

Roux-en-Y Gastric Bypass Surgery

*What You Need to Know
Before and After Surgery*

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What You Need to Know Before and After Surgery

Fourth edition

Developed by Allina Hospitals & Clinics

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Making the Decision

Losing weight can be difficult. Gastric bypass surgery, which reduces the size of your stomach, is a way to limit the amount of food you eat by making you feel full faster. Although this may sound like an easy answer, it is not magic.

This surgery requires major, life-long changes in your eating habits and your attitude about food. This is not a “one-time shot.” Every day you will need to make the right food and exercise choices.

For a healthy lifestyle after surgery, you will need to make behavior as well as nutrition changes. Hundreds of patients have succeeded with this program. You can too, with self-discipline, emotional energy and the support of family and friends for your long-term health.

You will also get support from your doctor and a staff of nurses. The program manager and bariatric nurse clinicians work with hundreds of gastric bypass patients and are specially trained.

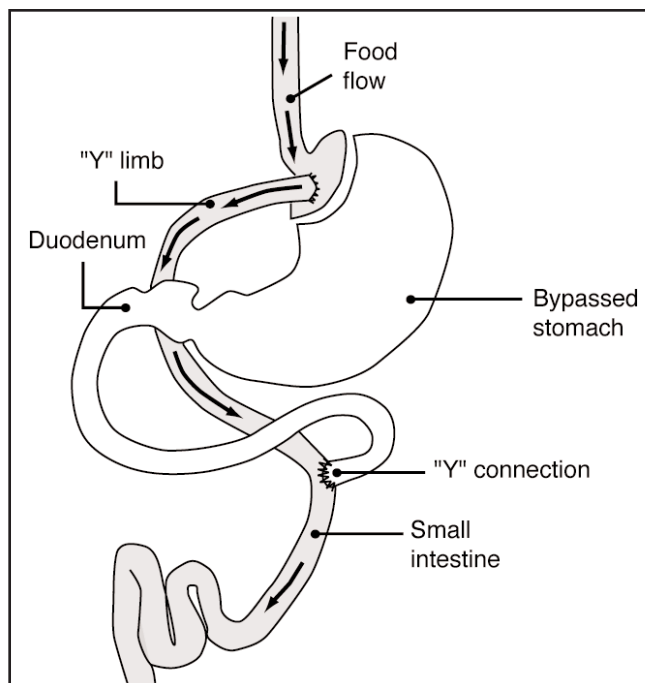
This booklet gives you an overall view of Roux-en-Y gastric bypass surgery, what you need to do before and after surgery, possible complications and dietary information.

If you have questions, call your bariatric nurse clinician at 763-236-2045.

General Information

This surgery has a number of names: obesity surgery, bariatric surgery and weight loss surgery. The medical name is Roux-en-Y gastric bypass. It changes the size of your stomach to help you succeed at long-term weight loss. Part of your small intestine is bypassed, which also helps with your overall weight loss.

Your doctor will reduce the size of your stomach with this surgery. Your stomach will be stapled and then divided, making two different sections: the new stomach pouch and the bypassed stomach.



Because the small intestine is separated and part of it is attached to your new stomach pouch, it will look like a “Y.”

Part of your small intestine will be separated and attached to the stomach pouch so your food will go right into the small intestine after it goes through the stomach pouch.

The bypassed stomach will then be sewn closed, but will continue to produce acid and digestive juices. Because the small intestine is separated and part of it is attached to your new stomach pouch, it will look like a “Y” and that’s where the surgery got the “Y” in its name.

This surgery cuts down the amount of food and liquid your stomach can hold at one time. As a result, your stomach can only hold about 1 to 2 tablespoons of food at the beginning. This satisfies your hunger more quickly than when your stomach was able to “stretch.” If you try to eat too much or too quickly, you may vomit or feel a wave of nausea or abdominal pain.

This surgery does carry risks. Possible complications include infection, bleeding, hernia, ulcers, clogging and decreased absorption of some vitamins. Death and other risks from this surgery are slight (about 1 percent), about the same as that for other major abdominal surgeries.

Is there a chance you could regain weight?

You will always have a tendency to regain weight after the surgery. While you have the responsibility to continue your weight loss, the bariatric program staff will always be available to help you.

Patients may sometimes become frustrated and discouraged when their weight levels (plateau). Please think of the bariatric program staff as your coach and friend. Seek their support whenever you need it.

A low-fat, low-sugar, low-calorie diet and routine exercise will help you make this surgery a success.

Before Surgery

- **Lose at least 10 percent of your excess body weight.** Weight loss surgery is major surgery. You are at a greater risk than someone who is not morbidly obese. It is to your advantage to be in the best shape possible when you have surgery.

You need to lose **at least** 10 percent of your excess body weight. That will also “shrink” your liver and allow the doctor to make a smaller incision (about 3 1/2 to 5 inches long). Losing weight before the surgery will also help you have less pain after surgery. You will not be scheduled for surgery until you have lost _____ pounds. This will bring your weight to _____ pounds, the amount determined when you met with one of the bariatric nurses.

If you need an X-ray, most equipment will not hold patients who weigh more than 350 pounds. Some patients may have to lose more than 10 percent of their excess body weight for safety reasons.

- **Do not smoke.** If you smoke, you **must** quit at least 8 weeks before your surgery. You will be having major surgery and you will need your lungs to be in the best shape as possible. Smoking affects your supply of oxygen during surgery.

Smoking is also harmful after surgery. This is because smoking constricts your blood vessels and blocks oxygen from going to the site of the surgery. This significantly slows the healing process. Smoking increases your chances of getting pneumonia or other lung problems while you recover. Chemicals in smoke can also irritate and cause ulcers in your pouch.

Smoking puts you at a higher risk for getting pneumonia after surgery. Smoking also changes your metabolism, the absorption of vitamin B₁₂ and iron, and increases your risk of stroke.

- **Have a psychological evaluation.** All gastric bypass patients are required to meet with a psychologist recommended by the nurse clinician. The health care staff needs to know if you are mentally and emotionally ready to have this surgery and if you are ready to adjust to the changes after surgery. It is common for morbidly

obese people to be depressed and have strong feelings of failure, low self-esteem and poor health. Morbid obesity is defined as being about 100 pounds overweight or having a body mass index (BMI) of 40 or more.

Some people have unrealistic expectations of how their lives will change after surgery. This evaluation will address all of these feelings.

Becoming thin will not cure your negative feelings and problems. After surgery, you may find the psychologists a helpful resource to deal with issues of eating, self-image and changing relationships.

- **Gradually stop drinking/eating caffeine.** It is a good idea to start weaning yourself off caffeine. If you do not, you may have a bad headache from caffeine withdrawal after surgery. Limit yourself to 1 cup or can of caffeinated beverages each day.

Caffeine is a diuretic, so it can dehydrate you. Because of this, you will need to drink an extra 1 1/2 cups of water for every 1 cup of caffeine you drink. Caffeine can irritate your new pouch. It can also prevent your body from absorbing iron and cause iron-poor blood (anemia). Also, caffeine can be an appetite stimulant and make you want to eat more.

- **Do not donate blood/plasma.** You do not need to donate blood for your surgery. Please do not donate blood or plasma for 2 months before surgery. After 1 year, you will have routine lab tests. Your ability to donate blood/plasma will be determined at that time.

One Week Before Surgery

- **Review this book.**
- **Eat a light diet only.** Do not eat anything fatty, fried or high in calories. Please don't cheat. Your surgeon can tell what type of foods you've been eating at the time of surgery.
- **Drink only liquids the day before surgery.**
- **Get a physical.** Within 7 days before your surgery, you will need to have a health history and physical done with your family doctor.

He or she should fax or give the results directly to the hospital as well as give you a copy to bring to the hospital.

- **Go to the grocery store.** You will not feel like grocery shopping after your surgery. Look at page 18 to see a list of choices to buy for liquid meals after surgery. You should buy small quantities. Here is a list of kitchen utensils you should have on hand:

- blender
- strainer
- measuring spoons
- small plate
- toddler-size spoon and fork
- water bottle with no straw
- ice cube trays.*

Buy over-the-counter pain medicines before surgery (on page 13 under pain control).

* Ice cube trays can be used to make small portions and freeze pureed food for several days.

Pre-admission Information

One or 2 days before your surgery, someone from the admissions office will call you to start your registration. Someone from the surgical team will also call you to answer your questions and give you pre-surgery instructions.

■ What to bring.

- You may bring your own night clothes, but the hospital does have gowns that will fit you.
- You may bring your own personal care items.
- Bring all medicines, in their original bottles, that you are currently taking. This includes inhalers, eye drops and over-the-counter medicines, for your medical team to review.
- Bring your incentive spirometer.
- Bring your insurance card.
- Bring your CPAP machine if you use one for sleep apnea.
- Bring this book.

Do not eat or drink anything after midnight the night before your surgery.

At the Hospital

- **Admission.** Arrive at the hospital at least 2 hours before the surgery, unless your nurse gives you other instructions. Check in with the Admissions/Patient Registration desk. A nurse will give you a pre-surgery interview and tell you what will happen during and after the surgery. The nurse will also weigh you. If you have not kept off or lost all the weight as written on page 7, your surgery may be canceled. If you have smoked in the last 8 weeks, your surgery may also be canceled.
- **Before surgery.** About 30 minutes before the surgery, you will change into a hospital gown and robe and go to a pre-surgery area.
 - You will meet the surgery team, including the nurse, doctor and anesthesiologist.
 - You will have an intravenous (IV) line put into your hand or arm.
 - Your family members will be in a waiting room during surgery.
- **Surgery.** This will take about 90 minutes to 2 hours. When the surgery is done, your doctor will meet with your family in the waiting room.
- **After surgery.** You will go to the recovery room for at least 1 hour. There, the nurses will watch your blood pressure, heart rate and other vital signs. You will then be taken to your room.

Other activities after surgery:

 - Nurses will help relieve your discomfort. This includes pain medicine. If you are in pain, let the nurses know so they can give you the right pain medicine.
 - Staff members will help you get out of bed and take a walk around the hospital floor about 2 hours after you go to your room.
 - You will still get fluids through the IV tube.
 - Your first fluids by mouth will be small sips of water (at room temperature) and will likely be started the day after surgery.
 - Once you can tolerate water, you can have clear liquids such as broth, unsweetened gelatin and unsweetened, diluted fruit juices. Drink the liquids slowly so you don't put pressure on the new opening of your stomach pouch.

- **Liquids.** To keep from getting dehydrated, you need to drink liquids your stomach can handle. Remember, your stomach pouch will be touchy for several weeks after surgery. If you drink liquids too quickly, cramping, nausea, pain or vomiting may happen. All liquids must be room temperature. Do not use straws, ice, and cold or carbonated liquids for the first 3 weeks after surgery. They could cause uncomfortable spasms or gas buildup.
- **Intake record.** While you are in the hospital, you will fill out a record of what you drink and how much you drank. The following is a sample of the form you will get in the hospital. Once you get home, you should keep a record of your intake in a notebook. Your nurse can answer any of your questions. The intake record is on the next page.
- **The rest of your hospital stay.**
 - To help prevent breathing problems, take about 4 breaths into your incentive spirometer followed with a cough every hour you are awake. Put a pillow on your incision site while you cough to limit your discomfort.
 - Let the nurses know how you are feeling. Ask for help if you need it.
 - Standing up straight and walking will help you regain your strength.
 - A dietitian and a pharmacist will talk with you the day after your surgery. Nurses and your doctor will check in with you regularly. They will answer your questions.

Intake Record

Post-Op Day: _____

Name: _____ Date: _____

Liquids

10 p.m. - 6 a.m.

6 a.m. - 2 p.m.

2 - 10 p.m.

Summary of diet instructions: 24-hour intake

Drink slowly When full STOP

- Sit up straight in a chair when you drink liquids.
- Do not use straws. They will cause you to swallow air bubbles and will add to your discomfort.
- Measure liquids and record the amount you drink in the space provided.

NOTE: 1 teaspoon = 5cc 1 tablespoon = 15 cc 1 ounce = 30 cc

A small supply of medicine cups for drinking will be sent home with you to use until you are comfortable with the amount to sip.

- First day home = 42 oz. (84 half full medicine cups or five 8-oz. glasses)
- Second day home = 52 oz. (104 half full medicine cups or six and one-half 8-oz. glasses)
- Daily after second day = 64 oz. (128 half full medicine cups or eight 8-oz. glasses)

At Home

- **Breathing exercises.** For the first week at home, keep using your incentive spirometer every 2 hours during waking hours. This will help prevent breathing problems.
- **Pain control.** Many patients may use the liquid narcotic Lortab® for more intense pain. During the day, you may take liquid or chewable over-the-counter pain medicine, such as junior strength Tylenol® (chewable), children's Tylenol® (liquid) or Excedrin® Quick Tabs™. You will want to buy these before coming home after surgery. If you don't, you can buy them at the Unity Hospital outpatient pharmacy.
- **Gas discomfort.** If you have gas pains you may try chewable Gas-X®.
- **Activity.** Move around during the day and take naps or rest when you need to. Take short walks as your energy level and the weather allow. Use stairs as you are able. **Exercise every day after surgery.** Slowly increase how long and how hard you exercise. You should be walking at least 2 miles a day within 2 months of surgery. If joint problems or arthritis keep you from walking, try swimming. It is OK to swim 4 weeks after surgery.
- **Activity restrictions.** To help your muscles heal right and to avoid getting a hernia, follow these guidelines:
 - Do not lift anything heavier than 30 pounds for 6 weeks after surgery.
 - Do not do any abdominal exercises (like sit-ups) for 6 weeks.
 - Avoid these activities for 6 weeks: 4-wheelers, lawn mowing, running, skiing, swimming and other water sports, golf and exercise clubs.
 - Do not do heavy housework (vacuuming, mopping, lifting laundry baskets, etc.) for 1 month.
 - Do not have sexual intercourse for 1 month.
 - Do not drive a vehicle until you have been off your oral narcotics (such as Lortab®) for at least 48 hours.

— Do not do any long-distance traveling for 6 to 8 weeks. Please talk with your surgeon about any travel plans you have before surgery.

- **Feeling lightheaded or dizzy.** Sometimes you may feel lightheaded or dizzy. This is caused by not drinking as much liquid as you did before surgery. You may also get dizzy when you get up from a chair or when you bend over. This can be caused by your blood pressure shifting and it should be temporary.

When you feel lightheaded or dizzy, do not panic. If you can find a comfortable place, sit or lie down. Your body will adjust and your blood will flow normally.

Be sure to drink 6 to 8 glasses of water each day. If you drink less water, you are at an increased change of feeling lightheaded or dizzy.

- **Return to work.** Your surgeon will want you to stay out of work for 10 days to 6 weeks, depending on the physical demands of your job.
- **Care of the incision site.** Your incision will go straight down the middle of your abdomen, from below your breast bone to above your belly button. You will have a clear plastic covering over your incision, which may be taken off 1 week after surgery. You may shower and bathe with soap after surgery.
- **When to call your surgeon.** Call your surgeon's office if you notice any of the following signs:
 - increasing redness, swelling, or pain in your incision
 - body temperature higher than 101 degrees Fahrenheit
 - increasing, severe abdominal pain
 - pain, redness or swelling to your lower legs
 - shortness of breath
 - pain in your shoulders.

- **Pregnancy.** You **must not** get pregnant for the first 18 months to 2 years after surgery. Your baby is at greater risk for birth defects and your health is also at risk the first year after the surgery. **Rapid weight loss increases fertility (your chance of becoming pregnant), so you need to use 2 methods of birth control.**
- **Bowel changes.** You may have liquid stools for the first 3 weeks after surgery. This is normal. If they become too frequent, you may take anti-diarrheal products that are liquid or chewable, such as Imodium AD®.
- **Gas or constipation.** If you have not had a bowel movement for at least 5 to 7 days after surgery and you feel crampy, bloated and/or gassy, take 1 tablespoon of milk of magnesia. Be sure to drink lots of water after taking this mild laxative.
- **Emotional changes.** You will likely go through ups and downs when you're at home. These feelings are completely normal and usually go away within a week or so.

Diet

General eating guidelines. Your new stomach will be able to only hold 2 tablespoons or less at first. Because of this, you may not feel fullness but a sense of satisfaction. This sensation is your signal to stop eating. General eating guidelines include:

- Stay on a liquid (at room temperature) diet for 3 weeks after surgery. You will not be physically hungry but you may feel emotionally or psychologically hungry. This hunger feels very real, but it is your body's reaction to not getting any food. *This hunger is not real.* Your new stomach is very small and swollen from the surgery so it is important to realize that this hunger is not real. You must stay faithful to the liquid diet for 3 weeks or you may ruin your surgery and/or have severe complications after surgery.
- Drink slowly and **do not use a straw** for 3 weeks after surgery.
- After 3 weeks of liquids, you may go to a pureed diet. You will stay on this diet for 7 days.
- After 7 days of pureed food, you may start to add soft foods. Add only one new food at a time.
- Make sure you eat foods high in protein.
- Eat slowly. Set aside 20 to 30 minutes for each meal. Stop eating when you feel satisfied or at 30 minutes. One bite too many may make you uncomfortable, nauseated, or sleepy. Putting your fork down between bites may help.
- Take small bites and chew your food 20 to 30 times (or to the texture of applesauce). If you swallow food without chewing well, you can block the new pouch opening. This will cause pain, nausea and/or vomiting.
- Eat at the dining room or kitchen table. Eating while watching TV may distract you from chewing well.
- Remember not to sample foods when you cook. Also, when eating, keep the serving bowls away from the table so you are less likely to take seconds.
- Do not drink liquids with your meals or in the 30 to 45 minutes after eating. Liquids will overflow your stomach. They may also "wash" your food through your stomach pouch too quickly so you won't feel full when you actually are.

Questions to Ask Yourself When You Eat

- Was the bite small enough?
- Did I chew it 20-30 times to the consistency of applesauce?
- Did I slow down and take 20 to 30 minutes to eat?
- Did I stop eating when I felt satisfied?

Coping Strategies

Besides the ideas listed at the right, you can:

- Be sure to drink 6 to 8 cups of water a day, in between meals.
- Eat breakfast, lunch and dinner each day at the same times. Do not skip meals. Skipping a meal may make you overeat at the next meal. Breakfast needs to be an important part of your everyday routine. Eat breakfast within 90 minutes of waking up.
- Stay away from high-calorie beverages and foods like milkshakes, pop, ice cream and alcohol. They leave your stomach pouch quickly and leave you feeling hungry. In some cases, high-calorie beverages and foods may cause weight gain or severe diarrhea.
- Avoid alcohol during rapid weight loss (6 months) and limit alcohol use for the rest of your life.
- In general, avoid foods that are greasy and high in fat and sugar.
- Choose nutritious foods and treat yourself to the highest quality food you can afford. Because you are not eating much, you need food that will nourish your body with vitamins and minerals. If you want fresh strawberries in December, for example, go ahead and buy them.
- Don't drink more than 1 cup of a caffeinated beverage (coffee, tea or diet cola). The caffeine can prevent your body from absorbing iron and cause iron-poor blood. Also, caffeine is an appetite stimulant and can make you want to eat more or snack. (See caffeine on page 8.)
- If you feel a need to eat when you are feeling upset, bored, nervous, or any other feeling, you can:
 - brush your teeth
 - go for a walk or go for a drive
 - call a friend
 - write in a journal
 - go to a support group or visit the obesity message board on www.medformation.com
 - go to the gym or work on a project/hobby
 - go to a movie
 - rest, take a bath
 - drink water
 - turn off the TV.

Diet Plan the First 5 Weeks After Surgery

First 3 Weeks

- **Liquid diet.** Choose from the following:
 - water
 - broth, bouillon or granules
 - sugar-free drink mixes, such as Crystal Lite[®], sugar-free Kool Aid[®]
 - 100 percent fruit juices, diluted two-thirds water to one-third juice at first (Juice could cause you to dump. For more information, see page 33.)
 - sugar-free Jell-O[®]
 - *skim milk (could cause you to dump, if so, try lactose-free milk or try heating the milk and skim off the top layer). You may add sugar-free Nestle[®] Nesquik[®] to flavor the milk.
 - non-caffeine herbal teas
 - diluted decaffeinated coffee
 - sugar-free Popsicles[®]
 - sugar-free lemonade
 - Propel[®] Fitness Water (This is a good source of potassium and vitamins.)
 - Resource[®] Beneprotein[™] supplement (available at Unity Community Pharmacy), add to liquids
 - **strained** low-fat clear soups that are diluted with water on a 1-to-1 ratio, such as Campbell's[®] Chicken Noodle.

* high-protein liquids

Remember:

- You should be drinking water 2 or 3 ounces every 30 minutes.
- Sit straight in a chair when drinking liquids.
- Do not drink anything cold, with ice or carbonated for 3 weeks.
- Do not use a straw for 3 weeks.
- Avoid chewing gum. Gum will cause gas and severe clogging if swallowed.
- Liquids should be at room temperature or warm.

Tip

Divide your liquids:

- 24 oz. before lunch
- 20 oz. before supper
- 20 oz. before bed.

You will be able to increase how much you drink over the first several days and weeks. You should work toward drinking an 8 ounce glass of liquid 6 to 8 times a day (slowly during the day). If you feel fullness, pain or nausea, stop until the feeling goes away. To keep from getting dehydrated, you need to slowly drink water and low-calorie liquids all day long.

Dehydration

Watch your urine for a dark color or strong odor, or watch for a bad taste in your mouth, with nausea. These are signs of dehydration that tell you to drink more. Clear, light yellow urine means you are drinking enough. Your goal on the first day home is to drink a **minimum** of 42 ounces of fluids. On your second day home, you need to drink a minimum of 52 ounces and by your third day you need to be drinking at least 64 ounces of fluids.

Note: About **10 days** after surgery you can add these liquids:

- V8® 100 percent vegetable juice or Diet V8 Splash®
- tomato juice
- tomato soup (Mix soup with one-half water and one-half skim milk, or all water if you can't tolerate milk.)
- low-fat cream soups, **strained** (Mix soup with one-half water and one-half skim milk, or all water if you can't tolerate milk.)
- sugar-free/low-fat Fudgsicle® or Blue Bunny® Health Smart® fat-free cream bars.

Patient suggestions

There are no guarantees for weight loss, even with this surgery. You will need to make a commitment to change your lifestyle. This commitment will need to last a lifetime. The following are tips from other gastric bypass surgery patients that you might find helpful.

- Go grocery shopping before you go to the hospital.
- Keep lots of liquids at room temperature.
- Sip your way through the day to get enough liquids.

- Be dressed during the day so you feel “less sick.”
- Vary your diet with herbal teas. Mint teas are soothing.
- Dilute juices with 2 parts water for the first 3 weeks.
- If you try sugar-free Popsicles®, melt them in your mouth before swallowing.
- Add mild seasonings to broth to make it more interesting.
- Beware of TV: there are many food ads.
- Keep a journal.
- Follow the rules.

If you want to talk to any other patients before or after your surgery, it would be good for you to attend the gastric bypass support group called “Images.”

Fourth Week

- Start your vitamins.
- **Pureed diet.** Start your diet on _____.
After you have been on the liquid diet for 3 weeks, start adding foods that you puree in a blender. Stay on this diet for 1 week. Although pureed foods may not be appetizing, they are important for your stomach to heal. Food that is not pureed may block or clog your new stomach pouch or cause cramping and vomiting. All solid foods should be the consistency of applesauce this week.

On the fourth week, start adding foods such as:

- *plain or lite fruit-flavored yogurt (no chunks); low-fat and low in sugar
- *small curd, fat-free cottage cheese
- *sugar-free pudding
- *pureed meat
- cooked cereal (such as unflavored Cream of Wheat® or Malt-O-Meal®)
- pureed green beans, frozen squash, mashed potatoes
- unsweetened pureed applesauce, peaches, bananas
- Beneprotein™ can be added to solid foods.

* high-protein foods

Sample Menu

Breakfast

- 1 Tbsp. yogurt (low-fat, low sugar)
- 1 Tbsp. Cream of Wheat®
- 1 Tbsp. pureed fruit

Lunch

- 1 Tbsp. cottage cheese (low-fat)
- 1 Tbsp. pureed vegetable
- 1 Tbsp. pureed fruit

Dinner

- 1 Tbsp. pureed meat
- 1 Tbsp. pureed vegetable
- 1 Tbsp. pureed fruit

tsp. = teaspoon, Tbsp. = Tablespoon

Between meals you need to get a good balance of liquids. Here are some examples:

- water
- skim milk, lactose-free or soy milk: limit to 1 cup (if it doesn't cause you to dump)
- 100 percent fruit juice diluted: limit to 1 cup
- sugar-free liquids.

Remember:

- Eat small bites.
- At first, you will only be able to eat 1 to 2 tablespoons. Eat only until you are satisfied.
- Eat the protein part of your meal first.
- Do not drink liquids with your meals or for 30 to 45 minutes after a meal.
- Continue to drink at least 64 oz. of fluids (mostly water) every day.
- Avoid liquid calories between meals.

You should take about 20 to 30 minutes to eat 1 to 2 tablespoons of pureed food. Most people feel satisfied after eating this much. Keep in mind how the pureed food feels in your mouth.

Once you start eating regular food, you will want to chew it well to the consistency of pureed food before swallowing.

Helpful hints:

- Make sure you have a blender that purees.
- Add liquid to the blender to get food to a runny texture.
- Baby foods give an easy, wide variety of options.
- Choose low-calorie cream soups; strain them.
- Try freezing pureed foods in an ice cube tray so you can pop them out and heat them in a microwave for an easy meal.
- Use an infant or toddler-size spoon to keep you from taking too big of a mouthful of food.
- Use a smaller plate so your food fills it better than a regular dinner plate.
- Mark the start dates for pureed foods and soft foods on a calendar.
- **During warm/hot weather, drink more than 64 ounces of water. You are at risk for dehydration (loss of fluids). Add potassium-rich salt (Morton's Lite Salt®) to your food and liquids to prevent losing this important mineral.**

Fifth Week

- **Regular diet.** Start your diet on: _____.
Start adding foods such as:
 - *eggs (avoid scrambled eggs at the beginning)
 - *egg salad (mix with fat-free mayonnaise)
 - *tuna salad (mix with fat-free mayonnaise)
 - *baked fish
 - *tender, moist meat
 - *low-fat or fat-free refried beans
 - *peanut butter
 - *low-fat cheese
 - *baked beans (no sugar or brown sugar added)
 - crisp toast
 - low-fat, high-fiber crackers (like reduced-fat Triscuits®)
 - canned vegetables (no corn or peas)
 - baked potato (no skin)
 - bananas
 - unsweetened canned fruits
 - cantaloupe
 - watermelon.

* high-protein foods

Sample Menu

Breakfast

- 1 Tbsp. soft-cooked egg
- $\frac{1}{4}$ slice toast with 1 tsp. fat-free peanut butter
- 1 Tbsp. banana or canned fruit
(light or in own juice)

Lunch

- 1 Tbsp. tuna
- 2 crackers
- 1 Tbsp. canned fruit

Dinner

- 1 Tbsp. meat
- 1 Tbsp. vegetable
- 1 Tbsp. potato

Between meals you need to get a good balance of liquids. Here are some examples:

- water
- skim milk, lactose-free or soy milk: limit to 1 cup (if it doesn't cause you to dump)
- 100 percent fruit juice diluted: limit to 1 cup
- sugar-free liquids
- Propel® Fitness Water.

Remember the following life-long guidelines:

- Eat only until you are satisfied.
- Chew each bite 20 to 30 times.
- Eat the protein part of your meal first.
- Do not drink liquids with your meals.
- You still need to drink 6 to 8 cups of water each day.
- An easy way to estimate portions is think of the following:
 - Your thumb equals about 1 ounce of cheese or meat.
 - Your thumb tip equals about 1 tablespoon.
 - Your fingertip equals about 1 teaspoon.
 - A deck of cards equals about 3 ounces of cooked meat, poultry or fish.

Eat a Balanced Diet

Your body needs a balanced amount of protein, carbohydrates, fat, vitamins, minerals and trace elements. These help your cells, tissues and organs work well and repair themselves. No one food can supply all the nutrients you need, so you will have to eat a variety of foods.

Food diary

It is helpful to keep a food diary. To make sure you're staying on track, write down the following information in a small notebook:

- The amount and types of food you ate.
- The amount of food from each food group you ate.
- How long it took you to eat your meal.
- How you felt during and after eating (depressed, happy, lonely, etc.).

After a few days, go over your diary and look for any trends that may be working against you. If you find any, choose something else to eat or try an activity other than eating. For example, if you snack on chips while watching TV because you are bored, try eating an apple (with no skin) or doing a physical activity.

A sample food and exercise chart is on the next page.

Daily Food and Exercise Diary

Date	
Breakfast	
Lunch	
Dinner	
Snacks: When and Why	
Water Intake (8 ounce glasses):	
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	
Other Liquid Intake	
Exercise / Activity	
Supplements:	
<input type="checkbox"/> B12	
<input type="checkbox"/> Multi-vitamin with minerals	
<input type="checkbox"/> Daily calcium X _____	
<input type="checkbox"/> Iron	

Date	
Breakfast	
Lunch	
Dinner	
Snacks: When and Why	
Water Intake (8 ounce glasses):	
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	
Other Liquid Intake	
Exercise / Activity	
Supplements:	
<input type="checkbox"/> B12	
<input type="checkbox"/> Multi-vitamin with minerals	
<input type="checkbox"/> Daily calcium X _____	
<input type="checkbox"/> Iron	

Tip

The first year you should eat and drink about 600 to 700 calories a day. After 1 year, you should not eat and drink more than 1,000 calories a day.

Recommended daily servings

Eating a well-balanced diet keeps your body and mind healthy. The following are examples of what your body needs from each food group every day.

■ Protein group (daily servings: 3 or more)

The protein and iron from these foods help your body heal. Iron produces red blood cells and helps prevent anemia (iron-poor blood).

Examples:

- 1 oz. cooked lean meat, fish or poultry
- 1 egg
- 1/4 cup fat-free cottage cheese
- 1/4 cup Eggbeaters®
- 1/4 cup tuna
- 1 oz. low-fat cheese
- 1/2 cup baked beans, kidney beans, lentils
- 1 Tbsp. peanut butter.

■ Milk group (daily servings: 2 to 3)

In addition to supplying protein, these foods are high in calcium and vitamin D that keep your bones healthy.

Examples:

- 1 cup skim milk (to have if tolerated, only once a day)
- 1 1/2 oz. low-fat cheese
- 1 cup low-fat, low-calorie yogurt.

■ Fruit and vegetable group (daily servings: 3)

These foods contain vitamins and minerals such as vitamins A and C, folic acid and potassium that help your body heal and fight germs. Potassium also controls your heart function.

Examples:

- 1/4 cup cooked or 1/2 cup raw vegetables
- 1/4 cup sugar-free canned fruit
- 1/4 cup fresh fruit
- 1/4 cup 100 percent fruit (diluted) or vegetable juice.

*Limit 100 percent fruit juices and skim milk to 1 cup each day because they have lots of calories from natural sugars.

■ Grain group (daily servings: 2)

Carbohydrates and B vitamins in these foods give your body energy.

Examples:

- 1/4 cup cooked cereal
- 2 saltine crackers
- 1/4 cup dry cereal
- 1/2 slice crisp toast.

Portion size

By the third month, you should **only** be able to eat about 1/4 cup of food per meal. By the sixth month you will be able to eat about a 1/2 cup of food per meal. By the ninth month, you will be able to eat about 3/4 cup of food per meal. By 12 months, 1 cup of food per meal should satisfy you. After that, you will **always** need to limit your portion size to about 1 cup of food per meal. Overeating will cause weight gain.

Portion Measurement (tablespoons and ounce equivalent)	Measurement in Cups	When You Can Use
2 tablespoons = 1 ounce		
4 tablespoons = 2 ounces	1/4 cup	at 3 months
8 tablespoons = 4 ounces	1/2 cup	at 6 months
12 tablespoons = 6 ounces	3/4 cup	at 9 months
16 tablespoons = 8 ounces	1 cup	at 1 year

Special Protein Needs

Your body must have an adequate amount of protein. Protein helps you grow new cells, heal quicker, and grow new hair. You need 40 to 60 grams of protein every day. However, your new stomach doesn't let you eat enough high-protein food at one time.

At each meal, you should eat your protein-rich foods first. Later, as you plan your own menus, include 2 ounces of protein 2 to 3 times each day.

Good Sources of Protein		
Amount	Food	Protein (in grams)
1 envelope	no-sugar added Carnation® Instant Breakfast® with 1 cup skim milk	14
1 cup	skim milk or low-fat, sugar-free yogurt	8
1/2 cup	chili (with or without beans)	8
1 oz./2 Tbsp.	chicken, turkey, fish, beef, pork	7
1/4 cup	tuna (water-packed)	7
1 oz.	crab, lobster or shrimp	7
1/4 cup	low-fat cottage cheese	7
1 oz.	low-fat cheese	7
1	egg	7
1/2 cup	ham and bean soup or black bean soup	6
1/2 cup	split pea soup or vegetable beef soup	5
1 slice	American cheese	5
1 Tbsp.	fat-free peanut butter	4
1/4 cup	mashed kidney beans, pinto beans, lentils or fat-free refried beans	3
1/4 cup	black beans or garbanzo beans	3
1/2 cup	most vegetables	2

Vegetarian Sources of Protein		
Amount	Food	Protein (in grams)
1 dog	Yves® veggie dog	11
3 slices	Yves® Canadian bacon	17
2 slices	Yves® deli turkey	7.5
3 slices	Smart Deli® ham	11
1 slice	Smart Deli® pastrami	10
1 brat	Smart Deli® brats	13
3 oz.	Mori-Nu® light tofu	6
3 oz.	Hinoichi® light tofu	8
1 1/2 slices	Soyco® Foods rice cheeses	6
1 oz.	Lisanatti® Premium Soy-Station soy cheese	7
1/2 cup	Silk® plain soy yogurt	2.5
1 patty	Boca® Burger Vegan	13
1/4 cup	beans: white, pinto, black, garbanzo	3
1/4 cup	kidney beans	4

Tip

You can buy Beneprotein® at the Unity pharmacy.

How to increase protein

- Double the protein in your milk by adding 1/4 cup of dry milk powder to 1 cup skim milk.
- Add Beneprotein™ to liquids or soft foods.
- If you don't like to drink milk, try adding low-calorie Nestle® Nesquik™, low-calorie cocoa, Alba® or no-sugar added instant breakfast.
- Make hot cereal (oatmeal, Cream of Wheat® or Malt-O-Meal®) with milk instead of water and add 1/4 cup of dry milk powder for a high protein breakfast.
- If you have a milk intolerance, try Lactaid® or Dairy Ease® or 100 percent lactose-free milk. You can also heat the milk. These help you digest milk.
- Try melted low-fat cheese on a baked potato (do not eat the skin).
- For breakfast, try an omelet, eggs, or low-calorie fruit flavored yogurt.
- Make a simple meal by mixing cottage cheese with canned fruit.
- At a meal, try tuna or chicken salad made with fat-free or low-calorie mayonnaise on a few low-fat crackers.
- Consider adding tofu to your meals. (It works well in stir fries and salads.)

Limit Carbohydrates/Sugar

Carbohydrates break down to sugars in your body. If you eat a meal that is mostly carbohydrates, you feel hungry 2 hours later. This may add to cravings for sweets or other snacks.

Read food labels. Avoid any product that has a sugar content of more than 10 grams per serving. Sugar content may be listed in the ingredients as follows: sugar, glucose, honey, dextrose, corn syrup, fructose, sucrose or molasses.

High carbohydrate foods to **limit** are:

- bread
- cereal
- pasta
- dried fruits
- canned fruits

- fruit juice
- rice
- potatoes
- corn
- pretzels
- crackers.

High sugar/fat food to **avoid** are:

- jelly
- soda
- cakes
- cookies
- pies
- chips
- french fries.

20 carbohydrate calories = 5 grams = 1 teaspoon of sugar

Special Vitamin and Mineral Needs

This surgery causes food to skip the duodenum, where iron and calcium are absorbed. You will need to take extra vitamins and minerals daily to keep from getting anemia (iron-poor blood) or osteoporosis (bone loss).

You can get anemia if you don't get enough B₁₂ and iron. You can get osteoporosis if you don't get enough calcium. You need to take a complete multivitamin (with minerals and iron), B₁₂ sublingual, and calcium with vitamin D **every day for the rest of your life**. If you are a menstruating woman, you also need to take an iron supplement (such as ferrous fumarate) every day. If you are a woman of child-bearing age, it is important to include folic acid in a vitamin supplement. Folic acid helps prevent birth defects.

Vitamin tips

- Start taking vitamins during week 4.
- These are the vitamins you need to take every day for the rest of your life:
 1. complete chewable multi-vitamin; must include minerals and iron (Take 2 every day so you are getting at least 36 mg of iron.)
 2. B₁₂ sublingual: 1,000 mcg every day, to dissolve under your tongue (B₁₂ sublingual is available at the Unity Hospital outpatient pharmacy.)
 3. calcium chewable: 1,000 to 1,500 mg every day (Divide the dose into 500 to 600 mg, taken at least 4 hours apart. For example, take 3 Viactiv[®] chewables each day, one each at lunch, supper and bedtime, or 2 Caltrate[®] 600 Plus[™] Chewables each day, one each at lunch and supper.)
 4. Vitron C[®], an iron supplement. (This will be added for women who are menstruating, 3 months after surgery.)
- Do not take vitamins and minerals on an empty stomach.
- Do not take calcium and iron at the same time. Take them at least 4 hours apart.
- Do not take calcium, iron and thyroid medicine at the same time. Take them 8 hours apart so the medicine can be properly absorbed.
- Do not take vitamins and minerals with tea, coffee or diet cola. These beverages keep iron from being absorbed.
- Have your vitamin and blood levels checked each year for the rest of your life.

Exercise

Tip

There are good exercises for people who are not used to exercising or who have physical limits. For titles of videos, visit your local library or video store.

Exercise is important after weight loss surgery because you will be losing weight quickly. When your body realizes how rapidly your weight is decreasing, it tries to hold onto the stores of fat to prevent starvation. When this happens, your body will burn muscle mass and keep the stored fat. That is why it is so important to regularly exercise so your metabolism (rate which you burn calories) increases and your body burns up the excess fat and not muscle mass.

Exercise also strengthens your heart and bones, burns calories, increases your metabolism and relieves stress. For these reasons, exercise **must** become a daily routine in your new life.

Start out slowly if you aren't used to exercising. Do 5 minutes one day and keep increasing the time. Work up to at least 30 to 45 minutes of exercise each day. There are good exercise videos for people who are out of shape as well as for those who have bad knees or backs. Walking is the best exercise after your surgery.

As you exercise you will lose more weight because you are burning calories and increasing your metabolism. This is especially important to keep your weight from plateauing.

Exercise tips

- Find an exercise partner.
- Join an exercise club or class. (Some patients enjoy Curves for Women®.)
- Listen to your favorite motivational music as you exercise.
- Try mall walking, aerobics, swimming or dancing.
- If you have a dog, take it for a walk every day.
- Wear comfortable clothing and shoes.
- Park 15 minutes from your workplace or walk during your lunch or breaks.
- Use stairs instead of the elevator.
- Try not to use TV remote controls or cordless telephones.

Tip

You will get the same benefits if you exercise for 10 minutes 3 times a day, 15 minutes 2 times a day or 30 minutes once a day.

Tip

You can buy a pedometer at a discount retailer or an exercise/fitness store.

Tip

Thirty minutes of non-stop exercise is the same as taking 10,000 steps.

- Walking is the most popular exercise after gastric bypass surgery. “Shape Up America!” is a national initiative to promote increased physical activity and healthy weight maintenance. Part of this initiative is the 10,000 Steps Program. To get the right amount of activity you should take 10,000 steps a day. The average person takes between 700 and 2,500 steps a day. To reach the goal of 10,000 steps a day, you can walk, jog or run.

For 2 weeks, check how many steps you take every day by wearing a pedometer. (It will count slow and fast steps.) Keep track of your steps.

At the end of the 2 weeks, make a goal for adding steps. For instance, you may want to take 2,500 steps a day for 2 weeks. Keep adding steps until you reach 10,000 steps a day.

Possible Problems

Tip

Tips to try if food or pills are clogged:

- Take a sip of a carbonated beverage. The carbonation may quickly dislodge the food so be near a restroom.
- If meat is causing the clogging, mix $\frac{1}{2}$ teaspoon of Adolphs Meat Tenderizer® and 2 ounces of water. **Slowly** sip this mixture and repeat every 4 hours if needed.
- If a pill is causing the clogging, try a sip of Diet Coke® to dissolve it.

- **Vomiting.** This may be caused by eating too fast, eating too much, not chewing food enough or drinking liquids with meals. This is a foamy, frothy, mucousy, retching type of vomit. Most patients will, at some point, vomit. It may be caused by a stomal stenosis (too tight an opening from your pouch to your intestines). It may also be caused by eating too fast or too much, or by not chewing food to the consistency of applesauce. Keeping a food diary will help you figure out if vomiting is caused by food.
- **Clogging (food blockage).** This can happen when you haven’t chewed food well enough and it gets stuck in the little opening going from your stomach to your intestines. Usually, the food will dissolve by itself or will work its way through on its own. However, while the food is clogged, it can be very uncomfortable. Clogging can cause vomiting and dry heaves.
- **Dumping syndrome.** This is the result of an intolerance to foods that are high in sugar, fat or grease. When you eat these foods, they now enter your intestines without being partially digested by the gastric juices of your old stomach. When this happens, you may have nausea, vomiting, become lightheaded or dizzy, have a hot flash, cramps or diarrhea. These symptoms last about 20 to 30 minutes.

This reaction is so unpleasant you will want to avoid foods that caused the dumping syndrome.

- **Weight gain.** Eating high-fat foods, carbohydrates and foods that have added sugars may cause you to gain weight. Avoid all foods cooked in lard, bacon grease, Crisco[®], butter, margarine or oil. Try using Molly McButter[®], Butter Buds[®] or a reduced-calorie margarine to season foods.

Read food labels carefully. The terms “sugar-free” and “fat-free” can be misleading. While they have reduced fats or sugars, they will add significant calories if eaten often, even in small amounts.

Also, pay attention to portion size listed on labels. Some labels list a tiny amount as 1 portion. Avoid all foods and liquids with added sugar, or sugar as one of the first three ingredients listed. “Sugars” include any compound ending with “ose” such as glucose, dextrose, sucrose, fructose or maltose, as well as corn syrup and hydrolyzed starch.

Watch your fat intake. People who eat a low-fat healthy diet may lose weight without watching calories. Fats have more than 2 times the calories of carbohydrates or protein. Try to keep your total fat intake to fewer than 30 grams each day.

Watch for hidden fats. Salad dressing, gravy, sauces and baked foods can have hidden fats. The following chart shows a sample of foods and their fat content.

Drinking with meals, snacking and liquid calories can add to weight gain.

Fat Content in Foods		
Amount	Food	Fat (in grams)
1 small	fresh apple	0
$\frac{1}{2}$ cup	cooked broccoli	0
1 cup	raw carrots	0
$\frac{1}{2}$ cup	frozen non-fat yogurt	0
1 cup	skim milk	1
6 squares	saltine crackers	1
1 slice	whole wheat bread	1
1 cup	Cheerios®	1
$\frac{1}{2}$	bagel	1
$\frac{1}{4}$ cup	water-packed tuna	1
1	Fudgsicle®	2
3 cups	popped popcorn (Orville Redenbacher Lite®)	2
$\frac{1}{4}$ cup	low-fat cottage cheese	3
1 oz.	baked chicken (normal portion is 3 ounces)	3
2 Tbsp.	sour cream	5
6	Ritz® crackers	7
1 Tbsp.	peanut butter	8
1 cup	whole milk	8
1 oz.	cheddar cheese	9
3 cups	popped popcorn (most microwave brands)	10
1 oz. bag	potato chips	10-12
$\frac{1}{2}$ cup	ice cream	13
1	hot dog	13
$\frac{1}{2}$	avocado	20
$\frac{1}{8}$	apple pie	21
1	Big Mac®	35
1	Whopper®	41
1 stick	margarine	120

- Constipation.** Constipation after gastric bypass surgery is common. Because of the small amount of food you are eating, it is common to have a bowel movement only every 4 to 5 days. If constipation becomes uncomfortable, it is OK for you to take milk of magnesia. If your stools are hard, include some high-fiber foods in your diet (see next page). Be sure to drink at least 6 to 8 cups of water each day between meals.

Good Sources of Fiber		
Amount	Food	Fiber (in grams)
1 oz.	Kellogg's® All-Bran® (with extra fiber)	13
1 oz.	Fiber One®	12
1 oz.	Kellogg's® All-Bran®	10
1 oz.	Nabisco® 100% Bran®	10
1 oz.	Raisin Bran®	5
1 oz.	40% Bran Flakes®	5
1/2 cup	mashed peas, pinto beans, kidney beans	4-5
1/2 cup	prune juice	3
1 serving	fresh fruits/vegetables	2-3

The American Dietetic Association recommends 20 to 35 grams of fiber every day.

- **Gas.** Gas problems are also common. If you have gas pains, try simethicone drops, Bean-O® or Gas-X®. Also, avoid dairy products (milk, cheese and ice cream), carbonated beverages, straws and chewing gum to reduce gas problems.
- **Gallstones.** More than one-third of gastric bypass patients will get gallstones. These are clumps of cholesterol and other matter that form in the gallbladder. During quick or large weight loss, your risk of getting gallstones goes up. You might feel a steady, severe pain on the right side of your stomach going to your back. This pain will start after eating a meal. You might also feel bloated or nauseated and vomit. If these symptoms continue, call your gastric bypass surgeon.
- **Problem foods.** You may have problems with:
 - tough meats, such as beef or hamburger
 - Try marinating solid meats or use a tenderizer.
 - Cook at a lower temperature for a longer period of time.
 - Spit out anything that doesn't liquefy in your mouth after chewing.
 - membranes of oranges and grapefruit
 - Use only pulp-free juice.
 - Spit out unchewable membranes.

- skins and seeds of some fruits and vegetables (Strawberry seeds seem to be OK.)
- fibrous vegetables such as corn and celery
 - Use a blender or strainer.

Avoid eating:

- fresh bread, pasta and rice
- fried foods
- chicken skin, bratwurst skin, hot dog skin, etc.

■ **Other body changes.**

- When you don't eat enough protein, you will notice some changes in your hair and nails because they are made of protein.
 - You may get flaky and weak fingernails.
 - You may have hair loss between the third and ninth months after your surgery. Your hair will grow back.
- A woman's menstrual cycle may be irregular and may come right after surgery. This is normal.
- You may not be able to drink milk or eat dairy products after surgery because they have lactose (a natural sugar) your body may reject.
- You may get lightheaded or dizzy when you get up from a chair or bend over. This is because your blood pressure is shifting. This can be caused by not drinking enough water and should be temporary.
- You may feel shaky, lightheaded, faint, or have a headache. This could be caused by **hypoglycemia*** (low blood sugar) and can be helped by drinking milk or orange juice or by eating a graham cracker, granola bar or a piece of hard candy. It is a good idea to carry one of these products with you at all times. It is not uncommon for people to have this feeling if they skip a meal or don't eat something before exercising. *You may have rebound hypoglycemia if your diet is high in carbohydrates.

- **Emotional issues.** As your body changes so dramatically, you will be changing emotionally, too. Some people find these changes disturbing. Obese people have sometimes used their size to hide from life, to insulate them from the outside world. Losing weight can make you, at times, feel vulnerable.

If you are having trouble dealing with emotional issues, find someone you trust to share your feelings. If you need, please seek professional counseling. This will help you go through the changes more smoothly and help you to be more successful with your weight loss. Some emotional issues you may have include:

- **depression.** Depression after weight loss surgery is common. For some women, estrogen (a hormone) is released while fat is burned to make energy. This release of estrogen may cause mood swings. For people who eat out of emotion, they may be depressed because they can no longer eat like they used to. Being thinner may not solve all of your problems.
- **hibernation syndrome.** Two to 4 weeks after surgery, your body reacts to the smaller amount of food. You feel tired, lethargic and often depressed. Your body wants to slow down until the old food supply returns. This just means your body is recovering from the effects of major surgery. The best way to deal with this is to recognize the symptoms and know they are normal. Start to exercise so your body gets used to using body fat as a source of energy. When your body adjusts, the hibernation syndrome will end. This may take 2 weeks.
- **partner jealousy.** Your partner may have a hard time dealing with the new you. Not only has your body changed, but you may be more outgoing and social as a result of your increased self-confidence and self-esteem. This can cause your partner to feel insecure. He or she may become possessive or distant. If problems develop in your relationship, please see a therapist.
- **divorce.** The divorce rate among couples in which a partner has had gastric bypass surgery is high. The surgery can make good marriages better and bad marriages worse. It's common for a morbidly obese person to marry a partner thinking he or she can do no better. Some obese people settle for a negative relationship and may suffer through mental or verbal abuse.

When patients lose weight, their self-esteem improves and they question why they're in an unhealthy marriage.

- **friend loss.** Losing a lot of weight can disrupt some friendships. You are changing every day, and you may find that your friends are unwilling or unable to change in the friendship with you. Your friends may be feeling jealous of you or your success.
- **body image.** When your body goes through such a rapid and drastic change, you tend to lose a sense of yourself. You can actually go through an identity crisis. You may not recognize yourself. You may feel like you are walking around in someone else's body. Please remember that it will take some time getting used to the new you. Counseling may help you during these times of uncertainty.

Follow-up Appointments

Your surgeon will need to see you at least once a year for the **rest of your life** to do yearly blood work. If you move or change telephone numbers, tell your surgeon's office.

Generally, the follow-up schedule with your surgeon and/or bariatric nurses is:

- 1 or 2 weeks after surgery
- 5 weeks after surgery*
- 3 months after surgery*
- 6 months after surgery*
- 9 months after surgery (optional)*
- 1 year after surgery
- 2 years after surgery
- every year after that.

* (no copay/charge to see the nurse)

You will need to schedule your own checkups. Call your surgeon's office to set up your appointments.

If you cannot keep an appointment, call the office to cancel and reschedule at least 48 hours in advance. If you arrive for your appointment late, you may be asked to reschedule.

Support Groups

Images Support Groups meet throughout Minnesota once or twice a month. Groups meet in Buffalo, Coon Rapids, Cambridge, Eagan, Fridley, Owatonna, Duluth, New Ulm, St. Cloud, St. Paul, Sandstone and other cities. These free support groups are for people who have had or who are considering gastric bypass surgery. Family members are also welcome.

Support groups are strongly recommended for pre-surgery as well as post-surgery patients. Former gastric bypass patients lead the Images Support Group meetings.

For more information about Images Support Groups, including dates, times and locations of meetings, call the support group coordinator at 763-236-2068 and check out the bulletin board at Medformation.com.

Phone Numbers

Mercy Hospital: 763-236-6000

Unity Hospital: 763-236-5000

Bariatric Center of Mercy & Unity Hospitals:
763-236-2045

Images Support Group coordinator: 763-236-2068

Your doctor's phone number:

_____.

Web Site

www.mercyunity.com (Find the Bariatric Center and choose "Join message board.")

Agreement to Make Lifestyle Changes

I commit to following all guidelines by my surgeon and his or her staff, including all education/information/instruction given to me before surgery and in this book. I also agree to make the following lifestyle changes after gastric bypass surgery.

Dietary Guidelines

1. I will follow the dietary guidelines listed in this book including: following a clear liquid diet the first 3 weeks after surgery, eating pureed foods the fourth week, and adding soft foods one at a time at week 5.
2. I will choose foods low in sugar, low in fat (no more than 15 to 20 grams each day) and high in protein (40 to 60 grams each day).
3. I commit to eating 3 meals each day, starting with protein at each meal.
4. I will chew my food slowly and well (to the consistency of applesauce).
5. I will eat each meal for at least 20 to 30 minutes.
6. I will not drink with my meals or for 30 to 45 minutes after eating.
7. I will take the needed vitamins and supplements as outlined in this book for the rest of my life.

Fluid Intake

1. I commit to drinking at least 64 ounces of water each day.
2. I will drink more water with increased levels of physical activity.

Exercise Plan

1. I commit to exercising at least 5 days each week for 30 to 45 minutes each time.
2. I will do aerobic exercise. This is exercise that uses large muscle groups in a rhythmic way. Examples are walking, biking, dancing or swimming.
3. I will break up the exercise into two or three 10-minute sessions each day, if needed.

Follow Up

1. I commit to returning to the Bariatric Center for follow-up appointments at: 1 week, 5 weeks, 3 months, 6 months, 9 months (optional), 1 year, 2 years and every year after that.
2. I will follow recommended referrals. These referrals may be to a nutritionist, psychologist or other health care providers.
3. I understand the benefits of attending a support group and will make an attempt to regularly attend one in my area.

Patient signature

Date

Nurse witness

Date



Pre-surgery Gastric Bypass Assessment

1. How long do you need to be on only liquids after surgery? _____
2. Name the 3 vitamins you need to take for the rest of your life.
 - A. _____
 - B. _____
 - C. _____
3. You should start these 3 vitamins:
 - A. 1 week after surgery
 - B. 2 weeks after surgery
 - C. 4 weeks after surgery
 - D. none of the above
4. You need to get 40 to 60 grams of protein every day. Which meal would give you the most protein?
 - A. 1 ounce cheese on 1 saltine cracker and 3 tablespoons applesauce
 - B. $\frac{1}{4}$ cup mashed potatoes with gravy and 3 tablespoons applesauce
 - C. 3 reduced-fat Wheat Thins®, 1 ounces green beans and 2 peeled grapes
5. What is the minimum amount of fluid you need to drink each day?
 - A. 43 ounces
 - B. 64 ounces
 - C. 72 ounces
 - D. none of the above
6. Strong dark urine, lack of energy, nausea, dizziness or headache, and a bad taste in your mouth are signs of:
 - A. dumping
 - B. dehydration
 - C. clogging
 - D. none of the above

7. What is the minimum recommended amount of exercise you need?

- A. 30 minutes every day or at least 5 days a week
- B. 30 minutes 3 times a week
- C. 1 hour 5 times a week
- D. none of the above

8. Drinking liquids with meals can cause:

- A. vomiting
- B. weight gain
- C. desire to snack
- D. all of the above

9. The long-term success of weight loss surgery depends upon:

- A. me
- B. my surgeon
- C. support group
- D. my family

10. True or False:

It would be OK to take a small sip of liquids during your meal.

11. True or False:

After surgery, you need to see your bariatric surgeon every year for the rest of your life.

12. True or False:

Some people fail to lose weight or regain weight because they resume snacking, binging, high fat or high carbohydrate food choices, and they lack exercise.

13. True or False:

Women must avoid becoming pregnant for at least 2 years after gastric bypass surgery.

Patient signature

Date

Nurse witness

Date



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