

# Nutrition



# Corner

## The Post-Surgery Diet for Bariatric Patients: What to Expect

*By Denise Addorisio, RD, CDN*

Have you decided to have bariatric surgery, or are you already post-op and on your way to losing weight? That's great, but first you need to understand the basic principles of the post-op diet so you can properly use the tool the surgeon has created for you to lose weight, while meeting your nutritional needs.

### Optimizing Nutritional Value

First and foremost, remember that your overall dietary goal is to optimize the nutritional value of the small portions of foods you eat so you get the nutrients your body needs to be healthy. Portion sizes for meals should be no more than six to eight ounces total, and this should make you feel full or at least "satisfied." Develop an awareness of your body's signals of satisfaction, and be in tune with your body's early feelings of fullness.

Use measuring tools and a food scale to check your portion sizes. Serving meals on smaller plates, such as salad or luncheon plates, will help make these small portions look more appealing. You may be tempted to skip meals if you are not feeling hungry, but this behavior can lead to other health problems and is never advised.

Three meals each day also helps to prevent snacking or "grazing,"

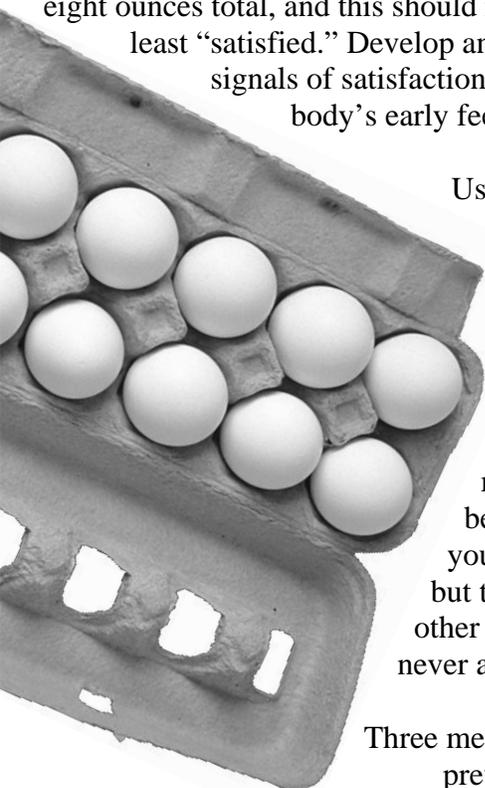
which can add many calories between meals. Most long term post-op bariatric patients find they need to limit their total caloric intake to less than 1,000 calories per day to maintain their weight-loss.

Foods should be eaten slowly, perhaps taking 20-30 minutes to complete your meal. Since most bariatric patients were fast eaters in their previous life, this can be a difficult behavior to change. Use tools such as small baby spoons and forks to help slow you down. An egg timer is a handy way of making sure that you wait two minutes between bites, which helps you stretch the meal period to the suggested 20 to 30 minutes.

Chewing your food carefully, perhaps up to 15-20 chews per bite, until the foods feels pureed before swallowing, will help slow you down. It is also important to chew foods well to ensure that nothing gets stuck passing through the narrowed outlet from the pouch. Failure to eat small portions, eat slowly and chew carefully can lead to vomiting, which is never considered normal.

### Nutrients

Protein is the most important nutrient in the bariatric diet. Foods high in protein should be eaten first, in case you feel full and cannot finish your meal. While the best sources of proteins are eggs, poultry, meats, fish, cheese and milk, other protein sources to consider adding to your diet include beans, lentils and soy products such as soy burgers found in your grocer's freezer section.



## \* Helpful Nutrition Tip:

If preparation time is a stumbling block, buy pre-cut, pre-washed vegetables such as baby carrots, sliced mushrooms, melon bowls or salads in bags. Go to the supermarket salad bar and buy cut-up fruits and vegetables in small quantities by the pound. Treat yourself to your favorite fruit for dessert, even if it was expensive. You wouldn't have thought twice about spending for an ice cream, why hesitate to spend it on melon or berries even when not in season? Try exotic or tropical fruits, you may be surprised to discover you like them.

Be sure not to overcook meats and try using moist cooking methods such as braising, steaming and stewing to prevent proteins from getting too dry or tough. Leftover meats can also become too dry, so consider adding liquids when reheating foods such as broth or fat free gravy, or add last night's leftover chicken to today's salad for lunch with some low fat salad dressing instead.

Red meats such as beef, pork, lamb or veal can be particularly difficult for a bariatric patient to digest. Be sure to choose tender cuts, but watch out for the potential for higher fat content (that means higher calories). Some bariatric programs encourage regular use of protein supplements, but your best choice is always traditional foods unless you have a particular situation that requires you to add protein supplements to your diet. Suggested long term post-op protein intake may range from 55-80 grams per day.

Because starches such as bread products, rice and pasta can be trigger foods for many formerly obese patients, many bariatric programs limit their intake. Although carbohydrates are your body's primary fuel source, carbohydrates are also found in fruits and vegetables. Unfortunately, many patients have had limited intakes of fruits and vegetables in their pre-op diet, and never consciously thought about their importance to a balanced diet, which is even more important now.

Besides fruit for dessert, try sugar free ice pops or diet gelatin. While artificial sweeteners have a place in the bariatric diet, beware of low sugar cakes, cookies and ice cream and read food labels to determine if they are truly low calorie. Sometimes these foods are just a tease, and may trigger your desire for the real thing.

## Dumping with Roux-En-Y

Some types of bariatric surgeries such as the Roux-En-Y (RNY) gastric bypass create a situation where dumping occurs if the post-op patient eats sweets such as cake, cookies or ice cream. The aspect of the RNY surgery that creates malabsorption through bypassing part of the intestine is the reason for the symptoms of dumping. These symptoms may include abdominal pain, nausea, diarrhea, dizziness and hot flashes or cold sweats. For most patients, knowing they will become sick after eating sweets will be a strong deterrent, preventing them from wanting to eat those foods. However, if you eat "just a bite" of sweets over time, you can build up a tolerance for them. This means that you will eventually be able to eat more sweets without experiencing dump-

ing, and then only willpower will help you avoid these high fat, high sugar, high calorie foods. Of course, that can ultimately lead to regaining of weight or perhaps not even reaching your expected weight-loss.

## Fluids

Fluids are an important part of any diet, but particularly for the bariatric patient. All liquids should be consumed between meals, never with a meal. Again, this can be a hard habit to break, but it is very important to your success. Drinking with meals can lead to "pushing" the solid food through your pouch more quickly, which leads to faster emptying of your pouch. What does that mean? When your pouch is empty, you feel hungry. The sooner your pouch is empty, the hungrier you will feel and you will be tempted to eat between meals. That's definitely a recipe for failure.

Choose fluids that are non-carbonated. Yes, that means no soda, diet or regular. Besides making you feel uncomfortable, the gas produced by the carbonated beverage can stretch the pouch or its outlet. Stretching means that you will soon be able to fit larger portions of foods in your pouch before you feel full. Remember, more food equals more calories. Your best choices for fluids are water (try squeezing some lemon in there), artificially sweetened, non carbonated beverages such as Crystal Lite<sup>®</sup> and Diet Snapple<sup>®</sup>, flavored waters, decaf coffee or tea, herbal teas, broth and diluted 100 percent fruit juices. Read labels carefully to be sure your healthy sounding "vitamin water" is not loaded with calories. And, do not forget that alcoholic beverages are full of calories with no nutri-

tional value.

## Vitamins and Minerals

All bariatric patients need to take vitamin and mineral supplements as recommended. While the specific amounts and types of supplements may vary by their bariatric program, professionals agree that these supplements are necessary to prevent vitamin and/or mineral deficiencies. Besides multiple vitamin and mineral supplements that all bariatric patients need, RNY patients need additional supplements of iron, calcium and Vitamin B-12. Regular, periodic lab tests should be monitored annually or semi-annually to ensure that the post-op bariatric patient is meeting their nutritional needs. Of course, proper dietary choices are important in this respect as well. Do not assume that if you are feeling well, you have met your needs for vitamins and minerals. The only way to be sure is to take your supplements and have regular lab tests to confirm.

Having a good understanding of proper nutrition is

critical for the success of bariatric surgery. Consult your dietitian regularly to learn all you need to properly use the tool that the surgeon has given to you. Further post-op, reach out for guidance if you feel you are slipping back into old habits and get yourself back on track. Use support groups to help deal with any psychological issues related to eating. Your commitment to being compliant with the post-op diet, eating behaviors, and a regular exercise program will improve your health and change your life!

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### About the Author:

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*Please Note: The information contained in this article is for educational purposes only and should not be substituted for medical advice or treatment from a healthcare professional. The OAC recommends consultation with your doctor or healthcare professional before initiating any dietary plans.*

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