

LEARNING MADE EASY



2nd Edition

Weight Loss Surgery Cookbook

for
dummies[®]
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Keep the weight off
after surgery

Know which foods to eat
and which foods to avoid

Includes more than 150 healthy
and satisfying recipes

Brian K. Davidson
Sarah Krieger, MPH,
RDN, LDN

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for
dummies[®]
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2nd edition

**by Brian K. Davidson and
Sarah Krieger, MPH, RDN, LDN**

**for
dummies[®]**
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Introduction

If you're reading this, odds are you've made the very important decision to improve your health by having weight loss surgery. You most likely made this choice after years of struggling to live a healthier lifestyle by trying other methods to lose weight. You probably spent countless hours researching procedures on the Internet, reading books, interviewing doctors, talking to weight loss surgery patients, and speaking with other healthcare professionals, putting in the necessary time and effort to make sure this procedure was the right decision for you.

Your surgeon provides you with a tool — your surgery — to assist you in losing weight and leading a healthier life. Making that tool work is up to you, and a big component of your success will be your long-term eating plan.

Now is the time to use good nutrition to maximize not only your weight loss, but also your health, vitality, and renewed sense of well being. *Weight Loss Surgery Cookbook For Dummies* is an invaluable resource as you embark on this new chapter of your life — your weight loss journey — and we wish you all the success in the world.

About This Book

This book is all about eating well after weight loss surgery. (If you're looking for information on the types of surgery available, check out *Weight Loss Surgery For Dummies*.) At the beginning of this book we walk you through the four stages of your postsurgery diet and provide plenty of advice about living with and caring for your new pouch. Because life after weight loss surgery is an ongoing journey, we focus most of the book on what to do once you can eat “real food” again. We show you how to plan, shop for, and cook delicious and healthy meals that you and your family will love.

You receive cooking guidance from Chef David Fouts, who is known as the world's premier culinary expert for weight loss surgery. And he is also a weight loss surgery patient, so you know the recipes and cooking advice come from someone who understands what gastric bypass patients go through. You find a compilation of imaginative, inventive recipes to suit every palate, specifically designed to meet the unique needs of people who have had weight loss surgery and people just wanting to eat healthier. So that you can stay informed of what you're eating, each recipe lists the stage of the postsurgery diet it can safely be tried, the serving size, and the

nutritional information. You can eat with confidence, knowing you're eating healthfully, helping manage your weight, and maintaining your overall well being.

If you're familiar with a *For Dummies* book (*Weight Loss Surgery For Dummies*, perhaps?), you know they're divided into parts and chapters. The editors and authors designed this book in a nonlinear fashion so you can read it cover to cover or skip around to the areas that interest you the most. For those of you who are accustomed to the post-op lifestyle and handy in the kitchen, you may want to want to dig right in to Chef Dave's delicious recipes (which have been tested by a professional recipe tester).

The following are a few conventions that you find in this book and that you should be aware of:

- » All eggs are large.
- » All butter is salted. Don't substitute margarine unless specifically noted.
- » Mushrooms are white button unless otherwise specified.
- » All sugar is granulated unless otherwise specified.
- » Pepper is freshly ground black pepper unless otherwise specified.
- » All salt is table salt unless otherwise specified.
- » All herbs are fresh unless dried herbs are specified.
- » When a recipe calls for sugar substitute, any sugar substitute that contains no sugar is acceptable. Some are sweeter than others, and personal preferences vary, so you may want to experiment by starting with a smaller amount than the recipe calls for and increasing the amount if needed.
- » Water used for boiling is not listed in the ingredients.
- » Nonstick cooking spray is not included in ingredient lists but should be kept on hand.
- » All temperatures are Fahrenheit.
- » Nutrition information that appears at the end of each recipe is per serving. Keep in mind that substituting ingredients or changing the serving size will alter the nutrition information.
- » All nutrition analysis is based on the weight of volume of the ingredient. For example, if a recipe calls for 8 ounces boneless, skinless chicken breast, raw weight was used. If the recipe calls for 8 ounces cooked chicken breast, weight after cooking is used.
- » 🌱 This symbol indicates a vegetarian recipe. Note that these recipes may still include eggs and dairy.

Foolish Assumptions

In writing this book, we made the following assumptions about you:

- » You or someone you care about is considering or has had weight loss surgery.
- » You want to improve your skills in the kitchen and learn how to make delicious weight loss surgery-friendly recipes.
- » You want to give yourself and the surgery the best opportunity for success.
- » You want to continue on your journey for a healthier, happier life.
- » Or, you are a professional who works with weight loss surgery patients. You want to understand more and provide a trusted resource for your patients.

Icons Used in This Book

As you read through the chapters of this book, you find the following friendly icons that are designed to draw your attention to different nuggets of information and useful tidbits:



REMEMBER

Be sure to pay attention to the information next to this icon. This advice can help you make good choices, eliminate risks, and improve your skills in the kitchen.



TIP

When you see this icon, you're sure to find good ideas that will help you along on your journey.



WARNING

Pay close attention to this icon. It will help you avoid common pitfalls and mistakes.

Beyond the Book

In addition to the material in the print or e-book you're reading right now, this product also comes with some access-anywhere goodies on the web. Check out the free Cheat Sheet for a quick guide to what to eat after weight loss surgery, info on portion sizes, and more. To get this Cheat Sheet, simply go to www.dummies.com and type **Weight Loss Surgery Cookbook For Dummies Cheat Sheet** in the Search box.

Where to Go from Here

Weight Loss Surgery Cookbook For Dummies is written so you can start wherever you like. This may depend on where you are in your weight loss surgery journey and your skill set in the kitchen. If you are considering but haven't had the surgery, you may want to read this book cover to cover in a linear fashion to gain a clear understanding of your post-op restrictions and lifestyle changes. If you have already had weight loss surgery and are beyond the transition phase to solid foods, you may want to start at Chapter 3.

If you're a novice and want to learn how to prepare your kitchen, what tools you need, and what items to have on hand to cook like a pro, start with Chapter 5. If you're an experienced cook and are looking to dig right in to some new and delicious recipes, feel free to start at Chapter 7.

1

Eating Right with Every Bite

IN THIS PART . . .

Get step-by-step dietary guidelines for the transition from clear liquids to solid foods, starting with day one after surgery.

Find out about portion sizes, your new nutritional requirements, and the benefits of meal planning.

See what you need for a well-stocked fridge, freezer, and cupboards.

Get tips on caring for fresh and raw foods, cooking methods, choosing the right temperature, and measuring common ingredients.

- » Taking a look at your new healthy-eating plan
- » Setting up and preparing your kitchen for success

Chapter **1**

Fueling the New You: Ingredients for Success

In order to make the most of your surgery, you need to change your lifestyle after you have your procedure. This doesn't have to be a chore — in fact, when you see how good you feel when you give your body all the nutrients it needs, you'll want to continue doing it.

Establishing new eating and exercise habits is an essential part of achieving and maintaining a healthier weight. Each patient is expected to change the foods eaten, the amount of food eaten, and how that food is eaten, in order to provide the body with the nutrition it needs and to promote weight loss. These dietary changes and nutritional guidelines are meant to be followed for the rest of your life.

In this chapter and throughout this book, we start at the beginning, from your first day at the hospital, through your transition to solid foods, to sticking with a healthy eating plan for life. We outline portion sizes and general guidelines to assist in making your transition as easy as possible.

A weight loss surgery lifestyle includes planning and preparing small, high-protein meals, chewing every bite thoroughly, exercising, keeping a diet and exercise diary, and more. Your bariatric team will provide nutrition and fitness guidance and help you develop plans that will work best for you.

When it comes to food, different people have different tastes and schedules. Listen to your body and your surgeon's directions, and call your bariatric team if you have a question about your specific situation.

Are you frightened of the kitchen? The amazing thing about cooking is that you can make it as easy or difficult as you want. We show you how to organize your kitchen like a pro and guide you through the shopping aisles. (Here's a hint — buy foods that are healthy, convenient, and good.) You find out the best way to prepare and cook your meals. We also assist you in understanding nutrition and your food intake so that you can maintain your weight long after surgery. We think you'll find you have more energy and just feel better in general.

Understanding the Bariatric Surgery Diet

The diet after weight loss surgery gradually progresses from liquids to purées to solid foods. Because the size of your stomach is effectively reduced to about the size of 1 cup or less, your meals are smaller. You have to eat more frequently throughout the day, and you need to make sure you chew your food slowly and thoroughly, so it doesn't become stuck and so it's properly digested. You need more time to eat than you used to, but you'll notice you feel fuller with less food. You eat and absorb fewer nutrients than you did before surgery, so to prevent deficiencies, you need to commit to a regimen of vitamin supplements for the rest of your life.

After surgery, your pouch is swollen and your diet has to progress gradually from clear liquids to solid food to prevent discomfort and the premature stretching of your pouch. This is done in the four main stages described as follows. In Chapter 2 we cover each stage in greater detail, including specific foods, daily menus, and helpful tips.

- » **Stage 1, Clear Liquids:** This stage starts the day after surgery and includes any liquids you can see through — excluding alcohol.
- » **Stage 2, Full Liquids:** When you're able to tolerate clear fluids and have your surgeon's blessing, you get to add full liquids to your eating plan. These are identified as foods that are liquid or semiliquid at room temperature.
- » **Stage 3, Smooth Foods:** These foods are mixed in a blender until they're very soft and smooth in consistency. This stage is also known as *puréed foods*.
- » **Stage 4, Soft Foods:** In this final stage before regular eating, you add solid but soft foods.



Specific dietary guidelines vary for each procedure and each patient. What we discuss are some of the general dietary changes weight loss surgery patients can expect after weight loss surgery.

Making Healthy Choices

By understanding a little about nutrition and applying what you know, you will feel healthier, look better, and have more energy.

Getting what you need in smaller portions

A typical meal in a bariatric surgery diet includes protein-rich foods such as lean meat, eggs, and lowfat dairy products as well as starches and whole grains, fruits, and vegetables. Eating protein helps you feel fuller longer. You'll be able to eat a variety of foods — in smaller portions, of course. Check out Chapter 3 for details on portion sizes.



Since you are only eating small portions of food, choosing foods that are healthy is very important. Nutrient-rich foods deliver the most nutrition for the least amount of calories. To find nutrient-rich foods you need to check out the food labels to find out what a portion of the food is and how many calories and which nutrients are in a portion.

Drinking enough water at the right time

Water is important because it flushes toxins from your liver and kidneys, regulates body temperature, and reduces the risk of many cancers. It also helps with digestion, lubricates your joints, allows you to use glycogen in your muscles, which provides you with energy, and helps eliminate hunger by taking up space in your pouch.

Prior to surgery you received a great deal of water from the foods you ate. After surgery you don't have the same capacity to eat, which is why many post-op patients are prone to dehydration.



You need to ensure you're drinking enough water. However, you also need to avoid eating and drinking at the same time because your new pouch is too small to allow both liquid and solid foods.

Checking out eating guidelines

After you make the transition to solid foods, follow these dietary guidelines:

- » Plan your meals.
- » Eat three meals a day.
- » Start each meal with a protein source.
- » Chew, chew, chew each bite.
- » Don't overeat — stop before you feel full.
- » Drink between each meal, not with your meals.
- » Don't eat in front of the TV, in the car, or while you're reading.
- » Keep healthy foods available and get tempting unhealthy foods out of the house.
- » If you're going to a party, offer to bring a healthy food item to ensure you'll have something there you can eat.
- » Pay attention to the taste of your food.
- » Try not to eat late in the day.
- » Use a food diary to keep track of what and when you eat and how you feel.

Finding out what foods your new pouch will tolerate after surgery is a matter of trial and error. *Dumping syndrome*, a common condition for gastric bypass surgery patients, occurs after you eat foods that are high in sugar, fat, or sometimes dairy, or high-calorie liquids. It can cause nausea, diarrhea, light headedness, cold sweats, abdominal cramping, weakness, and a fast heartbeat. (We talk more about dumping syndrome in Chapter 2.) Many people who experience dumping find it good incentive to avoid the foods that triggered the reaction for a while.

Keeping a food diary

A food diary is a useful tool not only when you're losing weight but also when you're trying to maintain your weight. A diary helps you be aware of what you're eating and whether you're veering from your healthy eating plan. Diaries can also help you to increase your awareness of why you're eating. If you write down any emotions you feel when you think you're hungry, you may discover that the feeling is something else — maybe thirst, fatigue, or stress.



TIP

Check out Chapter 3 for more information on how a food diary can help you achieve and maintain your weight loss goals.

Organizing and Readyng Your Kitchen

Before starting on your cooking adventure, make sure you have your kitchen in order. Nothing is more frustrating than starting a recipe and being unable to find your favorite cookware or utensils or realizing you don't have the necessary ingredients on hand.

The first step to getting organized is to assess what you have, edit down to what you really need, and arrange it in an efficient setup, the primary goal of which should be accessibility. In Chapter 5 we help you organize your kitchen, stock your cupboards, and introduce you to essential equipment. By laying this groundwork you can make your cooking experience more efficient and enjoyable, which will help you stay on track with healthy meal preparation.

Planning to Eat Well

By taking the time to plan meals ahead of time, you're more likely to stick with your eating plan, stay within your budget, and find ways to use up what you already have on hand.

To take out all of the guesswork and free up time every day, take a little time one day a week and plan your meals for the week. You can extract a grocery list from your menu choices and do the week's shopping in one trip, which prevents frantic dashes to the grocery store for a forgotten ingredient. Cooking will be more enjoyable because you're more prepared.



TIP

Smart shopping is the name of the game. This means purchasing foods that are healthy, convenient, and good. Here are some smart shopping tips:

- » Buy the least-processed foods (closest to their original form) you can find.
- » Shop with a list.
- » Don't shop when you're hungry.
- » If possible, shop alone so it's easier to focus on healthy foods and buy just what you need.
- » Read labels carefully.

Practicing Food Safety in the Kitchen



REMEMBER

Fresh fruits, vegetables, and raw meats are always better than processed, but “safety first” is the rule.

It’s upsetting to think about, but the foods you eat to stay healthy can make you sick. Fortunately, you can do many things to protect yourself and your family from foodborne illness. At the grocery store, avoid cans that are bulging and jars that have cracks or loose lids. At home, follow these tips from the Food and Drug Administration:

- » Be sure that your refrigerator and freezer are the right temperature for storing food.
- » Refrigerate or freeze perishable foods right away.
- » Throw away anything that looks or smells suspicious. If you think a food might be bad, don’t taste it!
- » Wash your hands well before preparing food.
- » Keep your work area, wash rags, and utensils clean.
- » Cook meats thoroughly.

Check out Chapter 6 for more tips and tricks to ensure all your meals are safe to eat.

- » Treating your pouch well
- » Following your surgeon's and dietitian's guidelines for eating safely
- » Getting familiar with the four stages of your postsurgery diet

Chapter 2

Dietary Guidelines for the First Few Months After Surgery

Chances are, before your surgery you got a lot of information from your doctor about what to expect afterwards. You probably also sat in your surgeon's office with a registered dietitian who painstakingly explained the diet you have to follow for the few weeks following surgery until you're able to eat "real" food again. The facts, guidelines, and warnings probably made perfect sense at the time, until you left the office and it all suddenly became very overwhelming. Don't feel bad — you're not alone!

Be reassured, your period of healing and adjustment will come to an end and you *will* be able to eat regular food again. You need to be conscientious of what you eat and the portion sizes, but having weight loss surgery certainly doesn't mean that life as you knew it has come to an end. You'll be able to go to a restaurant and have a lovely meal with friends. You just may want to split an entrée or take some home!

In this chapter we explain what to expect from your new pouch and some of the new sensations and symptoms you may experience. We show you what you can eat in the days and weeks after your weight loss surgery, and walk you through each of the four initial stages of foods. We also clue you in on food preparation tips and provide some sample menus to get you started in the right direction.



REMEMBER

Here are a few things to remember as you recover:

- » **Every person is different, and every surgery is different.** You may have friends or family members who had weight loss surgery, and they all have stories about their experiences. Remember that this is your own unique journey and they may experience things you don't and vice versa. For example, some people can't tolerate rice, but you may do just fine with it. If you have a question about whether something is normal, call your surgeon's office, not your next-door neighbor.
- » **Keep in mind your surgeon's directions as well as your own specific tolerances.** The guidelines we provide in this chapter are suggestions based on clinical nutrition guidelines from the American Society for Metabolic and Bariatric Surgery and the American Dietetic Association. However, you and your surgeon know the details of your particular situation, so be sure to follow doctor's orders, and listen to your body! Again, call your surgeon or dietitian if you have a question about your specific situation.
- » **Your bariatric team is just that — your team.** Your surgeon, dietitian, bariatric coordinator, and psychologist are all committed to helping you make this the best experience possible so you achieve the success you deserve. Don't hesitate to call on them if you have any question or concerns.
- » **Get support!** Research shows that people who attend support groups are more successful at weight loss than those who don't, so regularly attend and participate in a support group. Face it, if you knew everything you needed to know, you wouldn't be reading this book. A support group is a great place to talk to others, share experiences and ideas, and get information resources, and they can be a lot of fun! Take your spouse or family members, because they're in this for the long haul, too. Your hospital may have a support group, or you can find groups online. A note of caution: Not everything you read on the Internet is absolutely true. Use reputable websites, and if you have questions, ask your bariatric team.

Say Hello to My Little Friend: Treating Your New Pouch Well

Your pouch is about the size of an egg and holds one to two ounces. You know how gently you have to handle an egg? Well, the pouch also requires special care, which begins in the hospital and continues throughout your life.

After surgery, the pouch is swollen for anywhere from a week or so (if you had sleeve gastrectomy, also known as gastric sleeve) to a few weeks (if you had adjustable gastric banding [AGB]) to a few months (if you had Roux-en-Y gastric bypass

[RYGB], also called simply gastric bypass [GBP], or biliopancreatic diversion with or without duodenal switch [BPD/DS]). This in itself makes it difficult to eat much food at all. As time goes on, you're able to eat more. Some hunger is normal, so you may also *want* to eat more. At this point, it can be helpful to use smaller plates and utensils so it looks as if you're eating more and to help guide you in taking small bites. Forming good eating habits now (this means watching portion sizes) is important so you don't return to old eating habits and stretch the pouch.



TIP

Foods may taste a little different after surgery, especially if you had gastric bypass. If it tastes metallic, which is common, you can use plastic forks and spoons to minimize the taste. Cold foods tend to have less aroma, so eating chilled foods may also help unusual tastes. This side effect usually passes with time.



REMEMBER

Keep in mind that no matter how closely you follow your surgeon's instructions, you are probably going to experience side effects at some time. By following instructions closely, however, you can minimize the frequency and severity of the symptoms. The following sections describe common side effects you may experience and how to deal with them. Keep in mind that in addition to increased severity of these side effects, not following your surgeon's instructions can result in not achieving your weight loss goals, nutritional deficiencies, decreased energy, and just not feeling well.

Staving off nausea and vomiting

Common complaints after surgery are nausea and vomiting. If you feel pressure or fullness in the center of your abdomen, *stop eating!* Nausea and vomiting may occur during the first few months after surgery as you get used to your new pouch.

If you experience nausea and vomiting, chances are you have done one (or more) of the following:

- » **Not chewed your food well enough.** Chew each bite of food 25 to 30 times until it has a puréed consistency.
- » **Eaten too quickly.** Put your fork down between bites. Don't be rushed by others. Take 20 to 30 minutes to eat a meal.
- » **Eaten too much at one time.** Measure all foods. Take pencil-eraser-size bites. Stop when you are physically satisfied — not full.
- » **Eaten a food that's hard to digest.** Avoid fibrous foods such as celery, popcorn, and tough meats.
- » **Eaten a food you don't tolerate well.** Introduce new foods one at a time so if you don't feel well after, you know which food you didn't tolerate.

- » **Consumed fluids with a meal.** *Do not eat and drink at the same time!* Stop drinking about five to ten minutes before you eat to make sure the pouch is empty and wait about 30 minutes after you eat to begin drinking again. If your pouch is full of fluids, you won't be able to eat. Drinking too soon after a meal overfills the pouch and may make you nauseated.



WARNING

Vomiting is more than simply a nuisance and discomfort. Unresolved vomiting can lead to complications such as:

- » Obstruction of the opening to your pouch due to swelling of the lining of the stomach
- » Development of a hernia (an abnormal opening in the abdominal wall that allows the contents of the abdomen to protrude through) at the incision site
- » Dehydration, which can result in symptoms such as fatigue and headache, or more serious consequences such as decreased kidney function and electrolyte imbalances
- » Breakdown or tearing apart of the staple line in the stomach or incision
- » Nutritional deficiencies that can cause other health problems

If you experience nausea and vomiting, stop eating until it passes. If you have any question about whether your symptoms are normal, or you cannot keep water down, consult your surgeon immediately.

Staying regular

Surgery itself can affect your digestive system, but the lifestyle changes that come with a pouch can also cause you to experience irregularities. The following sections provide tips to help you get back on track.

Don't assume that any sudden change in bowel habits is a result of your surgery. If the symptoms (diarrhea or constipation) don't subside with treatment, see your surgeon to rule out other causes.

Curing constipation

Constipation is a common complaint after surgery. Right after surgery you're sore and that's probably the last thing you want to think about, but it happens. Usually it means you need to drink more fluids — the more, the better.

Immediately after surgery, you may be constipated due to the effect of the anesthesia or pain medication, which slows bowel function. Keep sipping fluids and move around as much as possible to move things along.

If you experience constipation later, it's most likely due to insufficient fluid intake. Some supplements, like calcium and iron, can also contribute to constipation. Don't stop taking your supplements, just keep drinking!

Another reason for constipation is lack of fiber, which can happen easily when your intake of fruits and veggies is restricted. If you're in Stage 2 of the eating plan, be sure you're drinking 48 to 64 ounces of fluid a day. In Stage 3 you can try soft cooked fruits and vegetables. In Stage 4 you're free to try fresh fruits and vegetables. Later, high-fiber cereals are a really good option.

Suppositories, stool softeners, fiber supplements, and enemas can also help, but talk to your surgeon about the problem first and find out what she advises.

Just remember, if you add fiber to your diet, you need to add more water, too. And don't forget to get up and move around! Exercise (even just walking) can often get things going.

Dealing with diarrhea

On the other end of the spectrum is another common complaint: loose stools, or what we typically call diarrhea. If you have diarrhea or are having more than four or five bowel movements a day, call your surgeon. And be sure to drink plenty of water, because you can become dehydrated quickly.

You're more likely to experience diarrhea if you have had GBP or BPD/DS than if you have had AGB. Diarrhea is often due to the following causes:

- » Unabsorbed fat from eating fatty foods
- » Sugar alcohols like sorbitol or mannitol that are found in sugar-free foods and tend to cause gas, bloating, and diarrhea
- » Intolerance to lactose (found in dairy foods), which can cause gas, bloating, and diarrhea
- » Eating foods you don't tolerate well

Your surgeon may prescribe medication or probiotics to treat the diarrhea. Probiotics are supplements that can be used to change or improve the natural bacterial balance of intestinal tract.

Keeping properly hydrated

If you remember one thing from the pre-op information you received from the dietitian, it's probably how important fluids are. Fluids are necessary for almost every bodily process as well as fighting off fatigue — not to mention helping your

metabolism to encourage weight loss. We recommend you get 48 to 64 ounces of fluid a day. Because you can't drink very much at one time, this means you need to have something with you *at all times* so you can be sipping.



TIP

A really good way to gauge if you're getting enough fluids is by the color of your urine. If it's pale yellow or clear, good job! If it's gold, drink more.

In addition to dark urine, other signs of dehydration include

- » Parched mouth
- » Dry skin
- » Fatigue

Water is certainly the best thing to drink. If you don't like the taste of water, try adding some lemon or lime juice or a sugar-free flavoring packet. Try to stay away from fruit juice because it can lead to *dumping syndrome*, which is discussed later in this section. Juice can also sabotage weight loss because it contains a lot of sugar and calories. If you must drink fruit juice, limit yourself to about four ounces a day and dilute it 50/50 with water.

If you love coffee, tea, or carbonated beverages, you're going to have to make some changes. The caffeine in coffee, tea, and colas can be dehydrating, and it will be challenging enough to stay hydrated as it is. Go for decaffeinated tea or coffee, and don't add calorie-laden cream and sugar. A little skim milk and artificial sweetener should be fine. Carbonated beverages are not recommended because they can distend your pouch and lead to uncomfortable gas and bloating.



WARNING

Just a word about alcohol — *don't*. Like the drinks mentioned earlier, alcohol is a diuretic, meaning it has a dehydrating effect on your body. You may also metabolize alcohol differently than you did before surgery. Always check with your surgeon before introducing alcohol into your diet.



REMEMBER

Sip fluids *slowly* and don't use straws. Drinking too quickly can lead to nausea and a feeling of fullness and even vomiting. Straws can introduce air into your pouch and lead to gas and bloating. (Chewing gum does the same thing.)

Avoiding the dreaded dumping syndrome

Dumping syndrome is a miserable condition that may happen to those of you who have gastric bypass surgery. Symptoms can range from mild to severe and may include

- » Nausea
- » Diarrhea
- » Light headedness
- » Cold sweats
- » Abdominal cramping
- » Weakness
- » Fast heartbeat

Dumping syndrome occurs after you eat foods that are high in sugar, fat, or sometimes dairy, or consume high-calorie liquids. These kinds of foods travel quickly through your pouch and are “dumped” into your small intestine. Doctors believe this triggers a series of hormonal responses that cause you to experience symptoms, sometimes right after eating and sometimes hours later.

Dumping syndrome can last from ten minutes to four hours depending on what and how much you have eaten. Unfortunately, time is the only cure; you can’t take anything to get rid of it. The best suggestion is just to go to bed and ride it out.

Some people may experience less dumping syndrome as time passes. For others, it may be a chronic condition.



REMEMBER

If you had GBP, your surgeon can give you recommendations about how much added sugar (as opposed to natural sugar in fruit and dairy) you can safely eat at one time. The following additional guidelines may also help you avoid dumping syndrome:

- » Avoid foods high in sugar.
- » Avoid foods high in fat.
- » Have small, frequent meals.
- » Increase protein intake.
- » Increase fiber.
- » Increase complex carbohydrates.

Most people who experience dumping find it good incentive to follow these guidelines for a while. If these measures don’t help you, let your surgeon and dietitian know.

Figuring out food intolerances

Anyone who has had weight loss surgery has some experience with food intolerances. Unfortunately, there's no rhyme or reason for who has what intolerances. For some people it's dairy, for some it's beef, for some it's applesauce. You may suddenly be nauseated by something you have eaten all your life. The following foods are commonly not tolerated well:

- » Meat
- » Pasta
- » Doughy bread
- » Rice
- » Potatoes

A food intolerance is not a food allergy. It happens when your pouch is not ready to accept a new consistency or is irritated by the offending food. The most mysterious part of food intolerances is that they often subside — a week or two later you may be able to eat problem foods again. If you discover an intolerance, wait a while and try it again. However, some people find that certain intolerances are more or less permanent.



TIP

After surgery, reintroduce yourself to foods one at a time so you may be able to identify what doesn't sit well. Also, when introducing a new food, eat a very small amount of it. The best way to avoid intolerances is to take it slow and stick to the phases of your diet as instructed by your dietician.

Easing Back into Eating after Your Weight Loss Surgery

No matter what kind of weight loss surgery you have had, the size of your new pouch limits the amount of food you can eat at one time. Before surgery, your stomach was approximately the size of your fist, with the ability to expand and stretch. After surgery, your pouch is much smaller and may only hold a few ounces of food at one time. If you have had GBP, your pouch is about the size of an egg. It cannot stretch like your old stomach, so because your food intake is limited, the food that enters your pouch needs to be nutritious.

Since you have just had stomach surgery, you need to let your insides heal. In order to facilitate this healing, you progress through four stages of a recommended postsurgery diet. The diet stages give your pouch time to heal and adjust

without putting strain on it. You don't want to get food stuck that would cause you to vomit and run the risk of tearing the sutures your surgeon has made. Although no diet rules are set in stone, there are general nutrition recommendations written by bariatric medical professionals that most surgeons follow. The length of time you're instructed to follow each stage of the diet depends on the type of weight loss surgery you had and your surgeon's specific instructions.

You may also find that you don't have much of an appetite at first. If you had AGB surgery, you may find yourself getting hungry by about two weeks after surgery. This is because the swelling around the band has gone down. If you had GBP surgery, it may be weeks or months before you start to feel hunger.

Following your surgeon's guidelines

Every surgeon's schedule for getting you back to "real" food may be a little different. Their instructions are based on research, best practices, and personal experience. Although this book and other sources can give you good guidelines, it's important that you follow the directions *your* surgeon gives you.

Why is this important? You probably have heard over and over that your surgery is a *tool* in your weight loss journey. Hopefully, you wouldn't try to build a house without the right tools and a blueprint to show you how to complete your project. Your surgery is the tool you need, and the surgeon's guidelines are like the blueprint to success. They work together to help you achieve your goal without banging your thumb too many times!

Your surgeon's guidelines will have very specific instructions regarding the kinds and textures of liquids or foods you're allowed at each stage of your recovery, based on what kind of surgery you had. Remember, your body is healing for the first six to eight weeks after surgery. Some of the very good reasons for paying attention to these directions are to

- » Lessen the chance of an obstruction caused by eating food you're not ready for or too large a particle
- » Decrease your chances of nausea, vomiting, diarrhea, and dumping syndrome
- » Keep you well hydrated
- » Prevent vitamin and mineral deficiencies
- » Reduce your risk of developing protein calorie malnutrition
- » Ensure you lose weight and look and feel great!

Your surgeon will probably require you to return to his office for a series of post-operative visits (no, not just one) during the first year and then annually after that.

Keeping these appointments is important even if you think you're doing fine. You need to have ongoing monitoring of your weight loss, lab values to detect possible vitamin or mineral deficiencies and nutrition intake, and have a chance to address other medical concerns you or your surgeon may have.

Eating and adding foods step by step



REMEMBER

Different types of foods and liquids empty from your pouch at different rates. One of the most important things to remember from now on is the more solid the food, the longer it stays in your pouch, and the longer the food stays in your pouch, the longer you feel full. Even though your head may tell you that you're ready for solids, your pouch can't handle the strain until enough time has passed. Your dietitian can help you with the guidelines and make your transition through each stage of the diet easier.

Following is a quick rundown of the four dietary stages (we go into more specifics on each stage in the remaining sections of this chapter):

» **Stage 1, Clear Liquids:** In this context, a *clear liquid* is one you can see through, without added sugar, carbonation, or caffeine. You're in this stage for the first few days after surgery. Gastric sleeve patients may stay at this stage for up to a week.

Your surgeon lets you know when you can move to the next stage.

» **Stage 2, Full Liquids:** A *full liquid* diet consists of food that pours off a spoon and has no added sugar, is lowfat, and has no lumps.

You usually follow this stage for one to two weeks or as directed by your surgeon.

» **Stage 3, Smooth Foods:** *Smooth foods*, also called *puréed foods*, have no lumps but sit on the plate without running all over. You want foods with no sugar added and lowfat.

The length of time you're on this stage varies greatly among surgeons. Always follow your doctor's orders since she knows best for your circumstances. If you have complications from the surgery, you may be on this stage longer than usual.

» **Stage 4, Soft Foods:** *Soft foods* are solid foods that you can mash with a fork. You still don't want to run the risk of getting too-solid pieces of food stuck or have problems with vomiting, so these foods are well cooked, not too chewy, and in small pieces, like ground meat instead of a chunk of meat. The same rules apply to this stage as the others: no added sugar, and lowfat.

You eat soft foods for at least two weeks. This amount of time depends on the kind of surgery you have had (GBP patients may stay on this stage a little longer) and how well you tolerated what you ate in the previous stage.