

Guelph Bariatric Surgery Diet Guidelines Booklet



**Please bring this booklet with you to
EVERY Bariatric Clinic visit and appointment**

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Guelph Bariatric Surgery Diet Guidelines Booklet

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1. OVERVIEW OF DIET PHASES - BEFORE AND AFTER SURGERY

Note: Your surgery date is considered “**Day 0**”. Use a calendar to find out your start date and end date for each diet phase.

Diet Phase	Duration	Start Date	End Date	Details
Pre-Op: Optifast®	Follow instructions from your surgeon			Pg. 5
Phase 1: Clear Fluids	Day 1 – 7 (for 1 week)			Pg. 8
Phase 2: Full Fluids	Day 8 – 27 (for 3 weeks)			Pg. 10
Phase 3: Soft/Regular Diet	Day 28 until your goal weight is achieved			Pg. 12
Phase 4: Maintenance Diet	Long-term diet			Pg. 21

Overview

After bariatric surgery what you eat is a key factor during the healing process. Good food will also help you maintain good health as you continue to lose weight. The diet phases to follow after surgery are outlined in this booklet. Be patient, your switch to solid food will be slow. It will take time and effort to bring back regular solid foods into your diet.

The purpose of the diet guidelines is to:

- Maintain a good diet and health while promoting weight loss
- Prevent any of the following problems:
 - surgical problems, dehydration, vomiting and pain, obstruction of the new opening in the pouch, stretching of the pouch.

A lifelong commitment to healthy food and lifestyle choices, as well as regular physical activity, will lead you to weight loss success and improved health.

2. NEW EATING TECHNIQUES

What you will need:

- Measuring cups and spoons
- Food scale for weighing food portions
- Smaller plates, cups, bowls and utensils
- Water bottle that you can keep with you throughout the day

3 small meals, 3 small snacks:

-Your new stomach or “pouch” is very small and can handle only small amounts of food and fluid at a time. You will need to eat 3 small meals and 3 small snacks every day to prevent overfilling your pouch. Spacing out your food into small meals and snacks is also important so that you can be sure to get in all of the fluids and nutritious foods that your body needs each day.

-When you first return home from the hospital, you may only be able to take in about 30 to 45 mL (2-3 Tbsp) of fluid or food per meal. As time passes, your average meal size will increase to about 125 to 250 mL (1/2 - 1 cup). As you continue to heal, your portions will gradually increase. To avoid stretching your pouch it is important that you limit your portions to no more than the amounts that are outlined in the diet guidelines.

Keep fluids and solids separate:

-It is recommended that you DO NOT drink water or fluids at the same time as you eat your food. Combining fluids and solids can cause nausea or discomfort. It can also push foods through the pouch faster, causing you to eat more.

-Water and fluids should be avoided for 30 minutes before and after eating your meal or snack.

Eat slowly; chew thoroughly:

-Aim to take 25 seconds or 25 chews for each bite. Take very small bites of food.

-Try using a small sized fork or spoon or cutting your food into small pieces. Also try placing your utensil down in between bites.

-Food should feel similar to applesauce consistency in your mouth before being swallowed.

Sip fluids throughout the day:

- Your goal is to drink 1.5 to 2 litres (6-8 cups) of fluid each day.
- To reach this goal, it is important to sip your water constantly in between meals and snacks.
- Sip fluids slowly. Do not gulp or use a straw. You may find it helpful to drink from a water bottle with a squirt-top.

Allow yourself 30 to 45 minutes to eat each meal:

- Focus on meals and limit distractions such as the television, computer or work.
- Explain to family and friends why it is important for you to eat slowly.
- Pay attention to taste and savour every bite.

Stop eating/drinking when you begin to feel full:

- Listen to your body's signals, not to the food that is left on your plate. Over-eating even just a bite or two can cause you to vomit. It can also potentially lead to stretching of your pouch over time.

Choose low-fat, low-sugar foods and fluids:

- Foods and fluids that are high in sugar and/or fat may cause Dumping Syndrome. (See pg. 35 for more information on Dumping Syndrome)
- These foods and fluids should also be avoided because they are generally high in calories and can slow down your progress towards your weight loss goal.
- See pg. 33 for examples of foods and fluids that are high in fat and/or sugar.

Commonly Used Measurements**Measuring fluids by volume:**

250 mL = 1 cup
125 mL = 1/2 cup
80 mL = 1/3 cup
60 mL = 1/4 cup
1 Litre = 1000 mL = 4 cups
1.5 Litres = 1500 mL = 6 cups
15 mL = 1 Tbsp
7.5 mL = 1/2 Tbsp
5 mL = 1 tsp
30 mL = 1 fluid ounce

Measuring by weight:

30 g = 1 ounce (oz.)
45 g = 1.5 ounces (oz.)
60 g = 2 ounces (oz.)
75 g = 2.5 ounces (oz.)

3. a) OPTIFAST®: LIQUID DIET BEFORE SURGERY

Goal: To lose weight and shrink the size of your liver to help make your weight loss surgery easier and safer. Optifast® is a complete meal replacement that is low-carbohydrate, low-fat and high-protein. It contains all of the vitamins and minerals needed to keep you well nourished before your surgery.

4 packets of Optifast® per day prepared with water provides:

- 900 calories
- 90 grams of protein
- 100% of the recommended daily intake for 21 vitamins and minerals

How to take Optifast®:

1) Drink 4 packets of Optifast® per day.

Note: Having less than 4 packets per day may cause muscle breakdown, which can delay healing and proper weight loss after surgery.

2) How to prepare: Mix one packet of Optifast® powder with approximately 300 mL (1 1/4 cups) of cold water. Blend or shake well. Add ice for a chilled effect.

3) Space the packets 3 to 4 hours apart throughout the day. Example: Have 1 packet of Optifast® at each meal time and then have the fourth packet as a snack.

4) Drink Optifast® immediately after mixing for best results, or refrigerate for up to 24 hours.

5) Do not consume other food or calorie-containing beverages while on Optifast®.

Stop taking Optifast® by midnight the day before your surgery.

Daily Fluids:

Goal: 1.5 to 2 litres (6-8 cups) of fluid each day.

It is important to drink plenty of calorie-free, caffeine-free fluids in addition to the Optifast® meals. Water is always best.

Acceptable Fluids

- Clear broth; limit to no more than 250 mL (1 cup) total per day
 - Decaffeinated coffee or tea, black or with artificial sweetener
 - Water
 - Water with naturally added flavouring (e.g. fresh lemon or lime) or artificial sweeteners and flavouring agents (e.g. Crystal Light® or Mio®)
- **Use artificial sweeteners and other flavouring sparingly. A small amount goes a long way to add flavour. For example, try using 1/3 of a package of Crystal Light® Singles for 1 bottle of water.

Helpful Hints

- Sprinkle cinnamon or nutmeg into the vanilla Optifast® for a classic flavour
- Enhance the chocolate Optifast® with 1 to 2 drops of almond, orange, or peppermint extract
- Create a smoothie effect with a sprinkle of orange or raspberry Crystal Light® into the vanilla Optifast®
- Energize the chocolate Optifast® with a splash of cold decaffeinated coffee for a mocha taste
- Go for the pudding effect by adding less water and eating Optifast® with a spoon
- Blend the Optifast® in a blender with ice for a slushy type consistency

Buying Optifast®

The length of time that you will need to take Optifast® for before surgery will depend on your body weight. Most people take Optifast® for about 2 to 4 weeks. Be ready to purchase your supply the day you meet the surgeon.

2-week supply costs \$200.00

Optifast® Sample Meal Plan

The Optifast® Meal Plan is designed to replace your usual daily food intake. The meal plan consists of 4 servings of Optifast® each day.

1 serving Optifast® = 1 packet of Optifast® powder formula with 300 mL water
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Optifast® Sample Day Menu

*Items marked with '**' indicates that it is optional*

Breakfast

- 1 serving Optifast®
- 250 mL (1 cup) of decaffeinated tea or coffee (black)*

Lunch

- 1 serving Optifast®
- 125 mL (1/2 cup) clear bouillon broth *

Supper

- 1 serving Optifast®
- 125 mL (1/2 cup) clear bouillon broth*
- 250 mL (1 cup) decaffeinated tea or coffee (black) *

Evening Snack

- 1 serving Optifast®

Note: If you prefer you can divide the 4th serving of Optifast® so that you have half of it as an afternoon snack and the other half as an evening snack.

REMINDER: Drink at least 1.5 to 2 Litres (6-8 cups) of water each day in addition to your Optifast®.

3.b) PHASE 1: CLEAR FLUIDS

Start Date: Day 1 after surgery _____

End Date: Day 7 _____

Goal: 1.5 to 2 litres (6–8 cups) of fluid per day

Clear fluids are fluids that you can see through. Clear fluids are important after surgery in order to allow for healing of your pouch. On Day 1 after surgery you will start on your clear fluids diet in the hospital and will continue to follow this for the first week after surgery. While in hospital you will be asked to keep track of your fluid intake.

It is very important to drink enough liquids and fluids so that you will not become dehydrated. Below are some guidelines that will help you meet your fluid needs.

1. Aim for about 125 to 250 mL (1/2 - 1 cup) of clear fluid per meal
2. Be prepared to spend 1 to 1 1/2 hours to have your meal
3. Sip at least 30 mL (2 Tbsp) every 15 minutes
4. Stop drinking if you feel pain or discomfort; try again later
5. Focus on drinking water in between your meals and snacks

***TIP:** If you are struggling to get your fluid intake in and/or if you are drinking less than 1 litre (4 cups) of fluids per day, call the Bariatric clinic.

List of Acceptable Clear Fluids

Clear Fluid Items	Types	Details
100% Fruit Juice Diluted with Water	-Apple, cranberry, white grape juice -100 % fruit juice or no added sugar fruit juice	-When diluting juice, use equal parts water and juice. Example: 60 mL of juice diluted with 60 mL of water
Broths (includes consommé and stock)	-Beef, chicken or vegetable *Look for low sodium broths	-If using homemade broth be sure to strain and remove any chunks and any excess fat
Coffee or tea - decaffeinated	-All decaffeinated coffee and tea -All herbal teas	-Have your tea or coffee black (without any milk added)
Flavoured water (non-carbonated, zero-calorie options)	E.g. 1/3 package of Crystal Light® added to 500 mL (2 cups) water	-Water can also be flavoured using lemon or lime, ginger etc.
Gelatin, sugar free	E.g. Jell-O® No Added Sugar	-Any comparable no added sugar gelatin products are acceptable

Phase 1: Clear Fluids – Sample Menu

Breakfast	125 mL (1/2 cup) diluted apple juice (60 mL juice with 60 mL water) AND 125 mL (1/2 cup) decaffeinated coffee or tea (black)
A.M. Snack	125 mL (1/2 cup) No Added Sugar Jell-O [®] or other similar gelatin product
Lunch	125 mL (1/2 cup) chicken broth AND 125 mL (1/2 cup) No Added Sugar Jell-O [®]
P.M. Snack	125 mL (1/2 cup) diluted cranberry juice
Supper	125 mL (1/2 cup) beef broth AND 125 mL (1/2 cup) diluted apple juice
Evening Snack	125 mL (1/2 cup) No Added Sugar Jell-O [®]
<p>Total amount of fluids in this sample menu= 1,125 mL (4 1/2 cups) ** Therefore, in this sample day you will need to drink <u>at least</u> 750 mL (1 1/2 cups) of additional plain water in between meals and snacks in order to reach your goal of 1.5 to 2 litres (6-8 cups) of fluid per day.</p>	

3.c) PHASE 2: FULL FLUIDS

Start Date: Day 8 _____

End Date: Day 27 _____

Goals:

- 1.5 to 2 litres (6-8 cups) of fluid per day
- 3 small meals, 3 small snacks spaced throughout the day (every 2-3 hours)
- Approximately 125 to 250 mL (1/2 - 1 cup) of full fluids per meal
- Your protein intake will gradually increase to approximately 40 grams per day during the full fluids diet phase

Food Group	Recommended Full Fluids	Full Fluids to Avoid
Milk and Alternatives (protein-rich items) M.F. = Milk Fat	- Cream soup (low-fat, strained) - Fortified soy beverage - Greek-style yogurt (0% or 1% M.F) - Kefir yogurt - Milk (1% M.F. or Skim) *Tip: To add protein, stir in 30 mL (2 Tbsp) of Skim Milk Powder - Pureed vegetable soup with added milk or yogurt - Pudding (low-fat and no added sugar) - Yogurt (without chunks, no added sugar, low-fat) <u>Note:</u> Lactose-free milk or fortified soy beverage may be better tolerated.	-Chocolate milk -Smoothies, milkshakes etc. -Fortified soy beverage with high sugar content
Fruits and Vegetables	-Applesauce (unsweetened) or other unsweetened fruit purees/sauce -Tomato and vegetable juice	-All fruit juices unless diluted with water -Sugar sweetened applesauce
Grain Products	-Cream of Rice® hot cereal -Cream of Wheat® or Oat Bran® -Oatmeal – plain/unsweetened	-Hot cereals that are sweetened
Fluids	-Water *(Water is best!) -Decaffeinated Tea and Coffee, Herbal tea -Water flavoured with lemon or lime slices or zero-calorie sweeteners (Crystal Light®, MiO® etc.)	-Carbonated beverages -Vitamin water, lemonade, sweetened iced tea etc.

Phase 2: Full Fluids Sample Menus

Full Fluids Sample Menu – 1	
Breakfast	125 mL (1/2 cup) oatmeal (cooked) made with 125 mL (1/2 cup) milk <i>*Tip: To boost protein, add 30 mL (2 Tbsp.) of skim milk powder</i>
A.M. Snack	125 mL (1/2 cup) yogurt (0% or 1% M.F, no added sugar) <i>*Tip: To boost protein, use Greek-style yogurt</i>
Lunch	125 mL (1/2 cup) strained cream soup made with 125 mL (1/2 cup) milk
P.M. Snack	125 mL (1/2 cup) V8 or tomato juice (reduced sodium)
Supper	125 mL (1/2 cup) pureed vegetable soup made with milk AND 60 mL (1/4 cup) pudding (low-fat/no added sugar)
Evening Snack	125 mL (1/2 cup) yogurt (0% or 1% M.F, no added sugar) Examples: Source®, Silhouette®, Astro® Fat Free, or 0% plain Greek-style

Full Fluids Sample Menu – 2	
Breakfast	125 mL (1/2 cup) Cream of Wheat® cereal (cooked) made with 125 mL (1/2 cup) milk <i>*Tip: To boost protein, add 30 mL (2 Tbsp.) of skim milk powder</i>
A.M. Snack	125 mL (1/2 cup) apple juice (60 mL juice 60 mL water)
Lunch	125 mL (1/2 cup) pureed vegetable soup thickened with 125 mL (1/2 cup) Greek-style yogurt
P.M. Snack	125 mL (1/2 cup) milk
Supper	125 mL (1/2 cup) strained cream soup made with 125 mL (1/2 cup) milk (1% or skim) AND 60 mL (1/4 cup) applesauce (unsweetened)
Evening Snack	60 mL (1/4 cup) pudding (low fat/no added sugar)

Full Fluids Sample Menu – 3	
Breakfast	125 mL (1/2 cup) oatmeal cereal (cooked) made with 125 mL (1/2 cup) milk <i>Tip: To boost protein, add 30 mL (2 Tbsp.) of skim milk powder</i>
A.M. Snack	125 mL (1/2 cup) yogurt or Greek-style yogurt
Lunch	125 mL (1/2 cup) pureed vegetable soup thickened with milk (or 125 mL (1/2 cup) yogurt)
P.M. Snack	125 mL (1/2 cup) milk
Supper	125 mL (1/2 cup) strained cream soup made with 125 mL (1/2 cup) milk AND 60 mL (1/4 cup) applesauce (unsweetened)
Evening Snack	60 mL (1/4 cup) pudding (low-fat/no added sugar)

3. d) PHASE 3: SOFT/REGULAR SOLID DIET

Start Date: Day 28 _____

End Date: When you weight loss goal achieved

Goals:

- 1.5 to 2 L (6–8 cups) total fluid
- 3 small meals, 2 to 3 small snacks each day
- Approximately 60 to 80 grams of protein per day

Note: It is important to wait until at least 1 month after surgery before introducing solids into your diet. Once you have reached a month after surgery and you are tolerating the full fluids diet well, soft solids can be introduced into your diet slowly. Progress slowly as tolerated. Remember to follow the recommended eating techniques, which can be found on pg. 3.

*TIP: Keep solids and liquids separate. Water and fluids should be avoided for 30 minutes before and after eating your meal or snack.

Phase 3: Soft/Regular Diet Outline

This diet outline is based on the Bariatric Food Group Alternatives and Serving Sizes that are outlined on the following 3 pages.

Breakfast: Choose:
one protein-rich food serving **AND**
one grain products serving **AND**
one fruit serving

A.M. Snack: Choose:
one protein-rich food serving **AND**
one fruit **OR** grain products serving

Lunch: Choose:
one protein-rich food serving **AND**
one grain products **OR** vegetable serving

P.M. Snack: Choose:
one protein-rich food serving **AND**
one fruit **OR** grain products serving

Supper: Choose:
one protein-rich food serving **AND**
one vegetable serving **AND**
one grain products serving

Evening Snack: Choose:
one protein-rich food serving

Each day: It is recommended that you drink 125 mL (1/2 cup) of milk (1% or skim) or fortified soy beverage each day as part of meals or in between meals.

Please Note:

The Phase 3: Soft/Regular Diet Outline is a guide that will help you with your meal and snack planning, and with your serving sizes. If you need to change the timing of when you eat specific food items based on your schedule and preferences, please remember the following points:

- To reach your daily protein needs, include one protein-rich food serving at each meal and snack.
- Serving sizes are important. Weigh and measure your foods to make sure that you are on track.

Bariatric Food Group Alternatives and Serving Sizes

PROTEIN-RICH FOODS		
Milk and Alternatives		
	Serving Size	Details
Cheese, low-fat	30 g (1 oz.)	Aim for less than 20% milk fat (M.F.)
Cottage cheese	125 mL (1/2 cup)	Plain, 0% or 1% M.F.
Fortified Soy Beverage	125 mL (1/2 cup)	Unsweetened
Greek-style yogurt	125 mL (1/2 cup)	0% or 1% M.F., plain or no added sugar
Kefir Yogurt, low-fat	125 mL (1/2 cup)	
Milk	125 mL (1/2 cup)	Skim or 1%M.F. Includes 1% buttermilk
Ricotta cheese	60 mL (1/4 cup)	Part-skim or lower fat options
Yogurt, low-fat, no added sugar	125 mL (1/2 cup)	0% or 1% M.F., plain or no added sugar
Meat and Alternatives		
	Serving Size	Details
Canned fish (tuna, salmon etc.)	45 g (1.5 oz.) or 80 mL (1/3 cup)	Canned in water
Chicken or turkey	45 g (1.5 oz.) or 80 mL (1/3 cup)	Cooked (skin removed), includes ground
Edamame (soybeans)	80 mL (1/3 cup)	Without pod
Egg	1 egg (large)	Boiled/poached/scrambled/omelette
Fish (salmon, tilapia, sole etc.) and seafood (shrimp, scallops)	45 g (1.5 oz.) or 80 mL (1/3 cup)	Cooked, includes from fresh or frozen
Hummus	80 mL (1/3 cup)	Low-fat and/or homemade
Legumes (chickpeas, kidney beans, lentils etc.)	80 mL (1/3 cup)	Canned, drained
Peanut Butter or nut butter	15 mL (1 Tbsp)	
Tofu (firm or soft)	125 mL (1/2 cup)	
<p>** Avoiding red meat (beef, pork, ham, lamb, veal, venison) is recommended for the <u>first 6 months after surgery</u>. When introducing red meat, progress slowly as tolerated.</p>		
Red meat (beef, pork, veal, ham etc.)	45 g (1.5 oz.) or 80 mL (1/3 cup)	Remove any visible fat before cooking. Choose lean or extra lean ground beef.
Peanuts and all other nuts/seeds (after 3 months)	30 mL (2 Tbsp)	**Nuts contain protein however they are also high in calories and fat. <u>Use sparingly and chew well.</u>

Bariatric Food Group Alternatives and Serving Sizes(Continued)**FRUIT****Serving Size:** The recommended serving size of fruit is 60 mL (1/4 cup). Examples are below.**Note:** Choose fruits that are soft and/or ripe in first several months after surgery.

Fruit	Serving Size	Details
Apple	1/2 of small apple	Peeled, cored, baked in first 3 months
Applesauce	1/4 cup	Unsweetened, includes fruit purees
Banana	1/4 of small banana	
Berries	60 mL (1/4 cup)	Includes strawberries, blueberries etc.
Cherries	60 mL (1/4 cup)	Pit removed
Grapefruit	1/4 medium grapefruit	Membrane removed
Kiwi	1/2 kiwi	Inside only (no skin)
Orange	1/2 medium orange	Membrane removed
Mango - ripe	60 mL (1/4 cup)	Peeled
Peach – ripe	1/2 medium peach	Peeled if skin is tough
Pear – ripe	1/2 small pear	
Pineapple	60 mL (1/4 cup)	If canned, remove juice
Plum	1 medium plum	Peeled if skin is tough
Tangerine	1 small tangerine	Membrane removed if tough
Watermelon	60 mL (1/4 cup)	

GRAIN PRODUCTS**Note:** This can be the most difficult food group to tolerate, especially in the first few months after surgery. Try the grain products in smaller quantities at first (i.e. 1/4 slice of toast)

Grains	Serving Size	Details
Bread, wholegrain	1/2 to 1 slice (17-35g)	Toasted may be better tolerated
Cereal, high fibre	60 - 125 mL (1/4-1/2 cup) or 17-35g	Includes hot and cold cereals
Crackers, whole wheat	Approx. 3-4 (15–30g)	Lower-fat (check nutrition facts)
English muffin	1/4 - 1/2 (15-30g)	Plain or whole wheat
Melba toast	2 – 4 pieces (10–20g)	Or 4 – 7 mini melba rounds
Pasta (Cooked)	60 – 125 mL (1/4 to 1/2 cup)	Spagettini, rice noodles and egg noodles may be better tolerated
Potato (Cooked)	60 – 125 mL (1/4 to 1/2 cup) or 1/2 medium	Mashed, or baked potato without skin
Quinoa, Couscous	60 – 125 mL (1/4 to 1/2 cup)	Cooked
Rice (Cooked)	60 – 125 mL (1/4 to 1/2 cup)	White or brown
Soup and soda crackers	80 mL (1/3 cup) soup and 3 soda crackers	
Tortilla or pita	1/2 to 1 of a 6-inch (17-35g)	Wholegrain

Bariatric Food Group Alternatives and Serving Sizes(Continued)

VEGETABLES

Serving Size: The recommended serving size of vegetables is 80 mL (1/3 cup).

Note: Avoid all raw vegetables for the first 3 months after surgery. When introducing raw vegetables go slowly and as tolerated.

Vegetables	Serving Size	Details
Artichoke Asparagus* Beans, green/wax Beets Broccoli Brussels sprouts Cabbage* Carrots Cauliflower Celery* Eggplant Leeks Mixed vegetables (fresh or frozen) Mushrooms Onions Parsnips Peas Peppers (red, yellow, green) Spinach Squash Swiss chard Tomatoes Turnip Zucchini	80 mL (1/3 cup)	For the 1 st 3 months after surgery be sure to: -cook vegetables so that they are soft and easy to chew. -Avoid vegetables that are tough and stringy. -Remove any skin that is tough. *Note: Vegetables marked with a “*” may be difficult to tolerate, especially in the initial 3 to 6 months after surgery. Proceed with caution.
Lettuce (iceberg, romaine, Boston)	125 mL (1/2 cup)	Lettuce and all other raw vegetables are not recommended until 3 months after surgery. Starting 3 months after surgery, gradually introduce raw vegetables into your diet. Progress as tolerated and remember to chew well.

Phase 3: Soft/Regular Diet Sample Menus

Sample Menu #1:

- Breakfast: 125 mL (1/2 cup) of 1% milk
125 mL (1/2 cup) 1/2 cup of high fibre cereal (i.e. Fibre 1[®], Bran Flakes[®])
60 mL (1/4 cup) of strawberries (from fresh or frozen)
- A.M. Snack: 125 mL (1/2 cup) low-fat, no added sugar yogurt (i.e. plain)
1/4 cup of blueberries added to yogurt
- Lunch: 60 mL (1/4 cup) tuna from can, with 5 ml low fat mayonnaise
1/2 of a 6 inch diameter tortilla wrap (approx. 17g)
- P.M. Snack: 125 mL (1/2 cup) cottage cheese (0% or 1%)
60 mL (1/4 cup) crushed pineapple (from can, juice removed)
- Supper: 45 g (1.5 oz.) of baked chicken
80 mL (1/3 cup) of cooked carrots
125 mL (1/2 cup) mashed potato (prepared using 1% or skim milk)
- Evening Snack: 30 g (1 oz.) low-fat cheese (20% M.F. or less)

Sample Menu #2:

- Breakfast: 15 mL (1 Tbsp) peanut butter or nut butter
1/2 slice of whole wheat toast (approx. 17g)
1/4 of a small banana
- A.M. Snack: 125 mL (1/2 cup) of plain Greek-style yogurt mixed with
60 mL (1/4 cup) of unsweetened applesauce
- Lunch: 30 g (1 oz.) low-fat cheese
4 Melba toast or similar whole wheat type cracker (approx. 20g)
- P.M. Snack: 80 mL (1/3 cup) of hummus (homemade with lemon juice, 0% M.F. sour cream) with 2 mini pita rounds

Supper: 45 g (1.5 oz.) of fish baked from frozen
80 mL (1/3 cup) of cooked vegetables
60 mL (1/4 cup) of cooked brown rice

Evening Snack: 1 Mini Light Babybel[®] cheese
1 Ryvita[®] cracker (10g)

Sample Menu #3:

Breakfast: 1 poached or boiled egg
1/2 slice of whole wheat toast (approx. 17g)
60 mL (1/4 cup) of fruit

A.M. Snack: 60 mL (1/4 cup) of cottage cheese (1% or 0%)
60 mL (1/4 cup) mixed berries (from frozen)

Lunch: 45 g (1.5 oz.) lean chicken added to
80 mL (1/3 cup) soup with 3 soda crackers

P.M. Snack: 15 mL (1 Tbsp) peanut butter or nut butter
2-3 whole wheat crackers (approx. 15g)

Supper: 80 mL (1/3 cup) lentils
80 mL (1/3 cup) of stewed tomatoes
60 mL (1/4 cup) of cooked rice

Evening Snack: 125 mL (1/2 cup) of Greek-style yogurt, plain or artificially sweetened

Sample Menu #4:

Breakfast: 15 mL (1 Tbsp) peanut butter or nut butter
1/2 toasted English muffin (approx. 15g)
1/4 of small banana

A.M. Snack: 30 g (1 oz.) low-fat cheese (20% M.F. or less)

Lunch: 125 mL (1/2 cup) cottage cheese (1% or 0%)
125 mL (1/2 cup) salad (starting 3 months after surgery) with 5 mL (1 tsp)
low calorie salad dressing

P.M. Snack: 80 mL (1/3 cup) tuna (from can) with 1 tsp low fat mayonnaise
2 Melba toast crackers or other whole wheat crackers (approx. 10g)

Supper: 125 mL (1/2 cup) tofu
80 mL (1/3 cup) cooked mixed vegetables
60 mL (1/4 cup) cooked pasta or rice noodles

Evening Snack 80 mL (1/3 cup) of low-fat and no added sugar pudding (prepared using 1% or skim milk)

Sample Menu #5:

Breakfast: 1 scrambled egg (prepared using 1% or skim milk)
1/2 to 1 slice of toasted whole wheat bread
60 mL (1/4 cup) strawberries

AM Snack: 125 mL (1/2 cup) cottage cheese (0% or 1%)
60 mL (1/4 cup) fruit cocktail (in water)

Lunch: 80 mL (1/3 cup) tuna with chopped onion
1/2 of a 6 inch whole wheat wrap (approx. 17g)

PM Snack: 1/2 of a baked apple
125 mL (1/2 cup) Greek-style yogurt

Supper: 45 g (1.5 oz.) baked salmon
80 mL (1/3 cup) cooked broccoli
60 mL (1/4 cup) brown rice

Evening Snack: 30 g (1 oz.) low fat cheese (20% M.F. or less)
1/2 small pear

Sample Menu #6:

Breakfast: 1 Weetabix[®] biscuit (17g)
125 mL (1/2 cup) milk (1% or skim)
60 mL (1/4 cup) raspberries

AM Snack: 125 mL (1/2 cup) of plain Greek-style yogurt
1/4 small banana

- Lunch: 30 g (1 oz.) low-fat cheese
80 mL (1/3 cup) chicken-vegetable soup
3 whole grain crackers (approx. 15g)
- PM Snack: 125 mL (1/2 cup) cottage cheese (1% or 0%)
60 mL (1/4 cup) peaches from can (canned in water)
- Supper: 80 mL (1/3 cup) chick peas with 15 mL (1 tsp) low calorie dressing
80 mL (1/3 cup) cut up cucumber, red pepper and green onions
60 mL (1/4 cup) quinoa
- Evening Snack: 125 mL (1/2 cup) savoury yogurt (1% plain yogurt mixed with herbs and spices) used as a dip with 80 mL (1/3 cup) assorted raw vegetables
NOTE: Raw vegetables are not recommended until three months after surgery.

Sample Menu #7:

- Breakfast: 30 g (1 oz.) low-fat cheese
1/2 slice of whole wheat toast (approx. 17g)
1/4 small banana
- AM Snack: 125 mL (1/2 cup) cottage cheese
60 mL (1/4 cup) mixed berries from frozen
- Lunch: 45 g (1.5 oz.) of turkey slices (approx. 1 – 2 slices)
6 inch diameter tortilla wrap (approx. 35g)
80 mL (1/3 cup) of raw vegetables (after 3 months after surgery)
5 mL (1 tsp) low calorie mayonnaise or mustard
- PM Snack: 125 mL (1/2 cup) of yogurt (low-fat, no added sugar) or Greek-style yogurt mixed with 60 mL (1/4 cup) of unsweetened applesauce
- Supper: 30 g (1 oz.) low-fat cheese (20% M.F. or less)
80 mL (1/3 cup) chicken-vegetable soup
3 whole wheat soda crackers (approx. 10g)
- Evening Snack: 15 mL (1 Tbsp) peanut butter
2 Melba toast crackers (approx. 10g)

3. e) PHASE 4: MAINTENANCE DIET

The Maintenance Diet is designed to help you maintain your weight once your weight loss goal is achieved. It is based on the Phase 3: Soft/Regular Diet, however some of the recommended serving sizes are different and are closer to the serving sizes found in *Canada's Food Guide for Healthy Eating*.

Once your weight loss goal is achieved it is important to work with your Dietitian at the Bariatric Clinic. Individual recommendations about the foods and portions to include during the Maintenance Diet Phase may vary. Continue to focus on the Soft/Regular Diet guidelines as you begin to experiment with new and different foods. Your tolerance level of certain food items may change with time.

Goals:

- 1.5 to 2 L (6–8 cups) total fluid
- 3 small meals, 2-3 small snacks each day
- Approximately 60 to 80 grams of protein per day

Phase 4: Maintenance Diet – Outline

- Breakfast:** Choose one protein-rich food serving:
- 15 mL (1 Tbsp) peanut butter/ nut butter **or** 1 egg **or** 45 g (1.5 oz.) low-fat cheese **or** 125 mL (1/2 cup) of milk (1%) **AND**
- Choose one grain product serving:
- 125 mL (1/2 cup) of cereal (cooked oatmeal or cold cereal) **or** 1 slice of whole wheat toast **or** 1/2 English muffin **AND**
- Choose one fruit serving:
- 60 mL (1/4 cup) of fruit (fresh, frozen or canned) **or** 1/2 small fruit
- A.M. Snack:** 60 mL (1/4 cup) unsweetened canned fruit **or** 1/2 small fruit **AND**
125 mL (1/2 cup) low-fat, no added sugar yogurt
- Lunch:** Choose one of these protein-rich food choices:
- 60 grams (2 oz.) lean chicken/turkey/fish **or** 125 mL (1/2 cup) tuna/salmon/cottage cheese (1%) **or** 2 eggs **or** 45 g (1.5 oz.) low-fat cheese (< 20% milk fat or M.F.) **AND**
- Choose one grain OR vegetable serving:
- 1 slice whole wheat bread **or** 125 mL (1/2 cup) rice/pasta **or** 4 Melba toast **or** 125 mL (1/2 cup) soup with 3 crackers **or** 80 mL (1/3 cup) of vegetables
- P.M. Snack:** 45 g (1.5 oz.) low-fat cheese (e.g. string cheese) **AND**
1/2 soft fruit or 125 mL (1/2 cup) V-8/tomato juice
- Supper:** Choose one of these protein-rich food choices:
- 60 g (2 oz.) lean fish/chicken/turkey/tofu **or** 2 eggs **or** 125 mL (1/2 cup) beans/legumes/lentils **or** 125 mL (1/2 cup) cottage cheese (1%) **or** 125 mL (1/2 cup) tofu **AND**
- Choose one vegetable serving:
- 125 mL (1/2 cup) cooked vegetables **or** 250 mL (1 cup) salad plus 15 mL (1 Tbsp) low-calorie dressing **AND**
- Choose one grain food serving:
- 1/2 baked potato **or** 125 mL (1/2 cup) mashed potato, rice or pasta
- Evening Snack:** Choose one protein-rich food serving:
- 125 mL (1/2 cup) of low-fat, plain or no added sugar yogurt **or** 45 g (1.5 oz.) low-fat cheese **or** 125 mL (1/2 cup) of milk (1%)

4. WATER AND FLUIDS

Goal: 1 to 1.5 L (6-8 cups) of fluids per day.
(This amount includes water, milk and broth)

Why are fluids so important?

Drinking enough fluids throughout the day helps you stay well hydrated. Water plays an important role in many of our body's functions.

Water and fluids help to:

- move nutrients and waste through your body
- protect and cushion your joints and organs
- control your body temperature
- lower your risk of dehydration and heat stroke
- keep your bowels regular

Getting enough fluids is challenging after surgery and requires more planning than it did before surgery. In order to reach your fluid goals, remember to:

- Sip on fluids continuously in between meals and snacks
- Stop drinking your fluids for 30 minutes before AND after eating
- Drink even more fluids when you are active and during hot weather

Guidelines for water and fluids

1. Avoid all carbonated beverages (these include pop, sparkling water, sodas and beer). They will fill you up with gas and can cause you to feel bloated and even cause you to feel pain.
2. Avoid or limit caffeine to no more than 250 to 500 mL (1-2 cups) of caffeinated beverages per day. Caffeine can impair the body's ability to absorb iron and calcium. Caffeine can also irritate the lining of the stomach. Caffeine is a stimulant that can increase blood pressure, heart rate, and can lead to dizziness and trouble sleeping. Decaffeinated coffee and tea options are preferable.
3. Avoid using a straw. Drinking with a straw may overfill your pouch with fluid and air and can cause gas.
4. Avoid juice or any other sugar or calorie containing fluids. Low-fat milk is an exception to this as it is a good source of protein and nutrition.
5. Avoid or limit alcoholic beverages. It is generally recommended that alcohol be avoided for the first year after surgery. (See pg. 33 for more information)

Ideas for Flavouring Water

“Refreshing Water” Recipe:

2 litres of water

5 mL (1 tsp.) of freshly grated ginger

1 medium cucumber, peeled and thinly sliced

1 medium lemon thinly sliced

12 small spearmint leaves

Combine ingredients and let stand in fridge overnight. Add ice cubes and enjoy.

Artificial sweeteners and flavouring for water:

Water on its own is best, but adding zero calorie flavouring to your water can help to add some variety. Examples would be Crystal Light®, Mio® or other similar flavouring. With artificial flavouring and sweeteners, remember that a small amount goes a long way. (Example: Add 1/3 packet of Crystal Light® Singles to 2 cups of water)

Herbal Teas and decaffeinated tea and coffee:

There are many different types and flavours to choose from. You can enjoy these either hot or cold.

5. VITAMINS AND MINERALS

After surgery your pouch size doesn't allow you to eat enough to get all of the vitamins and minerals that you need through diet alone. In addition to this, the malabsorption effect of the surgery decreases the body's ability to process vitamins and minerals. This is why it is so important to take vitamin and mineral supplements every day for the rest of your life. You will need to have your blood work monitored regularly by your Family Physician. Remember that weight loss surgery is a tool. It is important to use this tool safely by following the diet guidelines closely and by taking your vitamins and mineral supplements regularly as recommended.

After surgery, you will need to take the following supplements daily:

- 1. Prenatal multi-vitamin and mineral supplement**
- 2. Vitamin B12 (in sublingual form – taken under the tongue)**

**recommended amounts can be found on the following page

When to start:

It is recommended to start taking these supplements once you are tolerating the Full Fluids diet (usually around 2-3 weeks after surgery). To start, you may prefer to cut the prenatal multi-vitamin in half or crush it; however this is not always necessary.

Other Vitamins and Minerals to Consider:

You may also need to take additional vitamin or mineral supplements after surgery. These will be discussed and reviewed with you at your follow-up appointments with your Bariatric Team and/or Family Physician.

The following vitamins and minerals are to be considered after surgery:

- Calcium Citrate
- Vitamin D₃
- Iron (only if lab work shows low levels)

Blood work Reminder:

- In order to avoid any serious nutritional deficiencies it is important to have your blood work monitored regularly. This means having your blood work done at 5 months and 11 months after surgery and then yearly for the rest of your life.
- Please remember to have your blood work done at least 4 weeks before your 6-month post- surgery appointment and yearly appointments so that there is enough time for the results to be sent to the Bariatric Clinic. This way your results can be reviewed with you during your appointment at the clinic.

Vitamin and Mineral Recommendations after Bariatric Surgery

*Any specific questions about vitamin and mineral supplementation should be discussed with your Bariatric Team and/or Family Physician.

Vitamin/Mineral	Recommended Amount
<p>Prenatal multi-vitamin and mineral supplement Form: Pill Form</p>	<ul style="list-style-type: none"> • 1 capsule per day for the rest of your life
<p>Vitamin B12 Form: Sublingual (under the tongue)</p>	<ul style="list-style-type: none"> • 500 mcg every day <u>or</u> 1,000 mcg every other day
<p>**Supplementation with the vitamins and minerals that are listed below are to be <u>considered</u> after surgery. These will be reviewed in further detail at your post-surgery follow up appointments. Always discuss vitamin and mineral supplementation with your Bariatric Team and/or Family Physician.</p>	
<p>Vitamin D₃</p>	<p>Generally Recommended Amount:</p> <ul style="list-style-type: none"> • 1,000 IU/d <p><u>Food Sources of vitamin D include:</u> Fortified low fat milk products, eggs, liver and fish liver oils.</p>
<p>Calcium Form: Calcium Citrate</p>	<p>Generally Recommend Amount:</p> <ul style="list-style-type: none"> • 500 mg capsule taken 2-3 times per day <p><u>Food Sources of calcium include:</u> All milk and dairy products, oysters, scallops, salmon and sardines with bones, tofu, green leafy vegetables and broccoli.</p>
<p>Iron</p>	<p>The Prenatal multi-vitamin contains a considerable amount of iron, approximately 27 mg per capsule. If it is determined that your blood levels of iron are low, an additional iron supplement may be recommended by your Family Physician and/or Bariatric team.</p> <p>Food Sources include: Meat, liver, eggs, shellfish, nuts, sardines, legumes, broccoli, peas, spinach, prunes, raisins, bran and iron enriched cereals.</p>

6. WHY IS PROTEIN IMPORTANT?

Goal: Approximately 60 to 80* grams of protein per day

**Note: Individual protein needs may vary. Your Dietitian will help you determine how much protein you may need if it is different than this amount.*

As you lose weight, protein will help you to preserve your lean muscle mass and this will help you to continue to lose weight. You also need to consume enough protein so that your body will heal properly. Once you start the Full Fluids Diet phase, your protein intake will gradually increase. At a month after surgery you will start the Soft/Regular Diet phase, which is designed to provide you with 60 to 80 grams of protein each day from food sources.

Eat protein-rich foods at the **beginning of each meal and snack** to ensure that you meet your protein goal for the day. If the focus of each meal is protein-rich foods, deficiency is very less likely to occur. However, if you are having trouble tolerating food sources of protein you may need to speak with the Dietitian about a protein supplement.

The Protein Content of Foods and Fluids table on the following page lists protein-rich foods and fluids and how many grams of protein are found in each. Although the majority of protein in our diet comes from the protein-rich foods listed in the table below, protein is also found in grain products and some vegetables. Protein from all of these sources counts towards your daily goal.

Tips for adding more protein into your diet:

- Add 1 to 2 Tbsp of Skim Milk Powder to your milk, to your yogurt or other foods.
- Instead of regular yogurt, try Greek-style yogurt. It has more than twice as many grams of protein per serving. Cottage cheese is also high in protein.
- Look through the protein list, and try something new! Tofu is a great source of protein.
- Always remember to include a protein-rich food with each meal and snack.

Protein Content of Foods and Fluids

Food Items	Recommended Portion Size	Grams of Protein	Calories
Milk and Alternatives			
Cheese (low-fat, less than 20% M.F.)	30 g (1 oz.)	8	85
Cottage Cheese (0% or 1% M.F.)	125 mL (1/2 cup)	14	80
Fortified Soy Beverage (unsweetened)	125 mL (1/2 cup)	3	35
Greek-style yogurt (fat-free, plain flavour)	125 mL (1/2 cup)	15	80
Kefir Yogurt (low-fat)	125 mL (1/2 cup)	7-8	90
Milk (1% or skim), includes buttermilk	125 mL (1/2 cup)	4	50
Ricotta cheese (part-skim)	60 mL (1/4 cup)	7	85
Yogurt (1% or less, plain or no added sugar)	125 mL (1/2 cup)	6-7	75
Meat and Alternatives			
Canned fish (tuna, salmon etc.) in water	80 mL (1/3 Cup)	13	60
Chicken or turkey (cooked, without skin, includes ground)	45 g (1.5 oz.) or 80 mL (1/3 cup)	13-14	70
Edamame (soybeans) without pod	80 mL (1/3 cup)	6	65
Egg (boiled/poached/scrambled)	1 egg (large)	6	70
Legumes (chickpeas, kidney beans, lentils etc.)	80 mL (1/3 Cup)	6	65
Peanut Butter	15 mL (1 Tbsp)	4	90
Peanuts or almonds (after 3 months)	30 mL (2 Tbsp)	4-5	100
Salmon (cooked)	45g (1.5 oz.)	9	90
Tofu (firm or soft)	125 mL (1/2 cup)	10	50
White Fish (includes haddock, perch, sole etc.)	45 g (1.5 oz.) or 80 mL (1/3 cup)	10	45
Grain Products			
All bran® cereal	125 mL (1/2 cup)	5	90
Bread (whole wheat)	1 slice (35 g)	4	95
Hot Oatmeal plain (cooked with milk)	125 mL (1/2 cup)	4-5	100

****Note:** These are just a few examples of the approximate protein content of foods. To find out the protein content of the foods you are consuming, check the Nutrition Facts table. You can also find out the protein content of foods by doing a food search on eatracker.ca or using other online food journals (See pg. 38).

7. REVIEW OF KEY DIET GUIDELINES – STEPS FOR SUCCESS!

We wanted to give you a brief overview of the information covered up until this point. We like to think of this list as our steps to success!

1. Eat small amounts of food often with 3 small meals and 3 small snacks each day. As needed, weigh and measure your portions to make sure that they are appropriate and based on the diet guidelines.
2. Drink enough fluids. Plain water is always best. A minimum of 1.5 – 2 L (6–8 cups) of fluids each day is recommended. Sip on fluids throughout the day, and keep your water with you at all times. Avoid drinking and eating at the same time. On very hot days, or when exercising and sweating, you will need to drink more water to prevent dehydration.
3. Focus on protein. Include at least one protein-rich food choice at each meal and snack. Always eat your protein first, followed by the fruit or vegetable and then the grain product. If you are worried about your protein intake, keep a food journal and review it with your Dietitian at the Bariatric Clinic.
4. Avoid foods and fluids that are high in sugar or fat. These items can slow down your weight loss, but they can also cause you to feel very unwell due to the dumping syndrome.
5. Listen to your body's signals. Stop eating and/or drinking when you begin to feel full. Overfilling your pouch can cause your pouch to stretch and may prevent you from achieving your weight loss goals. Overfilling can also lead to complications.
6. A daily form of exercise is essential in order for you to achieve and maintain your goal weight. Find something that you enjoy! Every little bit counts.

8. APPENDICES

8.1 Using the Nutrition Facts Table

The Nutrition Facts table is found on most packaged foods in Canada. It is a tool that can help you to make healthier food choices.

The Nutrition Facts table can be used to:

- Compare two products to make the healthier choice
- Learn about the nutrition information of the foods you eat
- Choose foods that are lower in fat, sugar and sodium
- Choose foods that are higher in fibre, protein, vitamins and minerals

Using the Nutrition Facts Table – Step by Step

1. Look at the amount of food (serving size):

Nutrition Facts are based on a specific amount of food. Compare this to the amount you actually eat. In the example on the following page, the Nutrition Facts are based on a serving size of 125 mL (87g).

2. Read the % Daily Value (DV): The %DV tells you if a specific serving of food has a little or a lot of a nutrient.

5% DV or less is considered “A Little”

15% DV or more is considered “A Lot”

3. Choose:

Nutrients that you may want less of: Fat, Sugars, Sodium

Nutrients that you may want more of: Protein, Fibre, Calcium, Iron

Choosing products that are lower in sugar and fat:

A general guideline that can be helpful is to look for products that have:

- 5% Daily Value (DV) or less of Fat per serving
- 8 to 10 g or less of Sugars per serving

***See the example on the following page*

Example: Nutrition Facts Table

Based on the Nutrition Facts table below, the following information can be found.

Category	What does it mean?
Serving Size	The serving size that the nutrition information is based on is 125 mL (87g)
Fat	This product is considered low fat because the %DV for Fat is 1% <ul style="list-style-type: none"> Remember that 5% DV of Fat or less per serving is considered low fat
Sugars	This product is considered low in sugars, because there are 2g of Sugars per serving <ul style="list-style-type: none"> Remember that 8 to 10g of Sugars or less per serving is considered low in sugars
Sodium	This product is low in sodium <ul style="list-style-type: none"> Remember that 5% DV or less per serving is considered “a little”
Protein	This product has 3g of protein per serving. This amount contributes to your overall daily protein intake.
Fibre	This product contains 2g of fibre per serving. Including fibre foods is always recommended.

Nutrition Facts	
Per 125 mL (87 g)*	
Amount	% Daily Value**
Calories 80	
Fat 0.5 g	1 %
Saturated 0 g + Trans 0 g	0 %
Cholesterol 0 mg	
Sodium 0 mg	0 %
Carbohydrate 18 g	6 %
Fibre 2 g	8 %
Sugars 2 g	
Protein 3 g	
Vitamin A 2 %	Vitamin C 10 %
Calcium 0 %	Iron 2 %

8.2 Ideas for Cooking and Flavouring Foods after Surgery

The following cooking methods can to help make foods moist and easy to chew.

- Cook foods in the slow cooker or crock pot
- Boil, steam, poach or simmer your food
- Moisten your foods while cooking by adding sodium reduced tomato juice, broth or stock
- Avoid grilling or barbequing your food
- Use sauces such as mild salsa or low fat gravy to moisten foods

Ideas for Enhancing Flavour:

- Basil, dried
- Broth/consommé
- Cocoa
- Cinnamon, ground
- Cumin, ground
- Garlic, powder or pressed
- Ginger, ground or finely grated
- Herbs, fresh or dried
- Hot pepper sauce
- Italian herb seasoning
- Lemon/lime juice
- Mustard
- Nutmeg
- Parsley, dried
- Pepper
- Rosemary, dried
- Soy sauce, sodium reduced
- Tomato juice, sodium reduced
- Vanilla extract
- Vinegar (balsamic, rice, etc.)
- Artificial sweeteners (use sparingly)

Other Condiments and Flavouring to Use Sparingly:

The following items are higher in simple sugars and/or higher in fats. When using these products it is recommended to use only a small amount to add flavour.

Limit to 5 mL (1 tsp.) or less of:

- BBQ sauce
- Ketchup
- Margarine or butter
- Mayonnaise, low-fat
- No added sugar jam
- Olive oil or other vegetables oils
- Relish

For salad dressing (calorie reduced), limit to 15 mL (1 Tbsp.) or less.

8.3 Foods and Fluids to Avoid after Surgery

Below is a list of foods and fluids that tend to contain large amounts of sugar and/or fat. Filling up on items that are high in sugar and fat can prevent weight loss and good nutrition, and can also cause dumping syndrome. Remember to read the Nutrition Facts table on packaged foods to identify the sugar and fat content of foods and fluids. If in doubt, then avoid.

- Alcohol (see below)
- All desserts (cake, Danish, donut, pie)
- All fried foods (battered mushrooms, deep fried chicken, deep fried fish, French fries, mozzarella sticks)
- Candy
- Carbonated beverages (diet pop, regular pop, beer, club soda, Perrier, sparkling water, tonic water)
- Chocolate
- Cookies
- Croissants
- Fruit canned in heavy or light syrup
- Fruit juice (unless diluted with water)
- Full-fat condiments (regular salad dressing, regular mayonnaise, regular sour cream)
- Granola bars
- Gum (can also cause you to swallow air)
- High-fat milk (2%, whole, coffee cream)
- High-fat processed meats (bacon, bologna, hot dogs, kielbasa)
- Honey, Maple syrup
- Ice cream and frozen yogurt
- Regular Jam
- Juices with added sugar (fruit beverage, fruit drink, fruit cocktail, fruit punch)
- Milkshakes and chocolate milk
- Commercially prepared muffins
- Ribs and other fatty meats
- Skin and fat on chicken or turkey or red meat
- Snack foods (chips, cheesies, corn chips, tortilla chips)
- Sugar, brown, white
- Tuna canned in oil

A note about alcohol

It is generally recommended that alcohol be avoided for the first year after surgery. If you do decide to have an alcoholic beverage, try to choose a lower-calorie and non-carbonated option such as white wine or dry red wine. Have a small amount and sip slowly. Add ice cubes to help dilute the drink. After bariatric surgery, alcohol is absorbed quickly into the bloodstream, and you may find that you feel intoxicated after just a few sips. Be sure to know your limits and always have a designated driver available if you plan to consume any amount of alcohol.

8.4 Tips for Preventing and Managing Common Problems after Surgery

Constipation:

It is common to experience constipation after surgery.

Constipation can become worse if you:

- Do not consume enough fluid
- Do not consume enough fibre
- Are not physically active on a regular basis
- Take medications for pain
- Take iron supplements

To improve your bowel regularity, you can:

- *Increase your water intake
- Include fibre rich foods in your diet (example: Bran Buds®, Fibre 1® cereal)
- Increase your level of physical activity
- Discuss with your Family Physician, Pharmacist or Bariatric Team. A laxative (e.g. Restorolax® or Senekot®) or stool softener (e.g. Colace®) may be recommended

Gas and Bloating:

Gas and bloating are common after surgery, especially during the first few weeks after surgery. Gas and bloating can also be a sign of lactose intolerance (see below).

To prevent gas and bloating, you can:

- Limit liquids to no more than 60 mL (1/4 cup) at one time
- Sip slowly
- Avoid using a straw
- Avoid chewing gum
- Avoid sweeteners made from sugar alcohols such as sorbitol, mannitol and xylitol
- Avoid carbonated beverages

No Appetite:

Even though you may not have an appetite, it is important to continue to have nutritious foods at each meal and snack.

Set a clock or timer to remind you to eat every 2 to 3 hours (during waking hours)

Lactose Intolerance:

After surgery, you may find that milk or dairy products cause you bloating, gas, cramping or diarrhea.

To improve lactose intolerance you can:

- Limit lactose-containing foods or drinks – choose substitutes instead
- Try lactose reduced milk or natural unsweetened soymilk
- Heat milk to reduce the lactose content
- Take Lactaid pills or drops before having milk and dairy products
- Yogurt and low-fat cheese are relatively low in lactose. You may find that you can eat these foods in small amounts without any problems

Dumping Syndrome:

You may experience dumping syndrome after consuming foods or drinks that are high in fat or sugar. Symptoms of dumping syndrome can include:

- Sweating -Dizziness -Weakness -Nausea -Cramping
- Vomiting -Diarrhea -Loose stools -Heart palpitations

To prevent dumping syndrome you can:

- Avoid consuming anything that is high in fat and/or sugar
 - Read the Nutrition Facts table and look for the sugar and fat content. Aim for 8 grams of sugar or less per serving. Aim for less than 5% Daily Value of fat or less than 2-3 grams of fat per serving. (See pg. 30 for more information about reading Nutrition Facts tables)
 - Read the ingredients list on food and drink labels. If sugar (in the form of glucose, fructose, sucrose, cane sugar and syrups) is in the first three ingredients, then avoid this product.
 - Refer to list of Foods and Fluids to Avoid after Surgery on pg.33.
- Avoid drinking fluids while eating, and for 30 minutes before or after eating
- Eat slowly and chew thoroughly

Hair Loss:

Hair loss is common after gastric bypass surgery and is caused by many factors including diet and stress. The rapid weight loss after surgery is why patients experience hair loss. Hair loss can occur between 3 – 8 months. Hair may not start to regrow until about 8 months after surgery. If your rate of hair loss is concerning you and/or continues for more than one year after surgery be sure to speak with your Bariatric Team and/or Family Physician to make sure that your nutritional intake is adequate.

To promote hair regrowth, you can:

- Eat nutritious meals and snacks
- Be sure that your diet includes enough protein (goal 60 – 80 grams/day)
- Take the recommended vitamin/mineral supplements, including a prenatal multi-vitamin supplement that contains iron

Hypoglycemia (Low Blood Sugar) or Late Onset Dumping:

Hypoglycemia is a serious condition that can occur after gastric bypass surgery.

Hypoglycemia is defined as a blood sugar level below 4 mmol/L. It can happen quickly and if not treated right away, can lead to a medical emergency. Symptoms of low blood sugar include:

- Shaky or dizzy feelings
- Sweating
- Weakness or tiredness
- Hunger
- Headache
- Feeling anxious, upset or nervous

If you have symptoms of low blood sugar, you should:

1. Check your blood sugar right away. If it is below 4 mmol/L, treat for low blood sugar. If you cannot check, treat anyway to be safe.
2. To treat low blood sugar, eat or drink a fast-acting, high-sugar food with 15 grams of carbohydrate such as:
 - a. 15 grams of glucose in the form of glucose tablets
 - b. 3 packets or 1 Tbsp. of table sugar dissolved in water
 - c. ¾ cup of orange juice
3. Wait for 15 minutes, and then check your blood sugar again. If it is still low, treat again. If your next meal is more than one hour away, or you are going to be active, eat a balanced snack such as cheese and crackers.
4. Contact your Family Doctor or Endocrinologist if you continue to have blood sugars less than 4 mmol/L.

****Note:** It is also recommended that you contact the Bariatric Clinic to set up an appointment with the **Dietitian** for additional information about hypoglycemia and to review your dietary intake.

To prevent hypoglycemia:

- Eat 3 small meals and 3 small snacks each day. Make sure that each contains protein- rich food.
- Eat the protein-rich food first, then the complex carbohydrates (e.g. whole grains etc.)
- Avoid foods or fluids that are high in added sugars and avoid 'sweets'.
- Avoid alcohol

Strictures:

A stricture occurs when the small opening between your pouch and small intestine is too tight. If you are following the proper eating techniques, but continue to vomit, you may have a stricture.

Contact your Surgeon or Bariatric Team if you think you may have a stricture. Your saliva may be white, sticky and foam-like. You may need to go to the hospital emergency department.

Dehydration:

Dehydration can happen when you do not drink enough fluids. It can also occur if you are losing excess fluids through vomiting or diarrhea.

To prevent dehydration you can:

- Limit or avoid caffeinated beverages such as coffee or tea
- Sip on fluids regularly, 2 Tbsp (30 mL) every 15 minutes in between meals and snacks
- Aim to drink at least 6 – 8 cups (1.5 – 2 L) of fluid per day
- Drink more fluid if you are active, sweat excessively or are experiencing vomiting or diarrhea

Speak to a health care professional such as your Family Doctor, Pharmacist, Dietitian or other health care professional at the Bariatric Clinic if you need more help with any of these problems after surgery.

*****PLEASE NOTE: THE ABOVE SYMPTOMS AND THEIR MANAGEMENT ARE ONLY A GUIDE TO HELP YOU BECOME MORE INFORMATED ABOUT THE POSSIBLE COMPLICATIONS AND COMMON MANAGEMENT. PLEASE CONSULT YOUR BARIATRIC TEAM AND/OR FAMILY PHYSICAN IF YOU DEVELOP ANY OF THESE SYMPTOMS AND REQUIRE SPECIFIC RECOMMENDATIONS OR INFORMATION. *****

8.5 Food and Fluid Records/Journals

Using a food record or journal to track your food and fluid/water intake can be a helpful tool to make sure that you are consuming the fluids and foods that your body needs. It can also help you to stay on track with your food choices, water intake and exercise. It can be a good idea to bring a couple of food records with you to your follow-up appointments so that you and the Dietitian can review these together. On the following pages you will find examples of a food record that can be used during the post-op stage. Additional copies can be made as needed.

Steps to Follow for Keeping a Food Record:

1. Write down everything that you eat or drink right after consuming it otherwise it is easy to forget.
2. Use a measuring cup, tablespoon, teaspoon or a scale to measure the quantity of food taken.
3. Include as much detail as possible (i.e. 125 mL of yogurt, 1% M.F., Astro, plain)
4. Write down the fat percentage of all milk products (i.e. 250 mL of 1 % milk, 125 mL of 1% Astro peach yogurt, artificially sweetened).
5. Describe the cooking process used (baked, steamed, grilled, frying pan, bbq, etc.)
6. When eating out, write the name of the restaurant or place where you purchased your food.
7. Don't forget to write down the ingredients that you add to your food or drinks (i.e. ketchup, jam, salad dressing, sauces, milk etc.).
8. Include quantity and type of fat or oil used for cooking (i.e. 15 mL of canola oil).
9. Food records can be kept on scrap paper, in a journal or any of the sample food records provided. Do what works best for you.

Online Food Journals:

For some people keeping an online food journal is a helpful way to track their intake as they progress through the post-surgery diet phases. There are several online food journal tools that are available, below are just a few examples.

Eatracker (www.eatracker.ca) - from Dietitians of Canada:

-This site allows you to track food and activity, and also allows you to analyze recipes and plan meals. It is a free tool that is Canadian based.

Other free online tracking tools include:

My Fitness Pal® (Link: www.myfitnesspal.com), Spark People® (Link: www.sparkpeople.com), Lose It® (Link: www.loseit.com)

Food Record _____

Date: _____

BREAKFAST	Time: _____

LUNCH	Time: _____

DINNER	Time: _____

SNACK	Time: _____

SNACK	Time: _____

SNACK	Time: _____

Track your water intake:

Exercise:

							
250mL							
<input type="checkbox"/>							

Type of Activity	Minutes

Instructions:

1. Record everything that you eat and drink.
2. Record the portion you have consumed. You may **measure** amounts or do your best to **estimate** amounts consumed.