	Lentils, beans (add them to stews & casseroles)
Meat	Minced meat in gravy or sauce Casserole meats
Fish	Canned oily fish e.g. tuna, sardines, pilchards Soft white fish – try it in sauce
Protein shakes	Build Up soup, Build Up/Complan shakes Slim fast shakes/smoothies/soups

Important things to remember following a sleeve gastrectomy

Keep to smooth, soft foods

- Such as low fat milk puddings, mashed potato, Ready Brek, cereal soaked in milk, cottage cheese, scrambled egg and flaked fish.
- If these are tolerated, start including solid foods with various different textures remembering to chew well until the food reaches a puree-like texture.

Make sure you eat enough protein

- Eat your protein foods first.
- Drink 3 cups of skimmed or semi skimmed milk, or calcium fortified soya milk each day to provide enough protein and calcium to keep you healthy.

Do not drink and eat at the same time

- Drinking fluids with meals may overfill your small stomach, which will lead to vomiting.
- It can also stretch the stomach and “wash” food through too quickly. As a result you will not sense the early signs of fullness and may over eat.
- Avoid drinking at least 30 minutes before and after each meal.

Chew food well until it feels like a puree in your mouth.

- If the food isn't chewed well you may block the outlet of your stomach, which will cause pain, discomfort, nausea and vomiting.

Eat foods slowly.

- It may take 20 minutes to eat 2 tablespoons of food; most people find the average meal takes about 45 minutes.
- Explain to others why you must eat slowly so they don't rush you.