# **Medical Advice Following Obesity Surgery**

#### **Nutrition**

Immediately after your operation, you will be on a liquid diet, and over the subsequent weeks will reintroduce solid foods slowly.

The normal dietary progression is to have a liquid diet for the first week after surgery. In the second week, a pureed diet (baby food consistency) can be introduced. Mashed foods can be taken in the 3<sup>rd</sup> week. In the 4<sup>th</sup> week after surgery solid food should be eaten. Foods should be chewed well and you should eat slowly.

Week 1: Liquids

Week 2: Puree consistency food

Week 3: Mashed foods

Week 4: Solid food

Bread, rice and dry meat such as chicken breast or steak should be avoided for a 2 months after surgery as these foods are the most likely to cause discomfort.

Following surgery you will be unable to drink a large volume of water rapidly and it is therefore advisable to carry a bottle of mineral water with you throughout the day and sip on this regularly. At least 1.5L of fluid in the form of water, juice and tea should be consumed every day.

It is important to develop a regular eating pattern to maintain weight loss in the long term following surgery. It is very important to have a regular breakfast, lunch and evening meal every day. Skipping meals will lead to cravings for unhealthy foods.

Between meals small healthy snacks such as fruit or nuts can be eaten. Food consumed should be fresh. Processed foods that contain too much sugar, fat and artificial additives should be avoided.

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## Golden rules of eating following surgery:

In order to learn how to enjoy food following surgery, the following rules should be followed:

- 1. A small side plate should be used for all meals.
- 2. All meals should be eaten whilst sitting at a table. It is important not to be distracted during a meal such as by reading or watching TV. In this way, you can concentrate and enjoy the food you eat and will not be tempted to eat too fast. If food is consumed on the run, such as whilst walking around or whilst driving, it is more likely that it will be unhealthy food and that you will eat the food too fast and experience discomfort.
- 3. Each mouthful of food should be chewed very well before swallowing and you should take your time between swallows to make sure that the food has time to go through your smaller stomach.
- 4. You should refrain from drinking for 20 minutes before a meal and 20 minutes after a meal in order to ensure adequate space for the food.
- 5. Fizzy drinks such as Cola and lemonade should be avoided. No more than one glass [200 ml] of fruit juice should be drunk a day. It is important to realise that natural fruit juices contain large amounts of sugar, therefore drinking too much will mean that you will not lose as much weight as expected.

# **Vitamin supplementation following surgery:**

# **Sleeve Gastrectomy**

It is recommended that you take the following for at least 2 years postoperatively to provide extra nutritional support whilst you are losing weight:

Multivitamin and mineral supplement (two a day)

• Adcal D3 (2 chewable tablets daily)

• Desunin (Vitamin D) (2 tablets daily)

#### **Gastric Bypass**

The following supplements should be taken every single day to prevent you becoming weak from a vitamin deficiency:

Multivitamin and mineral supplement (two a day)

• Adcal D3 (2 chewable tablets daily)

• Desunin (Vitamin D) (2 tablets daily)

• Ferrous sulphate (1 x 200mg tablet

daily)

• Vitamin B12 (1mg injection every 3

months)

## Postoperative follow up:

It is essential that you are seen by Mr Jenkinson or, if this is not possible, another doctor who understands the surgery you have had, regularly after surgery. It is recommended that you liaise with Mr Jenkinson within the first 3 months of surgery to confirm that you are making good progress following the operation.

You should see Mr Jenkinson within 6 months of surgery, and then thereafter on a yearly basis. At the 6 month appointment you will require a blood test to make sure that you have not developed any vitamin deficiencies. This blood test should include:

- Urea and Electrolytes
- Liver Function Tests
- Full Blood Count
- Vitamin B12
- Folate
- Iron
- Ferritin
- Parathyroid Hormone
- Vitamin D

These blood tests should then be performed every year. It is recommended you see Mr Jenkinson for the first 5 years after surgery and then thereafter see a doctor who understands this surgery. In addition to this you should see any doctors treating other conditions such as diabetes or blood pressure regularly after surgery. These conditions will improve substantially after surgery and your doctor may want to change the treatment that you receive for these conditions.

If you or your local doctor have any concerns or questions following surgery, please contact my office on:

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