

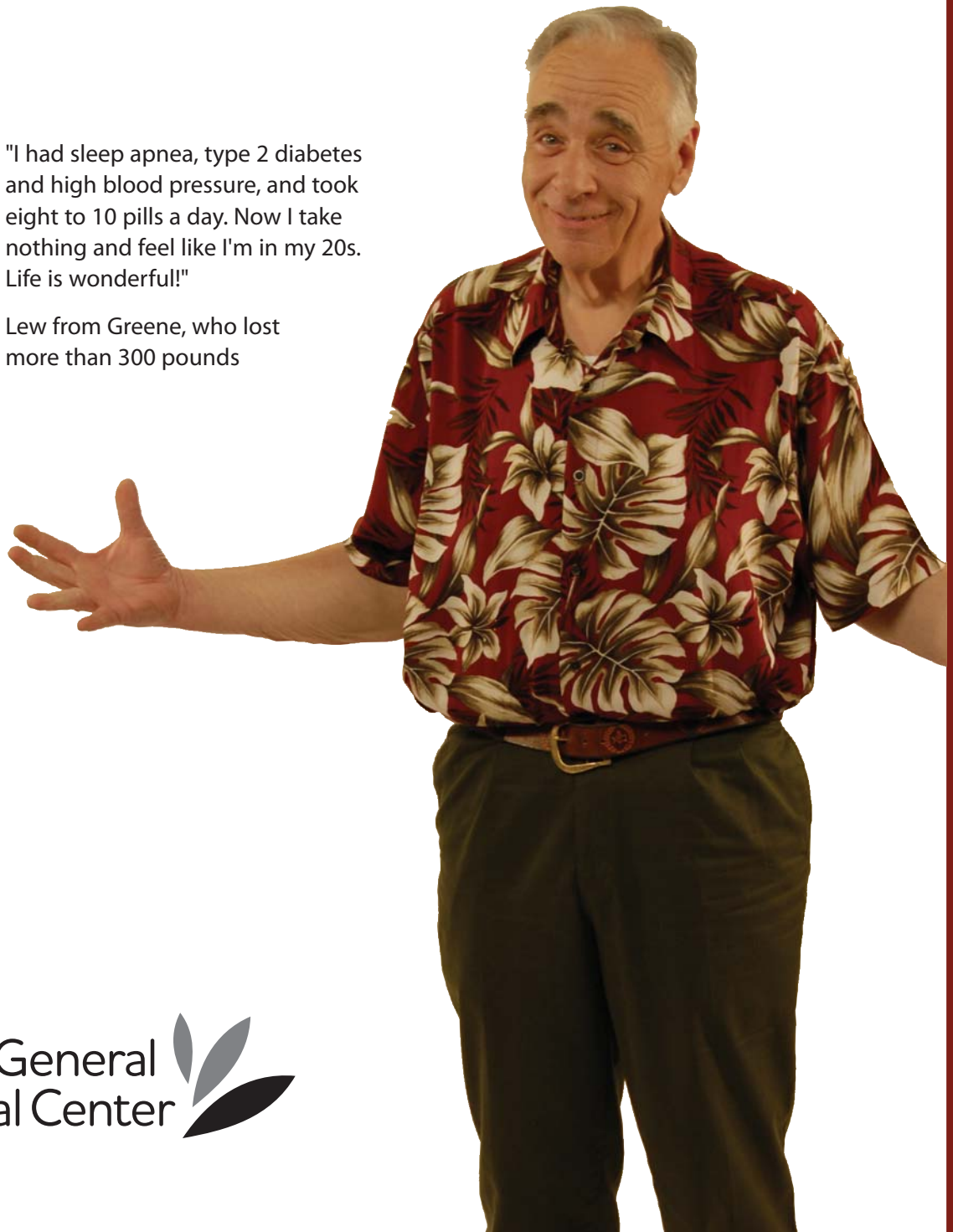
Gastric Bypass Surgery

What you need to know

Bariatric Center at MaineGeneral

"I had sleep apnea, type 2 diabetes and high blood pressure, and took eight to 10 pills a day. Now I take nothing and feel like I'm in my 20s. Life is wonderful!"

Lew from Greene, who lost more than 300 pounds



Gastric Bypass Surgery: What You Need to Know

Welcome!

Welcome to MaineGeneral's Bariatric Center. You have taken an important first step toward a healthier future. Our goal is to help each patient lose weight, live longer and improve his or her quality of life.

Our team partners with patients before, during and after surgery to help them gain better control of their food intake for the rest of their lives. We are committed to following our patients' progress long-term to help them reach and maintain healthy, realistic weight loss.

The Bariatric Center has a dedicated well-trained team to provide our patients with the best care possible. Our team consists of:

- General surgeons specially trained in bariatric procedures;
- Bariatric nursing staff;
- Bariatric dietitians;
- Bariatric social worker;
- Personal trainer.

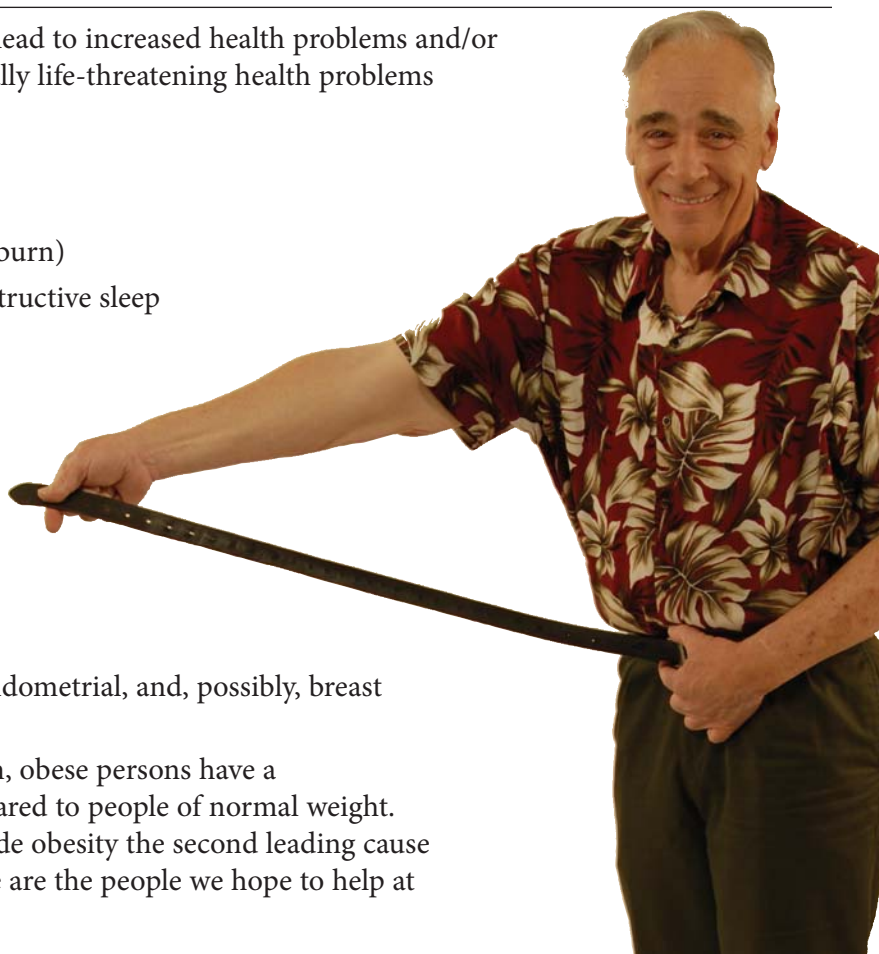
No weight-loss method, including surgery, is guaranteed to produce and maintain results. To be successful, patients must fully commit to making dietary and lifestyle changes and following the Bariatric Center's recommendations.

Morbid obesity: a serious health risk

Obesity is a disease where excess body fat may lead to increased health problems and/or reduced life expectancy. These serious, potentially life-threatening health problems include:

- Hypertension (high blood pressure)
- Diabetes
- Gastro-esophageal reflux (GERD, heartburn)
- Breathing problems while sleeping (obstructive sleep apnea)
- Hyperlipidemia (high cholesterol)
- Cholelithiasis (gallstones, gallbladder disease)
- Degenerative arthritis
- Increased risk for coronary disease, unexplained heart attack
- Infertility
- Higher prevalence of colon, prostate, endometrial, and, possibly, breast cancer.

According to the American Obesity Association, obese persons have a 50-100 percent increased risk of death as compared to people of normal weight. This substantial increase in health risks has made obesity the second leading cause of preventable death in the United States. These are the people we hope to help at MaineGeneral's Bariatric Center.



Why you should consider surgery

Most severely obese people have tried many times to lose weight. Many lose weight and then gain it all back. Some gain even more. Few can achieve long-term success in maintaining weight loss because research shows that severe obesity is a chronic disease. For 95 percent of the clinically obese, non-surgical treatment has not worked in achieving sustained weight control. Only weight-loss surgery, combined with lifestyle changes, helps most severely obese people lose weight and keep it off.

Why choose gastric bypass?

Research has proven that gastric bypass surgery is the most effective method for controlling severe obesity in patients with a BMI (body mass index) equal to or greater than 40. Statistics show gastric bypass has the best overall outcome for weight loss and long-term weight control. In addition, diseases related to severe obesity are eliminated or greatly reduced as a result of gastric bypass surgery.

Are you a good candidate for surgery?

The surgeons at the Bariatric Center use the following criteria to decide which patients are right for gastric bypass surgery. These criteria were developed by the American Society for Bariatric Surgery (ASBS). You must:

- Have a BMI of 40 or greater (100 pounds or more above your ideal body weight);
- Have reduced quality of life due to morbid (severe) obesity;
- Have a medical condition that would be improved by losing weight, such as hypertension, diabetes, cardiac concerns, high cholesterol, asthma, gastro-esophageal reflux disease (GERD), sleep apnea, breathing problems or arthritis;
- Not have a psychological or medical condition where the risk of surgery outweigh the benefits;
- Have tried unsuccessfully to lose weight on your own, through traditional programs (like Weight Watchers) or through doctor-supervised weight loss programs;
- Be able and willing to participate in treatment and be committed to long-term follow-up;
- Be motivated to change your lifestyle, for the rest of your life; and
- Be 18 years of age or older.

The gastric bypass operation: What it involves

The surgeons at MaineGeneral's Bariatric Center perform the Roux-en-Y gastric bypass. There are two parts to this operation. First, the surgeon makes a very small stomach pouch (less than one ounce) by dividing the stomach. This restricts the amount of food you can eat at any one time. Second, by bypassing most of the stomach and the first part of the small intestine, your body cannot absorb as many nutrients (calories). The combined result of these two components is you take in fewer calories than your body needs. This leads to effective weight loss.

The operation is done with laparoscopic instruments through several small incisions. This means less pain, quicker recovery, fewer wound complications, earlier discharge from the hospital and less scarring.

How will surgery help me to lose weight?

With the Roux-en-Y gastric bypass, you will only be able to eat very small meals. You will feel full after just a few bites of food. Because part of your digestive system is not used, your body cannot absorb all the calories in the food. If your body needs more energy than your food provides, it will take it from excess fat and you will lose weight.

This operation is just one of many changes you will need to make if you want to lose weight and keep it off. You also need to exercise regularly. If you do not, you will have less than satisfactory weight loss results.

Possible complications

All surgeries carry the possibility of complications and the Roux-en-Y gastric bypass is no exception. Your surgeon will discuss the possible complications with you during your first and final visits before surgery. They are outlined below. As always, feel free to call the Bariatric Center if you have any questions.

- Leaking from one of the connections created by surgery. Your surgical team checks these connections several times during and after surgery to assess for leaks. Leaks almost always require a second operation and the placement of temporary drainage tubes, and possibly a feeding tube.
- Excessive bleeding from one of your incisions or another place cut during the surgery. This may require a second operation and/or a blood transfusion.
- Blood clot that forms in your legs and can travel to your lungs. To reduce this possibility, the nurses will help you out of bed the day after surgery and ask you to walk in the halls. They will also give you medication while you are in the hospital to help prevent blood clots.
- Infection that could require medication, hospitalization or a second operation.
- Strictures or narrowing of the connections made during surgery. Strictures can usually be treated by expanding the connection, but sometimes require another operation.
- Vitamin/nutrient deficiencies because your body is not absorbing all the nutrients in your food. You must take the recommended supplements every day.
- Failure to lose weight if you do not follow our recommendations before and after surgery.

Other complications can occur with gastric bypass surgery. It is critical that you follow up with your surgeon and primary care physician for the rest of your life so problems can be treated early and resolved quickly.

One important note: Patients can never again eat sweets or any meal containing processed sugars, even if it doesn't taste sweet. Processed sugars often cause dumping syndrome soon after being eaten. This unpleasant condition can include any of the following: cramping and explosive diarrhea, overwhelming flu-like fatigue, nausea, lightheadedness, sweating and heart palpitations.

Gastric bypass is permanent

It is possible to reverse this operation, but it is a difficult and dangerous procedure. If you feel you could not live with this permanent surgery and the lifestyle changes required, do not have this operation.

Anticipated results

Patients who make the required lifestyle changes can expect major weight loss and improved health. The average patient will lose 60 to 80 percent of his or her excess body weight in the first 18 to 24 months. Your success depends on life-long dietary changes and increased exercise. If you keep overeating, the pouch can stretch over time. Eating fatty and fried foods and snacking through the day can greatly increase weight gain despite the small stomach pouch.

The choice is yours

Choosing bariatric surgery requires a lot of careful thought. This is a major surgery that, by itself, will not guarantee long-term success. This surgery is a tool that allows you to feel full and help you choose a healthy lifestyle. You can defeat the surgery by ignoring program guidelines/suggestions, drinking high-calorie liquids, continual snacking and inactive living.

The choice is yours.

Follow-up & support

Because gastric bypass requires you to make life-long changes in behavior and lifestyle, MaineGeneral's Bariatric Center offers a life-long follow-up program and support group system. The groups give patients and their families an opportunity to discuss concerns about the gastric bypass surgery, how it has affected their lives and any problems they may be having. At the support group meetings, we talk about eating habits, nutritional supplements, exercise and coping skills to help patients make lasting adjustments to the surgery. Patients and family members give and receive support from others who have experienced the surgery. They find this support and guidance essential to ensuring long-term weight maintenance.

Say "Yes" to exercise

Exercise is a critical part of any successful weight loss program. You do not need any special or expensive equipment such as treadmills or stationary bikes to exercise. All you need is YOU and a pair of well-fitting sneakers.

Our certified personal trainer will help you develop an exercise plan that works for you, keeping any of your limitations in mind. You will receive exercise bands and tubes with instructions in their use. Our trainer also offers weekly exercise classes at a discounted rate for patients who want to attend. He goes to the monthly support groups to discuss any ongoing concerns or questions you may have about your exercise program.

Do not make excuses.

Patients who do not exercise lose less weight than those who do.

Insurance coverage & financial responsibilities

Most insurance companies cover weight loss surgery. But because gastric bypass is elective, please understand that no insurance company will pay 100 percent of the surgery costs. We urge you to call the customer service number listed on your insurance card to see if your insurance company covers gastric bypass and talk about your financial responsibility.

If you are a good candidate for this surgery, our staff will submit your information and supporting documentation to your insurance company for pre-approval. Some insurance companies have a very rapid pre-approval process, while others may take 4-6 weeks. Please be patient during this process.

If your insurance company denies your request for surgery, we will appeal this denial. We will also help you resolve any problems you may have with your insurance coverage before and after your surgery.

The Gastric Bypass Process, From Start to Finish

Informational session

Before you can set up a consult with the surgeon, you must attend the bariatric informational session. These two-hour evening sessions are held monthly in Augusta or Waterville. After this meeting, you must ask your primary care provider to send a referral letter to the Bariatric Center. We will then send you an information packet which you must complete and bring with you to your first visit with the surgeon.

First consult with the bariatric surgeon

You will meet with the surgeon to talk about whether gastric bypass surgery is right for you. Please bring your completed medical history form to this appointment. Your surgeon will review your complete health history, assess and discuss your current health issues with you, explain the gastric bypass surgery and possible complications and answer any questions you may have. The doctor may order several tests during your first visit. These tests may include blood work, diabetes screening, an electrocardiogram to evaluate the heart, a nutrition evaluation and a psychiatric evaluation. If you have symptoms of sleep apnea, you may be sent for a sleep study.

Dietary consult

Because you will eat in completely new ways after your surgery, you will meet with a registered dietitian at least three times before your gastric bypass. The dietitian will evaluate your diet and weight loss history and your past eating habits so you understand the role food has played in your life. She will instruct you on the bariatric diet and new eating habits that will help make this surgery a success. This complete nutrition instruction will also include tips on improving nutrition, dining out and dealing with stress and emotional triggers.

Psychological consult

Are you ready both physically and emotionally for gastric bypass surgery? Can you adjust to the major lifestyle changes associated with weight loss surgery? Your visit with the psychologist/psychiatrist will determine if you are mentally prepared for gastric bypass surgery, in light of your current and past experiences and how weight has affected your choices in life. You may be asked to see a counselor or take medication before you can be approved for surgery.

Final visit before surgery

At this visit, the surgeon will answer any final questions you may have. He will also discuss details about your surgery, recovery and follow-up, as well as review the possible complications of the operation.

Pre-surgery testing

Before your surgery, we will schedule you for several X-rays, blood work and pre-admission assessment at the hospital.

Before surgery diet

Two weeks before surgery:

- No solid food
- Protein shakes, instead of meals, three times a day
- Clear liquids

24 hours before surgery:

- Stop protein shakes
- Clear liquids only

After midnight the night before surgery:

- Nothing to eat or drink until after surgery
- No water or other liquids; no solid food

Medication changes after surgery

Before your gastric bypass surgery, discuss your medications with your pharmacist or regular doctor. Because large pills may get stuck in the stomach pouch, all medications must be in a crushable, chewable or liquid form. Time-released medications may not work if crushed, so ask your doctor for a new medication. This is important! If you do not change your medication before surgery, your surgery may need to be re-scheduled. Your surgeon will not manage medications that do not directly relate to the gastric bypass surgery. Do not stop taking any medications before checking with your regular doctor.

Your hospital stay

The average hospital stay after surgery is three days. After your surgery, your nurses will help you get out of bed and sit in a chair. This helps prevent blood clots from staying in bed for too long.

To protect the newly made connections while they heal, you will not be able to eat or drink that first day after your operation, but you can have sips of water. Your nurses will help you to walk several times, even if you are in pain.

On the second day after your surgery, you will start on Phase I of the gastric bypass diet. This consists of clear liquids, broth, water and JELL-O gelatin. You will also walk several times a day. Both the Phase I diet and walking will continue on day three. Discharge from the hospital usually occurs on day three, depending on how you are doing. Your surgeon will make that decision after visiting you in the hospital.

Follow-up

To ensure your good health and reduce the risk of problems, the Bariatric Center staff will monitor you closely after your surgery. It is also important to maintain contact with your regular doctor, i.e., let him/her know how the surgery went and get your annual physical.

Your surgeon will meet with you two weeks after your surgery, or sooner if needed. He will see you again at three months, six months, nine months and then at one year after your surgery.

After one year, you and your surgeon will decide how often you will be seen in the future; this is usually once per year. At these appointments, the doctor will discuss your progress and answer any questions or concerns you may have. We also monitor lab work to ensure your continued good health.

When to call the Bariatric Center

We welcome calls and questions from patients and family members any time. If you have worsening pain, fever, chills, nausea or vomiting in the first two weeks after your surgery, call our office immediately or go to the nearest emergency room. You also need to call us if your incisions become red, swollen or are more painful.

Tips for a healthy lifestyle

- Exercise for 30 to 60 minutes most days of the week.
- Take vitamin and mineral supplements every day.
- Drink 64 oz. of sugar-free and noncarbonated liquid every day.
- Eat protein-rich foods first and at every meal.
- Eat slowly, chew your food well and avoid distractions while eating.
- Avoid all sugar-sweetened foods and drinks.
- Avoid high-calorie liquids (shakes, ice cream, alcohol, fruit juice).
- Attend support meetings when you can.
- Do not smoke.
- Do not take large pills or capsules.
- Contact our office right away with any emergency or concern.
- Please keep all follow-up appointments.

"At my heaviest, I couldn't even walk with my kids at Disney World. Now I run 5K races. Words cannot describe how it feels going across that finish line. I've come so far."

Diedra from Farmingdale,
who lost 93 pounds



After Gastric Bypass

Your First Month

Your normal stomach can hold about 5 cups of food. After the surgery, your new stomach will hold no more than 1/4-cup, or 2 oz., of food. You must eat very slowly so you do not overfill your pouch and cause pain or discomfort. A tiny meal may take you 30 minutes to eat. Eating for longer than 30 minutes may allow you to eat too much. You should eat three small meals a day unless your doctor tells you otherwise. You should stop eating when you feel full.

It takes about three months for your pouch to completely heal and strengthen. During the first month after surgery, you should eat only foods with the texture of applesauce. You will need to use a blender to prepare your meals. Blend your foods until smooth. Add liquids such as broth or milk, if necessary. Remove any lumps. Some foods blend more easily than others, so you might want to try blending some of your favorite foods before you have surgery.

You cannot eat and drink at the same meal after having bariatric surgery. You must stop drinking 30 minutes before you eat solid foods. You must wait one hour after eating a solid meal before you can drink liquids. If you eat and drink at the same time, you may overfill your pouch or flush foods through too quickly.

Consuming enough fluid is important. You need to drink 6 to 8 cups of liquid every day after surgery. You may need more in hot weather or during exercise. Because you must drink slowly and not eat and drink at the same time, it is hard to get in the full amount of liquid. You must sip throughout the day. Bring liquids with you wherever you go so you do not forget to drink. If you aren't going to the bathroom as often as usual or your urine takes on a dark yellow color, you're probably not drinking enough and are becoming dehydrated. Dehydration can also cause nausea, fatigue, lightheadedness and constipation.

To avoid taking in excess air, you should avoid carbonated beverages. You should not use straws or sports-top water bottles for the same reason. Avoid chewing gum as well.

Avoid alcohol and caffeine, which can irritate your stomach and can be high in calories.

Food Guidelines with Gastric Bypass Surgery

Before & after surgery:

- Eat three healthy meals a day.
- Don't skip meals.
- Eat protein first at meals. Avoid sandwiches and mixed dishes.
- Don't snack between meals, unless you are truly hungry.
- Chew every bite to baby-food consistency, or 25-30 times per bite.
- Eat slowly, 20-30 minutes per meal.
- Avoid distractions with meals. Sit at the table and do not watch TV, read, etc.
- Do not chew gum or drink through a straw. Avoid sports-top water bottles.
- Don't drink anything with meals, 30 minutes before and 60 minutes after meals.
- Aim for 48 to 64 oz. of fluids daily.
- Don't drink carbonated beverages.
- Attend support group meetings.

After surgery, you also need to:

- Stop eating when you feel full. Your new stomach can only hold a few tablespoons of food. Eventually it will hold 1/2 to 1 cup. Eating too much may bring about nausea and vomiting.
- Avoid extreme temperature changes in liquids for the first three months.
- Introduce one food at a time to make sure you can tolerate it.
- Check how you tolerate dairy products; drink LACTAID® instead of regular milk, if needed.
- Set up a schedule for vitamin supplements and medications.
- Commit to regular lab testing.
- Exercise regularly.

Diet Sequence

You will achieve the best results if you follow these guidelines.

After-Surgery Diet (in hospital)

Day 0 - The day of surgery:

- Nothing by mouth

Day 1 - The day after surgery:

- 1 oz. (30 cc) of water every hour
- Sip slowly
- Do not use a straw to drink
- No ice chips
- Avoid extreme temperature changes with liquid for the first three months
- If you are tolerating water well, with no nausea or vomiting, you will advance to the next stage of the diet.

Phase 1: Gastric Bypass Diet - Day two through discharge from hospital

- Clear liquids, with no sugar added. See ideas below.
- Sip slowly. Remember to stop drinking 30 minutes before meals and for 60 minutes after meals.

Clear Liquid Diet Menu Options

- Sugar-free JELL-O
- Chicken broth
- Beef broth
- Sugar-free Popsicles®
- Decaffeinated tea
- Flavored water (non-carbonated)

Sample Menu

Breakfast

- ½ cup decaffeinated tea
- ½ cup low-sodium broth

Lunch

- ½ cup flavored water
- ½ cup sugar-free JELL-O

Dinner

- ½ cup low-sodium broth
- ½ cup sugar-free JELL-O

Phase 2: Gastric Bypass Diet

Start at home when you leave the hospital and continue for two weeks.

- Start with 4-oz. protein shakes three times a day as tolerated. Work up to 8-oz. protein shakes three times a day.
- Sip slowly; it may take up to 30 minutes to eat.
- Stop when you feel full.
- Do not skip a meal.
- Drink clear liquids in between shakes. Remember to stop drinking 30 minutes before meals and for 60 minutes after meals.

** Typical intake after the first day home from the hospital: A total of 12 oz. protein shakes and eight to 12 oz. clear liquid per day.

** Typical intake after two weeks: A total of 24 oz. protein shakes daily and 24-32 oz. clear liquid per day.

Two weeks after surgery, after your visit with the surgeon, begin taking these vitamin/mineral supplements:

- Complete multivitamin
- Calcium citrate 1500 mg/day
- Vitamin B complex
- Vitamin B-12. If you choose to do injections, please bring your medication and syringes to your after-surgery visit with the surgeon. The nurse will teach you how to give yourself the shot. If you choose pills, you may begin them with the other supplements.
- Iron

Sample Menu:

Breakfast

- 4 to 8 oz. protein shake

Midmorning

- ½ cup flavored water

Lunch

- 4 to 8 oz. protein shake

Midafternoon

- ½ cup broth

Dinner

- 4 to 8 oz. protein shake

Evening

- ½ cup sugar-free JELL-O

* Use a protein supplement that contains 20 grams of protein per serving.

* Drink more sugar-free liquids throughout the day.

Phase 3: Gastric Bypass Diet

From two weeks to eight weeks after surgery (a total of six weeks)

- Eat only soft or pureed protein. See examples below.
- Eat protein first.
- Chew food to an applesauce-like texture for the best tolerance.
- Drink protein shakes between meals to reach established protein goal.
- Each meal should take 20 to 30 minutes to eat.
- Do not drink anything with meals, 30 minutes before meals and for 60 minutes after meals.

Suggestions for high-protein foods:

- Egg Beaters®
- Eggs - one yolk or less per day.
- Cheese (low-fat) - 2 grams fat per serving
- Veggie cheese
- Cottage cheese - 1 percent
- Yogurt - light, fat-free
- Skim milk
- Tuna fish - packed in water
- Canned chicken
- Fresh white fish - cod, sole, flounder, scallops, imitation crabmeat, shrimp
- Legumes - kidney beans, black beans, garbanzos (chick peas)
- Turkey breast or ham - Healthy Choice® or low-fat varieties
- Tofu, BOCA burger, soy products

Any other protein food must be lean and ground in blender to baby-food texture. This avoids a blockage that can produce terrible abdominal pain, vomiting or nausea. Avoid tough, dry cuts of meat for the first six months.

You are slowly adding solid foods to your diet to make sure you tolerate them well. The pouch is small so you must eat your protein first. This helps promote wound healing and prevent muscle loss.

The following foods are not allowed yet:

- Bread;
- Cereal;
- Rice;
- Noodles/pasta;
- Fruits; and
- Vegetables.

Sample Menu:

Breakfast

- 1 soft boiled egg or ½ cup yogurt

Snack

- Water or Crystal Light

Lunch

- ½ cup cottage cheese or 1 to 2 oz. fish

Snack

- 4 to 8 oz. protein shake

Dinner

- 1 to 2 oz. Healthy Choice® turkey slices
- 1 oz. low-fat cheese

Snack

- 4 to 8 oz. protein shake

Phase 4: Gastric Bypass Diet

Starts eight weeks after surgery and continues for 12 months or until you achieve your weight-loss goal.

- Meat does not need to be pureed. Avoid dry tough cuts of meat for six months.
- Cut meat into small pieces and chew well.
- Add cooked vegetables to your diet.
- Introduce raw veggies after you've tried cooked veggies.
- Avoid corn, fresh asparagus and broccoli stalks.
- Eat protein first.
- Take 20 - 30 minutes for each meal.
- Stop as soon as you feel full.
- No liquids with meals. Remember to stop drinking 30 minutes before meals and for 60 minutes after meals.
- Introduce one new food at a time to test for tolerance.
- No distractions at mealtimes (no TV, reading, telephone). Focus your attention on your meal.
- Make healthy food choices.
- You can stop having protein shakes now unless you need help meeting your protein requirement. (_____ grams per day as directed by your dietitian.)

Sample Menu:**Breakfast**

- 1 egg with 1 oz. cheese or 1/2 cup cottage cheese

Snack

- Water or Crystal Light®

Lunch:

- 2 oz. deli meat
- ¼ to ½ cup cooked carrots or ½ to 1 cup green salad

Snack

- 8 oz. milk or 4 to 8 oz. protein drink*

Dinner

- 2 to 3 oz. chicken or fish
- ¼ to ½ cup cooked broccoli crowns

Snack

- Water, Crystal Light®

* You can have protein shakes if you cannot meet your protein needs with solid foods.

Maintaining Your New Lifestyle

Maintenance Gastric Bypass Diet

Begins 1 to 1½ years after surgery

Sample menu:

- 2 to 3 oz. meat (14 grams protein)
- ½ cup vegetable (2 grams protein)
- *1/2 cup starch - rice, pasta, bread, cereal or potato (3 grams protein)
- Fruit (0 grams protein)

*Only add starch when you are halfway to your weight-loss goal

Meal ideas

Breakfast:

- Yogurt parfait (made with yogurt, granola and 1 scoop protein powder)
- Scrambled eggs (limit 3-4 eggs per week)
- Egg Beaters® (every day, if you wish)
- Oatmeal (make with skim milk; add protein powder)
- Cottage cheese (with fruit, if you prefer)

Lunch:

- Low-calorie microwave dinners (250-350 calories)
- Salmon burgers
- Garden burgers
- Black bean burgers
- Fish patties
- Tuna, ham or chicken salad (made with low-fat dressing)
- Taco salad (omit chips and use low-fat dressing)
- Low-fat string cheese and whole-grain crackers
- Chili
- Steamed vegetables

Dinner:

- Low-calorie microwave dinners (250-350 calories)
- Baked chicken breast
- Stewed chicken
- Grilled tuna steaks
- Grilled chicken strips
- Baked lean ham
- Baked tilapia
- Grilled salmon

Fruits:

- Strawberries
- Blackberries
- Canned pineapple
- Unsweetened applesauce
- Small grapes
- Fresh or canned pears
- Mango
- Cherries
- Cantaloupe
- Peeled apples
- Fruit cocktail
- Peeled peaches
- Papaya
- Honeydew melon

All canned fruit must be canned in natural juice

Vegetables:

- Zucchini
- Onions
- Acorn squash
- Green beans
- Salad greens
- Well-cooked broccoli crowns
- Spinach
- Cauliflower
- Peeled cucumbers
- Baked sweet potato
- Stewed tomatoes
- Mushrooms
- Beets
- Carrots

Milk & dairy:

- Light yogurt (sugar-free, fat-free or low-fat)
- Fat-free or reduced-fat sliced cheeses
- Parmesan cheese made with skim milk
- Skim milk
- Feta cheese - light
- Mozzarella cheese made with skim milk

Meats:

- Scallops
- Chicken breast strips (not breaded)
- Halibut
- Cod
- Lean ground beef or turkey (90-98 percent lean)
- Pink salmon
- Canadian bacon
- Lean pork chops
- Clams
- Cooked shrimp
- Haddock
- Tilapia
- Crabmeat
- Turkey breast
- Lean ham
- Tuna steaks

Nuts & oils:

- Extra virgin olive oil
- Olives
- Fat-free or light mayonnaise or Miracle Whip®
- Avocado
- Peanut butter (small amounts)
- Margarine (small amounts)

Starches:

- Whole-wheat or whole-grain breads
- Whole-grain crackers
- Brown rice
- Whole-grain cereals
- Whole-wheat pasta

Avoid all starches made from refined flour and/or added sugar. Avoid white bread, semolina pasta, white rice and pastries, doughnuts, muffins and cakes.

Beverages:

- Decaf coffee or tea
- Sugar-free flavored beverages
- Soy milk
- Flavored water
- Fat-free broth
- Water
- Skim or 1 percent milk
- Lactose-free milk
- Sugar-free or fat-free hot cocoa

Remember:

- Weight-loss surgery is not a cure for obesity. It helps control obesity.
- Use your pouch as a tool.
- Take responsibility for your health and your life!
- Make protein your first priority to protect your muscle mass. Goal is _____ grams per day.

Protein

Protein is the major building block of the body. It is vital for building muscle and repairing cells. Protein helps maintain our body's proper fluid balance and provides energy to help our bodies function properly. Protein also is essential to enzyme and hormone production. Major sources of protein include meat, fish, poultry, eggs, milk and dairy products, dried beans and peas and peanut butter.

You need to eat the right amount of protein, even though you are eating fewer calories than your body needs during this weight-loss period. If you do not eat enough protein, significant hair loss may occur in 3 to 6 months after the protein deficiency. Even if you are eating enough protein by that time, you could still lose hair if your intake of protein was too low after surgery. Other consequences of a low-protein intake include poor healing, lowered immune system, weakness and fatigue.

Your protein needs are _____ grams per day. (The dietitian will complete this section for you.)

To figure out how much protein is in food, look at the "Nutrition Facts" section of the food label. It will list the grams of total protein per serving. If you eat only a part of what is listed as a serving, you need to figure out how much protein was in the portion you ate. For example, if the portion listed is one cup and it contains 8 grams of protein, but you only ate one eighth of a cup, you have eaten 1 gram of protein. Grams are often shortened to "g." The chart on the next page is also a good reference.

Protein

Food Name	Portion	Calories	Protein (G)
Beans, baked, canned	½ cup	123	7
Beans, kidney, canned	½ cup	112	8
Beef, eye of round	3 oz	143	21
Beef, top loin	3 oz	176	21
Cheese, American, fat-free	1 oz	40	6
Cheese, cottage, 1 percent	½ cup	82	14
Cheese, parmesan, grated	¼ cup	128	12
Cheese, mozzarella, part-skim	1 oz	78	8
Cheese, ricotta, part-skim	½ cup	170	14
Chicken, white, breast meat	3 oz	138	26
Chicken, leg w/o skin	3 oz	162	21
Cod, white, baked	3 oz	89	21
Crab, steamed	3 oz	82	17
Egg	1	78	6
Flounder	3 oz	62	21
Halibut	3 oz	119	21
Ham, lean, 5 percent fat	3 oz	133	21
Hamburger, 90 percent lean	3 oz	169	21
Lobster, steamed	3 oz	77	16
Milk, skim	1 cup	86	8
Milk, skim plus	1 cup	120	11
Peas, chick, canned	½ cup	134	7
Pork tenderloin	3 oz	139	21
Pork loin chop	3 oz	172	21
Salmon, baked	3 oz	155	21
Shrimp, steamed	3 oz (15 large)	84	18
Soy flour, defatted	¼ cup	81.7	12.8
Soy milk, plain	1 cup	79	6.6
Soy nuts	¼ cup	202	15
Steak, sirloin, trimmed	3 oz	166	26
Swordfish, baked	3 oz	132	21
Tempeh	½ cup	165	15.7
Texturized soy protein	½ cup	59	11
Tofu	½ cup	94	10
Tuna, canned, water packed	3 oz	111	25
Turkey, white meat	3 oz	105	21
Veal leg, top round	3 oz	128	21
Yogurt, frozen, sugar-free	½ cup	80	5
Yogurt, fruit, fat-free, low sugar	1 cup	120	8
Yogurt, without fruit, low-fat	1 cup	194	8

Protein Supplements

Protein shakes - try them before surgery to see how you tolerate them. Some brand names and serving information is listed below. You will be on them for 2 weeks before surgery and at least 2 to 3 weeks after surgery.

When you look for protein shakes, make sure they are:

- High in protein (20 grams or more per serving)
- Low in carbohydrates
- Low in sugar (less than 5 grams per serving)
- 120 calories or less per serving

Clear liquid protein supplements:

- Isopure (40 g. protein per 20 oz.)
- Extreme Pure Protein drink (42 g. protein per 20 oz.)
- Protein Twist (40 g. protein per 20 oz.)
- Whey Fruity (26 g. protein per scoop mixed into 8 oz. water)
- Whey Nectar (24 g. protein per scoop mixed into 8 oz. water)
- Body Fortress Whey (20 g. protein per scoop mixed into 8 oz. water)
- Protica (25 g. of protein per serving, 1 vial)

Protein Shakes

Product name	Serving size	Sugar (g)	Protein (g)	Flavor	Where to buy it
Atkins Nutritionals	1 can	1	20	Coffee, chocolate, vanilla, strawberry	Grocery and drug stores
EAS Results	8.4 oz	1	15	Chocolate, vanilla	Wal-Mart, GNC
Carb Solutions	11 oz	1	21	Vanilla, chocolate	Wal-Mart, GNC
Slim Fast Low-carb	11 oz	2	20	Vanilla, chocolate	Grocery stores, Wal-Mart, drug stores
Isopure	20 oz	0	40	Fruit flavor variety	www.isopureoutlet.com
Designer Whey	1 scoop	Less than 1g	18.5	Chocolate, vanilla, strawberry, praline	GNC, supermarkets
Nectar	1 scoop	0	23	Fruit, chocolate, vanilla	www.wlssuccess.com/nectar.htm
Protica	1 vial	0	50	Varies	www.protica.com; The Bariatric Center

Behaviors for Successful Weight Loss

- Do not drink any soda and carbonated beverages.
- Drink only sugar-free beverages.
- Eat at least five fruits and vegetables each day.
- Eat more sugar-free whole grain and fewer simple carbohydrates.
- Before your surgery, practice eating protein first at meals.
- Use baking, broiling, grilling or boiling as cooking methods and avoid frying.
- Stop adding butter and margarine to foods.
- Limit intake of cream and half & half in coffee and tea.
- Prepare lunch at home and take it to work.
- Eat out less.
- Limit food portions and don't go back for seconds.
- Eat healthy snacks, and only when you are truly hungry.
- Make time to go to the grocery store and plan balanced meals.
- Identify areas in your daily routine that cause you to make poor choices.
- Avoid using food as a reward or to manage emotions.
- Manage stress in a healthy way. Don't eat it!!
- Make exercise a priority. Start with 10-minute segments and work up to 30 minutes 5 or 6 days a week.

Nutritional Complications Associated With Surgery

Nausea and vomiting may happen during the first few months after weight-loss surgery if you do not pay attention to the messages your body gives you. If you feel pressure or fullness in your abdomen, stop eating! One more bite may cause vomiting.

You may also have nausea or vomiting if you do any of the following:

- Eat or drink too fast.
- Drink fluids with meals, before meals or too soon after meals.
- Lie down too soon after a meal.
- Move to the next diet stage too quickly.
- Overeat.
- Don't chew food thoroughly.
- Eat tough meats or other food that is hard to digest.

Ways to avoid nausea & vomiting:

- Avoid spicy, greasy and fried foods;
- Avoid sweets, desserts and sugary foods;
- Drink beverages between meals, not with meals, and take small sips;
- Take small bites, chew food thoroughly and eat slowly;
- Go back to clear liquids for 1-2 days to rest your stomach.

Dehydration is common in the first months after surgery. To make sure you drink enough liquid, you must take small sips throughout the day. Drink 64 oz. of fluid daily and avoid caffeine and alcohol.

When you eat foods that are high in sugar, undigested sugar and simple carbohydrates are "dumped" into the small intestine rather than gradually being released in small amounts from the stomach. Symptoms of dumping syndrome may occur within 15 minutes of eating. They include abdominal pain, cramping, nausea and fullness, followed by diarrhea. Other symptoms include dizziness, weakness, warmth, faintness and sometimes increased heart rate and cold sweats. To avoid dumping syndrome, do not eat simple sugars, starches and even fatty foods.

Lactose intolerance, or milk intolerance, happens with some patients. Symptoms include gas, bloating, abdominal cramping and diarrhea after consuming milk or milk products. Drinking lactose-free milk, soy milk and taking LACTAID® tablets treats lactose intolerance.

Diarrhea can be caused by poor absorption of nutrients. Lactose intolerance and taking antibiotics can also cause diarrhea. No matter what the cause, diarrhea must be aggressively treated to prevent dehydration.

Ways to prevent/treat diarrhea:

- Avoid high-fiber and greasy foods.
- Avoid fruits and vegetables with the skins.
- Limit milk and milk products.
- Avoid caffeinated drinks.
- Drink 64 oz. of fluid every day.
- Avoid sugar substitutes (Sweet'N Low®, NutraSweet®, Splenda®, etc.)

Constipation after weight-loss surgery is common. Bowel movements every three days are normal. Since you are eating much less food and less fruits and vegetables, the frequency and volume of your bowel movement is reduced. Constipation may also be caused by taking an iron supplement.

Due to possible problems with hemorrhoids, hernias and intestinal blockages, it is important to prevent constipation. Choose high-fiber foods at meals; drink plenty of sugar-free beverages; and exercise regularly. Occasional use of over-the-counter bulk-forming laxatives, such as Metamucil® or Citrucel®, may help. If the problem does not go away, call your doctor.

Excess gas occurs after surgery because certain foods cannot be digested normally. These foods are milk, milk products, legumes (peas, beans) and cruciferous vegetables (mustard greens; various cabbages; broccoli; cauliflower; brussels sprouts). To ease gas, try Beano®, Phazyme® or Gas-X® and avoid artificial sweeteners.

Hair loss can occur with rapid weight loss. About 10-20 percent of weight-loss surgery patients lose hair due to lack of protein and iron. Hair thinning usually starts about three months after surgery and can continue until six months post-surgery if patients do not eat enough protein. To prevent hair loss, try to meet your protein goal, consume protein supplement drinks and take an iron supplement.

Poor absorption of nutrients, decreased food intake and lower amounts of digestive juices can lead to **vitamin and mineral deficiency** of iron, calcium, folic acid and vitamin B12. To prevent this, you must take your recommended supplements daily for the rest of your life.

Certain foods may cause **nausea, vomiting or irritation of your stomach**. Avoid foods high in fat or fiber. Don't eat foods that are hard to chew thoroughly.

In the first six months, do not eat:

- Fried foods;
- Seeds/skins of fruits and vegetables;
- Orange and grapefruit membranes;
- Coconut, nuts, granola and dried fruits;
- Pickles;
- Whole-grain bread and cereals;
- Popcorn;
- Peas, corn, beans, broccoli stalks;
- Tough meats;
- Salad greens;
- Highly seasoned or spicy foods;
- Stringy vegetables like asparagus, celery, string beans.

Gallstones increase after gastric bypass surgery if you have a BMI over 40. Rapid weight loss can make these gallstones painful. This usually occurs in about 30 percent of patients. Usual treatment of gallstones is removal of the gallbladder.

Vitamin & Mineral Supplements

For your body to function at its best, it needs a daily supply of several important nutrients. Daily stresses, pollution and germs deplete the body of these essential nutrients. To replace them, we need to eat healthy, nutritious meals and take quality nutritional supplements. Remember: All medications and supplements must be in a **chewable, crushable or liquid form**.

Vitamins and minerals help your body use the energy found in foods. We recommend that you take a **multivitamin**, even after you reach your weight loss goals.

Daily needs: Adult chewable with iron or two children's chewable with iron twice daily.

Minerals can have many different functions in the body. Gastric bypass surgery patients can develop deficiencies due to decreased food intake, poor absorption and eating foods low in nutrients. We recommend that all patients take a high-potency mineral supplement that includes the minerals listed below.

Vitamin B-12 is important for normal, healthy red blood cells and for your nervous system to function properly. After surgery you must take extra vitamin B-12, either through monthly shots or daily tablets.

Calcium is the most abundant mineral in the human body. More than 99 percent of total body calcium supports bone and teeth structure. The rest is found throughout the body in blood, muscle and the fluid between cells. Calcium is needed for muscle contraction, blood vessel contraction and expansion, the secretion of hormones and enzymes and sending messages through the nervous system.

Daily needs: 1,500 mg

Iron is an important part of many proteins and enzymes that maintain good health. Lack of iron limits oxygen delivery to cells, resulting in fatigue, poor work performance and decreased immunity.

Daily needs: 45-60 mg

B-Complex (B-50) is a combination of all the B vitamins, which play an important role in our body functions. These vitamins are essential in maintaining healthy eyes, hair, skin, mouth and organs. They also help supply us with energy and may help relieve depression and anxiety.

Daily needs: 1 tablet daily

Barriers to Successful Weight Loss

- Negative emotions like depression, boredom, anger, shame, frustration, loneliness and rejection, which cause some people to use food for comfort
- Binge eating or compulsive eating
- Lack of support from family or friends
- Not planning ahead, which results in poor food choices, eating out, skipping meals and eating too much later in the day
- Lack of time to shop and prepare healthy foods
- Lack of time to exercise
- Celebrations, work events and a lifestyle that uses food as a reward



"Now I like looking in the mirror, can dance the night away and will live to see my children grow up. I feel incredible!"

Sara from Weeks Mills, who lost 104 pounds.



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