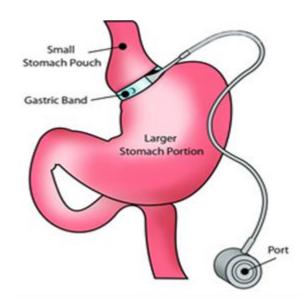




Specialist Weight Management Service

Dietary advice for patients having an adjustable laparoscopic gastric banding

This information is for patients who have had an adjustable laparoscopic gastric banding. It should only be followed with supervision and support from a bariatric dietitian.



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What a gastric band is and how it works

The gastric band can be a useful tool to help reduce the amount of food you eat. It acts like an adjustable belt on your stomach to reduce the speed food travels into your stomach. Slowing down eating may help you feel satisfied after eating a small amount.



The band can be adjusted by adding or removing fluid through a port under your skin.

How the band will help you to lose weight

You are advised to eat very slowly to let each small mouthful of food pass through the band. We advise that you eat a balance of food at each meal, and start with a few mouthfuls of meat or other proteins such as beans, lentils, fish or tofu. This will help you feel more satisfied.

As you begin to lose weight, you may need your band to be inflated slightly. This will help you feel satisfied eating a smaller meal.

The band will **not** stop you from eating high-fat or sugary foods and drinks such as chocolate, crisps, cheese and sugary drinks. These foods will easily pass through the band into the larger stomach. When they pass through the band, they won't stimulate the nerves that tell your brain to switch off feelings of hunger.

You will still have to monitor what you eat carefully. It's important to stop eating once you feel you've had enough.

It's easy to override the faint satisfied signals and overfill the area above your band. This will cause you great discomfort. Discomfort or pain can also happen if you eat too quickly.

The band is a tool designed to help you lose and maintain weight loss. Your ability to work with the band will help you to lose weight while enjoying healthy eating and regular physical activity.

For more details of the surgery, please see: 'Laparoscopic adjustable gastric banding: The surgical procedure'. This leaflet describes the surgery in more detail. Please ask for a copy.

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Post-operative diet

Immediately after surgery, you must follow a modified diet for your body to heal. You must only follow this diet for a short time, and work towards eating "normal" texture foods again.

Weeks 1, 2 and 3: Liquid diet

It's important to avoid any solid foods in the first 3 weeks, even if they melt in your mouth. Solid foods will upset the healing process in the early stages.

At the start of the liquid stage,

- sip slowly but frequently throughout the day
- allow a few minutes between sips.

Progress to cupsful of drinks taken over 15-to-20 minutes as the days go by.

In the first two weeks after surgery, you can build up to taking around 200mls at a time. If you experience pain, discomfort, or you regurgitate (your drink rises back up), take smaller sips and leave more time between sips.

Some people find warm drinks go down more easily to start with. Others find that sucking ice cubes can help if you struggle to get fluids down.

Aim to drink about 1.5 litres each day. Drinking plenty of fluid will help to prevent constipation.

During the first few days after your operation, you may not manage 1.5 litres of fluid in one day. Do not worry, but make sure you progress towards 1.5 litres of fluid a day as the first week goes by. If not, you may become dehydrated, suffer from headaches, get a urine infection, or get constipation.

Here are some examples of suitable nutritious liquids:

- Skimmed/semi-skimmed milk
- Soup with no lumps (make condensed soup up with milk)
- Build-up soups and drinks such as Complan or Meritene
- Meal replacement drinks such as Slimfast, Exante or supermarket own brands
- Protein Shakes
- Ovaltine / Horlicks
- Smooth drinking diet yoghurts, low-fat custards, low-fat fromage frais (add milk to make it a pouring consistency)
- Sugar-free/no added sugar squash
- Smoothies (blended fruit or vegetables with skimmed milk or yoghurts). You will need to dilute with water and sieve out any bits.

Weeks 4 and 5: Blended/puree textured diet

Once your stomach has had 3 weeks to heal, you can progress to foods with a texture.

At this stage, we would like you to aim for a pureed or blended texture, such as the consistency of custard. You may need a food blender, liquidiser, or food processor to achieve this. You can use a sieve and spoon to remove lumps, pips, and skins from certain foods.

For example:

- Plain or diet/light yoghurt (avoid the larger Muller light pots) or protein yoghurts
- Mashed Weetabix with skimmed milk
- Fruit smoothie (blended fruit and skimmed milk or diet yoghurt)
- Chicken, turkey, lamb, or beef liquidised with gravy granules or a stock cube
- Lean minced meat liquidised with a tomato-based sauce.
- Smooth soup containing meat, fish, and vegetables. You can liquidise chunky tinned or homemade soups.
- Liquidised cauliflower cheese/macaroni cheese.

The aim is for:

- Three small meals a day, with drinks in between.
- Build up to 2 to 3 tablespoons of protein at each meal, with 1 to 2 tablespoons of pureed vegetables as a side.
- Keep your portions small. Remember, your stomach is still trying to heal along the staple line, so overfilling may cause problems.
- Continue to have 2 litres of fluid a day. Sip your drinks between meals. Always eat and drink separately so that you eat enough to meet your nutritional needs.

It may be helpful at this stage to cook and freeze foods, as portions will be very small.

Weeks 6 and 7: Fork-mashable diet

Start to slowly introduce soft textured foods (foods that can be mashed easily with a fork). Start to experiment with some of the soft foods listed below.

- Soft, lightly cooked omelettes or scrambled/poached egg
- Tinned oily fish
- Very soft scrambled egg blended with milk and a little cheese
- Cauliflower cheese/macaroni cheese
- White fish in parsley or white sauce
- Tinned vegetables or fruits in natural juice
- Use lean minced meat, chicken, turkey, or casserole meat cooked slowly. Blend with a sauce or gravy
- Mash potatoes with a little water or with skimmed milk and blend to a smooth paste
- Mash, boiled or steamed vegetables
- Baked beans
- Mash tinned, fresh or stewed fruit. Add fruit juice if needed. Be careful not to increase your portion size too much.

Be mindful of signs that you are full. Do not overfill. Chew foods well and eat slowly.

Week 8 onwards: Normal textured diet

From week 8, we want you to be eating "normal" textures foods. To do this, we recommend you use specific eating techniques. These include:

- Small bites of food
- Chew well
- Put your knife and fork down in between each bite
- Savor the food
- Wait at least 60 seconds between each mouthful
- Stop as soon as you feel satisfied, not overfull
- Stop eating after 20 minutes
- Separate drinks from your meals and sip fluids throughout the day

The aim is to have 3 small meals per day and include a portion of protein in at least 2 of your meals.

Sample meal plan from 8 weeks onwards:

Before breakfast	Drink at 8am
Breakfast	1 shredded wheat with a little skimmed or semi- skimmed milk or ½ slice toast with a scraping of low-fat margarine
10am (2 hours later)	Drink
1pm Midday	½ tin tuna in brine or spring water and mixed salad with lemon and herbs and 1-2 crispbreads or crackers or ½ slice toast
3pm (2 hours later)	Drink
6pm Evening meal	2 fish fingers or small portion of chicken and cooked vegetables or a mixed salad and 2 small new potatoes in skins
8pm (2 hours later)	Drink

General rules for eating after having a gastric band

It's important that you:

- Eat slowly and chew your food well until it's a 'pureed' consistency
- Eat slowly. Take at least 20 minutes to eat a meal.
- Chew 20-30 times for soft foods and 50-100 times for tough foods.
- Aim to eat protein first at each meal, then followed by vegetables
- Stop as soon as you feel satisfied. Do not eat until full
- Sit down for each meal. Remove distractions at the table, such as the television being on
- Do not drink with your meal. Wait for at least 30 minutes after a meal until you drink again.

Some foods need to be chewed more than others or may get stuck. Caution foods include:

- Soft or white bread, non-toasted
- Roasted, barbequed meats these tend to dry out a little and make chewing difficult
- Fibrous vegetables, green beans, celery, cabbage
- Skin-on fruit
- Overcooked rice and pasta
- Nuts and dried fruits
- Egg white

Remember, sometimes food is not tolerated just because you haven't chewed well.

Frequently asked questions

Do I need to take vitamins?

After your band is placed, your ability to eat larger portions of food will decrease. So you may be at risk of developing nutritional deficiencies.

We recommend you take daily supplements for life. Examples include:

- Sanatogen A-Z complete
- Lloyds Pharmacy A-Z
- Tesco's, Morrisons, Sainsbury, Asda, Super drug, Wilko A-Z
- Aldi Activ Max Everyday Health A -Z
- Holland and Barrett ABC+

Should I expect to be sick or vomit?

No. If you are vomiting, ask yourself:

- Did I eat too quickly?
- Did I chew enough?
- Was the food the correct consistency?
- Did I fill up with a drink before or with my meal?
- Did I overeat?

What can I do if I get constipated?

To prevent constipation, make sure you drink plenty of fluids. Water is best. Use the drink chart as a reminder.

Ensure you eat plenty of vegetables at mealtimes and occasionally have fruit.

You can also take a non-bulking laxative agent such as Benifibre, Lactulose or Senna for a short time. Taking laxatives for too long can make constipation worse. Seek medical help if it becomes a problem.

Do I need to exercise?

It's important to do as much exercise as you feel able to. You must move around/walk regularly to reduce the chance of any post-operative complications, such as deep vein thrombosis (DVT).

It's important to stay mobile when you first get home. Gentle exercise is encouraged. After 2 weeks, start to build up a habit of regular exercise such as brisk walking or swimming (make sure your wounds are fully healed).

To maintain your hearts' health, aim to be moderately active (heart rate is raised but you can still talk) for 30 minutes, five times a week. To lose and maintain weight loss, you need to increase this to 1 to 1½ hours every day.

This means where possible:

- taking the stairs
- walking instead of driving
- doing more household chores

Most importantly, reduce the amount of time you spend sitting. You could make a conscious decision to reduce television or computer games by 1 hour per day and do an activity which requires you to move instead.

For more information, visit:

British Dietetic Association - www.bda.uk.com

BOSPA (British Obesity Society Patient Association) https://www.careplace.org.uk/Services/14206/BOSPA-UK-British-Ob

Weight loss surgery information - http://www.wlsinfo.org.uk/

This is a free members' site where you can get support and information about surgery.

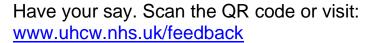
UHCW Specialist Dietitians' contact number: 024 7696 6161

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