**FOOD & EATING**

How big is my stomach post-op?

*Answer: Egg cup/golf ball to small cup*

How many meals should I aim to eat post-op?

*Answer: 3 small meals essential regardless of operation type; Snacks if needed or to increase protein to recommended amount; Grazing not a good idea especially with gastric band.*

The recommended plate size for me is..?

*Answer: Tea plate 17-19cm. if out choose starter size / light bites / smaller appetite options that contain protein rather than adult main meal*

Recommended plate layout for 2 of my meals each day is..? (Write in the 3 main food groups)

*Answer: It’s important to continue with a healthy balance and variety of nutritious food and drink choices to optimise health and longer term management of my weight*

*VEG*

*50g*

*CHO*

*50g*

*PROTEIN*

*75g*

*N.B. these weights shown are the approx. weight of the servings as dished up at 2 main meals (e.g. lunch & evening).*

*Confusion point – the amount of usable protein in each of the protein containing foods will vary. For example; a serving of meat may contain 22g of protein but a serving of beans may provide 10g. Refer to ‘How to increase Protein’ leaflet for details.*

What should I remember about fluids?

a. *Answer:* *Quantity of sugar free fluids – sip 6-8 glasses/1500mls through the day, do not include coffee, alcohol, fizzy or caffeinated drinks in this total.*

b. *Answer:* *Timing – avoid fluids 30 minutes pre-meals and 30 minutes after; It could increase the capacity of stomach, flush foods through too quickly, encourage foods to swell in the stomach and possibly cause discomfort. Alternatively, it could decrease the amount of food you can eat and compromise health and nutrition status*

c. *Answer:* *Types- All drinks to be zero calories. Avoid full sugar/full strength squashes, fruit juices, sugary fizzy drinks, milkshakes and milky coffees (calorific and may promote dumping syndrome and/or reactive hypoglycaemia)*

What are the 5 main food groups essential for good health? Give examples.

1. *Answer:* *PROTEIN*

*Include a serving of low fat protein containing foods at each meal; to provide a total of 60-80g protein daily. See protein sheet for details. Choose a range of different proteins for better health. Eat protein first, choose low fat options, avoid skin/gristle and avoid processed meats e.g. salami.*

* *Red/White meat…….2-3 x week max recommended*
* *White/Oily fish………2 x week, one of which should be oily*
* *Poultry (No skin)…… Include regularly*
* *Eggs………………….Include regularly*
* *Lentils, Pulses, Hummus……Include regularly*
* *Soya, Tofu, Quorn…..Very useful protein sources*
* *Nuts…..Very useful protein top up, choose unsalted. Beware of calories*

2. *Answer:* *VEGETABLES and FRUIT*

* *Aim for 2-3 servings of different veg daily. Eat a rainbow!*
* *Any fresh frozen or canned (but not in brine). Avoid seeds, pips, membranes, peels and stringy fibres.*
* *Aim for 1-2 servings of different fruit daily. Eat a rainbow!*
* *Any fresh frozen or canned – avoid seeds, pips, membranes, peels and syrups.*

3. *Answer:* *STARCHY CARBOHYDRATES*

*These foods are not only an essential source of fibre and nutrients, they are the body’s preferred energy source. It is important not to omit these completely.*

* *Aim for 1 small serving at each meal (total of 2-4 daily)*
* *Bread………wholegrain, toasted, ½-1 slice or small flatbread/pitta*
* *Rice………..1 tablespoon, cooked*
* *Potato……...1 egg sized*
* *Pasta………1 tablespoon, cooked*
* *Breakfast Cereal/Oats……½-1 serving jumbo oats; choose lower sugar, higher fibre cereals*
* *Crackers……..2 higher fibre / wholegrain*
* *Grains………1 tablespoon cooked*

4. *Answer: DAIRY*

*Choose low fat/reduced fat/fat free where possible. Approx. 2-3 servings daily for calcium intake, contributes to protein intake too. If using plant alternatives (soya, nut milks) choose unsweetened and calcium fortified.*

* *Low fat milk (skimmed/semi skimmed)*
* *Low fat/diet yogurt (artificially sweetened rather than high sugar)*
* *Reduced fat cheese (Light/ Extra light, 30% less, 50% less etc.)*

5. *Answer: OILS AND SPREADS*

* *Use low fat cooking methods, 1 cal spray*
* *Unsaturated oils e.g. olive, veg, rapeseed, sunflower, corn*
* *Spreads from olive oil, sunflower oil. Choose plant oils/spreads in in preference to butter to optimise heart health.*

Other foods-give examples of food & drink not included in the main food groups…What’s the advice around these foods?

*Answer:*

* *Remember to read labels on processed foods e.g. sauces, soups, ready meals*
* *Choose <5g fat and sugar per 100g where possible (green or amber traffic light )*
* *Treats-high/full fat or high/full sugar; eat only occasionally and in very small amounts (biscuits, cakes, puddings, pies, pastry, sauces, processed foods)*
* *NOT RECOMMENDED AFTER SURGERY – Sweets, chocolate, sugary drinks, fizzy drinks, energy drinks, alcohol, excess caffeine*

**MEDICATION & BLOOD TESTS**

Which supplements must I take and when?

Supplements for both Gastric Bypass and Sleeve Gastrectomy: *Answer:*

|  |  |  |  |
| --- | --- | --- | --- |
| Supplement name/type | How Many/ How Much? | How often? | Alternative |
| Vitamin & Minerals*Forceval* | *1 tablet* | *Once daily* | *If unable to tolerate Forceval, a complete A to Z multivitamin and mineral. Selected over the counter brands only: twice daily* |
| Iron *Ferrous Fumarate*  | *210mg* | *One daily or \*twice daily for menstruating females* | *Ferrous Sulphate 200mg daily/\*twice daily.**Or Ferrous Gluconate 300mg daily/\*twice daily.* |
| Calcium & Vitamin D*Adcal D3* | *1 tablet* | *Twice daily* | *To provide 1200mg Calcium**20mcg/800iu Vitamin D daily* |
| Injection*Vitamin B12* | *1mg intramuscular* | *Month 6, month 12 and then 3 monthly* | *None* |

Important points when taking lifelong bariatric medication; *Answer:*

* *Take calcium and iron at separate times (at least 2 hours apart) because calcium may decrease the absorption of the iron.*
* *Take iron and multivitamin/mineral supplements with a good dietary source of vitamin C e.g. fruit/veg to improve absorption.*
* *Try to take one calcium tablet twice a day rather than in one go, to increase absorption.*
* *Suggested supplement regime*
* *Morning- Forceval & Iron*
* *Lunch- Calcium & Vitamin D*
* *Evening- Calcium/Vitamin D*

*If taking Thyroxine, leave a gap of 4 hours before or after supplements; try taking it first thing in the morning*

Supplements for gastric band: *Answer:*

|  |  |  |  |
| --- | --- | --- | --- |
| Supplement name/type | How Many? | How often? | Alternative |
| Vitamin & Minerals *Forceval* | *1 tablet* | *Once daily* | *If unable to tolerate Forceval, a complete A to Z multivitamin and mineral containing iron, selenium, copper and zinc daily* |
| Iron | *Not usually required* | *N/A* | *N/A* |
| Calcium & Vitamin D | *Not usually required* | *N/A* | *N/A* |
| Injection | *Vitamin B12 not usually required* | *N/A* | *N/A* |

OTHER QUESTIONS

From 12 months after surgery (sleeve, bypass or gastric band) - how often should I have my bloods monitored?

*Answer: Once a year (more often if necessary)*

*TIP! Synchronise annual blood test with anniversary month of surgery; this will help you to remember*

What blood tests should I have?

Bypass & Sleeve Band

*Answer: U+E, LFT, FBC, Ferritin, Folate, Answer: U+E, LFT, FBC*

*Calcium, Vitamin D, PTH, Zinc, Copper*

*(Plus if Diabetes present before surgery; HbA1c as appropriate and if lipids raised before or after surgery; Lipid profile as appropriate)*

Whose responsibility is it to ensure this is done?

*Answer: MINE*