

# Eating after your Gastric Band

## Post-op nutrition advice

You have had a gastric band placed.

### How does the band work?

This acts like a belt and is placed around the top of your stomach where your food pipe (oesophagus) ends. The band works by helping to slow down the speed at which food travels down into your stomach, therefore helping you to feel fuller, sooner and for longer. You will be physically satisfied with much smaller portions BUT ONLY if you choose the right kinds of food.

The success of your band is down to the nutritional and lifestyle choices that you make. Having weight loss surgery does not guarantee results...it is down to you to work with the band.

### How does the band NOT work?

The band will help with physical hunger but not with emotional hunger. For many of us emotional hunger plays a big role in our eating and our body weight. We eat when we are bored, happy, sad, frustrated, in front of the TV, on the way into work and so on. The band will not change these habits. YOU need to work on recognising them and taking steps to change these behaviours. Awareness is the first step.

Do not expect the band to STOP you from eating—it won't. However if you choose nutritious, filling foods that need chewing then you are giving yourself the very best chance of success.

### The post op diet

Following your operation you will follow a staged eating plan designed to gradually reintroduce foods safely. It is important that you follow this advice to avoid damaging the band and causing yourself any pain.

Stage	Description
1	Smooth liquids for 14 days
2	Soft moist diet for 2 weeks
3	Normal diet from now on (1 month post-op)

In total you have 2 weeks on liquids and 2 weeks on soft diet and after a month you are back to eating normal textured foods. No need to blend, puree or buy baby food. See the advice under each section for example menus for each stage. Remember: KEEP HYDRATED. Sip from a sports bottle (easier because you don't have to keep taking the lid off) between meals and try to avoid drinking with a meal or soon after.

## Stage 1: smooth fluids for 14 days

Following surgery you would have been told to drink free fluids for 48 hours. If you have had no problems with watery liquids, you can now progress to slightly thicker fluids. Aim for fluids with the consistency of drinking yoghurt.

To ensure that intake of protein, calcium and other nutrients is adequate, you should aim to drink approximately 500mls (1 pint) of low fat milk each day (e.g. 1%, skimmed or semi-skimmed). Alternatively, choose a milk alternative such as soya milk but ensure that it is fortified with calcium. When you start eating you don't need to continue drinking this amount of milk.

Drink the liquids slowly, sipping every 10—15 minutes and avoid gulping. **You are aiming to drink 200mls fluid per hour.**

Additionally you can choose from the following list, aiming for small portions of between 50mls and 100mls for a 'meal'. Start at 50mls and gradually work up to 100mls, aiming to have a maximum of 4 – 5 small 'meals' a day but drink plenty of water throughout the day.

- Instant oat cereal such as Ready Brek. Porridge made with rolled oats/jumbo oats is too lumpy at this stage. This needs to be very sloppy and runny.
- Smooth soups e.g. cream of tomato or chicken, oxtail, or if homemade these can be blended if necessary until smooth. If the soup contains bits then strain it before eating.
- Homemade 'smoothies' – blend with milk/yoghurt and make sure there are no bits/seeds from fruit.

**You need to take a daily vitamin and mineral tablet. Choose a chewable one at least for the first 6 weeks. We recommend Centrum chewable, Superdrug/own brand chewable multivitamins AND minerals, or Feroglobin liquid.**

### Adding Protein

Protein helps heal wounds, maintain and build muscle mass (think about your skeletal muscle, as well as, your heart and diaphragm), make hormones and enzymes, blood clot, maintain blood pressure control, and maintain a healthy immune system.

During the early stages of the diet, it is unlikely that you will be consuming enough protein to meet your needs. Most of the protein content of your diet at this stage will be provided from milk. Half a pint of semi-skimmed milk contains 10g of protein.

Aim to consume a minimum of 60g of protein per day. To increase the protein content add additional protein powder (containing around 15-20g of protein and <100kcal) with milk or water. Ensure it's mixed thoroughly before drinking.

## Stage 2: 2 weeks soft moist diet

After 13 days, you can gradually start to introduce foods with a soft moist texture.

You should be able to mash all foods easily with a fork and break food down into small pieces. **Chew the food very well** so that there are no lumps.

If you feel any pain or discomfort on eating, stop until the feeling has passed. Avoid eating and drinking at the same time. Wait for 30 minutes before and after eating before having a drink. You can start to reduce the amount of milk now so just aim for 1 glass a day.

It is important to stick to small portions, start with a medicine cup/egg sized portion and gradually build up to a **100ml sized portion**. This is approximately the size of a standard yoghurt pot or a ramekin dish.

Remember to keep the portions small. The entire meal (meat/vegetables/potatoes) should fit into 1 ramekin dish / roughly 6 tablespoons in total. You might find that it helps to eat from a side plate.

A typical portion size would be 4 tbsp of fish pie/casserole/cauliflower cheese and 2 tbsp mashed vegetables, smaller if you are planning on eating a pudding.

Cereals	1 weetabix or 1 sachet instant oat cereal / Ready Brek
Main Courses	½ portion fish in white sauce Minced meat/chicken in sauce Small portion of casserole / stew Soft pulses with stock or sauce, e.g. dahl Soft omelette / scrambled egg Macaroni cheese/ cauliflower cheese Cottage/shepherds/fish pie Lasagne/cannelloni Cottage cheese
Vegetables / potatoes	Mashed / jacket potato (no skin) Mashed sweet potato Carrot, broccoli, cauliflower, courgette, swede all mashed with a fork
Fruit	Stewed fruit Tinned fruit in natural juice Mashed banana (small)
Puddings	Low calorie yoghurt Low calorie mousse Low calorie fromage frais Low calorie custard

### **Stage 3 : Week 4 onwards protein rich - healthy eating**

It is now safe to start switching over to healthy, protein rich foods and a way of eating that will ensure the best results from your surgery.

It is important to make sure that you eat enough protein every day. Protein should be your priority so remember **P.V.C – Protein first, then Vegetables, then last of all Carbohydrates**. Aim for a balanced meal with approx half of your plate to be filled with vegetables and salad and the other half equally split between a small fist size portion of meat or fish and an egg sized portion of carbohydrates (pasta/potato/rice/bread).

As mentioned earlier in this booklet, the rate of weight loss is entirely down to the food and activity choices that you make on a daily basis.

#### **If you are not losing weight, you are still eating too much.**

For the best chance of success follow these simple guidelines:

- Aim for 3 meals a day
- Decrease portion sizes as above
- Choose protein rich food that requires a lot of chewing and, if possible, increase your level of physical activity
- Keep the plate small—aim for a 7" plate or a side plate as this will make your portion look larger
- Chew well and eat slowly. Put your knife and fork down between mouthfuls.
- Drink low calorie liquids

It is possible that you won't feel as much restriction from your band as you had hoped for. This is a normal worry but is usually because you need to change the food choices that you are making. Remember that in order to work, the band needs harder drier foods which require a lot of chewing. Soft foods like mashed potato, pasta with sauce, lasagne, and curry's etc will slip down through the band very easily allowing you to eat much larger quantities and, as a result, can slow your weight loss.

**Every time you put something in your mouth, you make a choice.**

## **Moving on**

After a few weeks, you should start increasing the variety of foods that you are taking, aiming to reduce the 'soft' 'sloppy' foods and focus on 'normal' foods that are drier and tougher and require more chewing. These are the types of food that will work well with your band, keeping you feeling fuller for longer. Foods that are sloppy and soft will slip through your band, thus allowing you to eat more. If you continue to eat soft moist, sloppy foods, it is likely that your weight loss will slow and you will struggle to reach your target rate.

## **Eating Slowly**

Each food bolus (lump of chewed up food) that we swallow, takes about 1 minute to go through the band. Once it has passed through then it is fine for you to take a sip of drink. If you eat faster than this you will be adding to the amount of food in your pouch before the last mouthful has passed through.

So.... Take a small mouthful      chew 20 times      swallow      wait....  
Then take another mouthful....

20: Cut each mouthful into a 20pence sized piece

20: Chew each mouthful at least 20 times

20: Wait. At least 20 seconds between each mouthful

20: Stop eating after 20 minutes.

## Problem foods

In theory, if you chew your food really well, you can eat almost anything. In practice, most people find there are some foods that just don't seem to go through the band.

There are likely to be some foods that you find difficult to tolerate after having a gastric band. These are unpredictable and vary hugely between people.

You might find that your ability to tolerate foods can be improved by how you cook them and how well you chew them. Always try a small amount first and if you can't tolerate it, leave it a few weeks and try it again.

Problem Foods	Suggestions for alternatives
<b>Pasta – ‘al dente’</b>	Serve in a sauce Use small shapes
<b>Rice</b>	Try a ‘wet’ risotto instead Chew well and eat small amounts at a time. Basmati or easy cook rice may be easier
<b>Certain meats</b> e.g. steak, dry chicken, fried or roast meat, BBQ's	Cut meat into small bits or choose minced dishes. Have slow cooked, tender meats e.g. casseroled or tinned meats (fish is often easier to swallow)
<b>Fibrous fruit and vegetables</b> e.g. sweetcorn, celery, raw vegetables, aubergine, dried fruit	Peel off skins / chew very well Cook for longer Try cauliflower, broccoli, peeled tomato, beetroot
<b>Skins and pith on fruit/veg</b> e.g. oranges, carrot, banana, pineapple and grapefruit	Peel fruit Use fruit in smoothies/fresh juices Puree/stew fruit Try tinned fruit in natural juice e.g. peaches, pears and apricots
<b>Doughy products</b> e.g. bread and pasta	Try crispbreads, crackers, toast, pitta bread Overcook pasta and noodles Add small amounts of sauce or gravy

After 6 weeks you can go back to tablet medications and vitamins. The following are recommended vitamin and mineral tablets that you should take daily for life:  
Sanatogen A-Z complete/ uperdrug A-Z multivitamins/ Tesco Complete Multivitamins and minerals/ Lloydspharmacy A-Z multivitamins and minerals

(You will need to purchase these supplements. If you unable to purchase this supplement your GP will need to prescribe you with Forceval tablet once daily)

## Protein content of foods

You need to have at least 60 grams of protein per day for health.

You can add extra protein to meals and drinks by using 'fortified milk' instead of water:  
 Add 1-2 tablespoons of skimmed milk powder to ½ pint (300ml) milk. Add this to cereals, drinks, soups/stews, sugar free jellies, and to make sauces.  
 Try slow cooking methods such as casseroles or stews instead of frying, barbequing or grilling.

Use softer or more tender cuts of meat.

Serve the meat with a low fat sauce.

Ensure you chew foods well before swallowing. Eat slowly, take smaller mouthfuls and chew each mouthful well.

Food item	Protein Content- approx (grams)
<b>Dairy</b>	
1 standard yoghurt	5
1 pint semi skimmed milk	20
<b>Meat and Fish</b>	
1 small chicken breast (100g)	25
1 small salmon fillet 9100g)	25
1 small can tuna (45g)	10
Beef mince (140g)	30
1 slice lean beef/ lamb	10
1 slice wafer thin ham	2
<b>Vegetarian</b>	
Peanuts (50g)	15
1/3 tin baked beans (135g)	10
Nature valley Chewy Protein	8
1 quorn sausage	7
Quorn mince (100g)	15
Humous (100g/ 4 tablespoons)	10
Lentils/ pulses (1 tablespoon)	2
1 egg	8

## Beware

It is really important not to overfill the top pouch in the early weeks. If you do, it will lead to pain and discomfort but worse, it can lead to the band dislodging. If you keep on overfilling the pouch then both it and your oesophagus (food pipe) will stretch and it may lead to long term swallowing problems.

## Managing diabetes with a band

There are now a few changes to your diabetes management and the main one is how to treat hypos (low blood sugars).

### Treating hypos

The best treatment for hypos is FLAT lucozade. Always have a bottle ready and leave the lid off so that the fizz is reduced.

You should use 1/3 of a bottle to treat your hypo. Test your blood sugar 10 minutes later and **if it remains less than 4mmol/l, take another 1/3 of a bottle of lucozade**. Continue until your blood sugars are above 4 and then follow with some longer acting carbohydrate and examples are:

- 1 weetabix with milk
- 1/2 bowl cereal with milk
- 1 small yoghurt
- 1 glass of milk

However, if your band is generally quite tight or if during the hypo you feel as though your band is tightening you may struggle to swallow 1/3 bottle of lucozade. If this is the case, then try using 1 tube of glucogel and squeeze this into your mouth.

You can get glucogel on prescription from your GP. The same applies as with lucozade, test your blood sugar levels 10 minutes after taking the gel and if they remain below 4mmol/l then repeat with another tube until they rise. Follow as before with some longer acting carbohydrate (see list above).

If you are getting persistent hypos, explore this with the obesity team as we might need to adjust your levels of medications.