Your Guide to Eating after Bariatric Surgery

Arkansas Bariatric Surgery
Because you can have a better life.
# Table of Contents

1. Introduction ...........................................................................................................3  
2. How to Eat After Surgery ..................................................................................4  
3. Protein Needs ........................................................................................................5  
4. Protein Supplements .........................................................................................6  
5. Preparing Foods ...................................................................................................7  
6. Recommended Fluids ...........................................................................................7  
7. Vitamin & Mineral Supplements .......................................................................8  
8. Nausea & Vomiting ............................................................................................10  
9. Foods to Avoid ....................................................................................................11  
10. Chewing ...............................................................................................................12  
11. Recipe for Lodged Foods ..................................................................................12  
12. What to Eat After Surgery ................................................................................13  
13. Lap-Band Diet Progression ................................................................................15  
14. Lap-Band Adjustments ......................................................................................16  
15. Gastric Sleeve Diet Progression ........................................................................17  
16. Gastric Bypass Diet Progression ................................................................--------18  
17. Dumping Syndrome ............................................................................................19  
18. Maintenance Diet ...............................................................................................20  
19. Healthy Snacks ...................................................................................................21  
20. Contact Us ..........................................................................................................21
Introduction

Welcome to your new eating lifestyle. As you know, bariatric surgery is only a tool to help you be successful in your efforts to lose weight. Diet & exercise are the other key components to a successful outcome. This booklet will answer many of the questions you have about your new eating lifestyle & help guide you through the necessary diet modifications. Diet modifications are very important after surgery to:

- Prevent pain & vomiting
- Achieve & MAINTAIN the desired weight loss
- Remain nutritionally healthy

Remember, this is not magic! You will need to work very hard at developing new eating behaviors for successful weight loss. The behaviors & attitudes you have now did not develop overnight & they will not change overnight either; but with continued effort on your part you will achieve good weight loss.
How to Eat After Surgery

• Stop drinking liquids at least 30 minutes before your meal.

• Eat slowly; it should take about 30 minutes to eat meals.

• Chew your food at least 20-30 times. Food should be “mushy” before swallowing.

• Stop eating as soon as you feel full. Remember that your stomach is smaller than before. One extra bite can make you overfull, uncomfortable, or nauseated.

• Do NOT drink with your meals. You can overfill your pouch causing nausea & vomiting. Wait 30-45 minutes after your meal to begin drinking your liquids.

• Always eat your protein first.

• Do NOT use a straw. This can cause gas & bloating.

• Try to eat at regular times. Eat at the table, NOT in front of the TV. Watching TV while you eat can distract you, cause you to eat too fast, or not realize when you are full.

• Serve food on a small plate. Use small eating utensils to help you eat slower (e.g. baby spoons & forks).

• Don’t skip meals. You should eat 3-4 small meals per day with protein supplements as snacks.
Protein Needs

Protein is necessary for your body to heal after surgery and to preserve muscle tissue while you are losing weight. Your body does not store protein, so it must be replaced every day. You need at least 60 grams of protein daily; however, the small size of your pouch makes it difficult to eat enough high protein food at one time to fulfill this need.

We strongly recommend that you eat your protein first, & then proceed with vegetables & fruits. Later as you plan your own menus, be sure to include 1-2 ounces of protein at least 3 times daily. Some good sources of protein include:

<table>
<thead>
<tr>
<th>Amount</th>
<th>Food</th>
<th>Grams of Protein</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 cup</td>
<td>Skim Milk or Yogurt</td>
<td>8</td>
</tr>
<tr>
<td>1 ounce</td>
<td>Lean Turkey/Chicken/Fish/Beef/Pork</td>
<td>7</td>
</tr>
<tr>
<td>1/4 cup</td>
<td>Tuna, canned, packed in water</td>
<td>7</td>
</tr>
<tr>
<td>1/4 cup</td>
<td>Low-Fat Cottage Cheese</td>
<td>7</td>
</tr>
<tr>
<td>1 ounce</td>
<td>Low-Fat Cheese</td>
<td>7</td>
</tr>
<tr>
<td>1 each</td>
<td>Egg</td>
<td>7</td>
</tr>
<tr>
<td>1/4 cup</td>
<td>Mashed kidney beans</td>
<td>3</td>
</tr>
</tbody>
</table>

Pinto beans or lentils

Ways to add extra protein:
- Add non-fat dry milk (NFDM) to soups, hot cereals, macaroni & cheese, skim milk, & other foods.
- Make “Double Milk” by adding NFDM to skim milk & double the protein! Use 1/3 cup dry milk to 1 cup skim milk.
- Add Carnation Instant Breakfast (sugar-free) to skim milk.
- Add pureed baby food to soups & pasta dishes.
- Make all hot cereals & soups with skim milk.
Protein Supplements

Protein supplements are a good way to add protein to your diet. This is necessary initially after surgery & for Lap Band patients when their band is tight. Look for protein shakes that are high in protein but low in sugar & calories. Supplements should have at least 12 grams of protein, or more, per serving. The total calories should be less than 200 & no more than 5 grams of sugar per serving.

For Bypass & Sleeve patients we recommend 2-3 shakes per day for the first 8 weeks after surgery and then 1-2 from 8 weeks through the first 6 months. For Band patients, 1-3 supplements depending on for tight the band is & how much protein is in your supplement. Good examples include:

- **EAS AdvantEdge Carb Control Shakes**
  Protein – 17grams
  Sugar – 0grams
  Calories - 110

- **Atkins Advantage Shakes**
  Protein – 15grams
  Sugar – 1gram
  Calories - 160

- **SlimFast Low Carb Shakes**
  Protein – 20grams
  Sugar – 1gram
  Calories - 190

- **Muscle Milk Light Shakes**
  Protein – 20grams
  Sugar – 3gram
  Calories - 160
Preparing Foods

- Bake, Grill or Broil Meats – Avoid frying foods.
- Avoid adding fats & oils to your foods. Use cooking sprays instead (Pam).
- Prepare meals at home to take to work instead of eating out.
- You may find it helpful to purchase some small food containers with lids to help you portion your leftovers.
- You may use artificial sweeteners as desired. (I.e. Sweet-n-Low, Splenda, Equal, Truvia).
- Allow time in your schedule to plan balanced meals.
- You can prepare some foods ahead of time & freeze it until needed. Ice trays may be used to freeze liquids & soft/puree foods in small portions.

Recommended Fluids

Fluid intake is very important after surgery. Because of the decreased size of your pouch it is more difficult to get in the necessary amount of fluid daily. You should drink at least six 8 ounce glasses (48 ounces) of water or other low calorie fluid daily. You should drink all liquids between meals. Do not use straws or drink carbonated beverages, these can cause gas or bloating. You should avoid beverages sweetened with sugar; these drinks can cause weight gain.

- Water
- Skim Milk
- Vegetable Juice (V-8, tomato juice)
- Unsweetened/No sugar added Fruit Juice (Limit to 8ounces daily).
- Coffee or Tea (unsweetened).
- Crystal Lite or other sugar free beverages.
Vitamin & Mineral Supplements

Vitamin deficiencies can be found in patients prior to surgery but can occur more often after bariatric surgery. Because your pouch is too small to allow adequate intake of foods from all of the good groups & you are taking in fewer calories, you will need a vitamin & mineral supplement. It should be in a liquid or chewable form to avoid blockage of your band or the outlet of your pouch.

Vitamins & minerals perform many specific & individual functions in the body. They do not provide any energy in the sense of calories, but they are important in maintaining the function of the cells of your body. In some instances problems can occur if you are deficient in a vitamin or mineral. Vitamin deficiencies are more common with the gastric bypass due to the malabsorption component of the procedure, but can also occur in sleeve & band patients. To prevent this from happening daily supplements are necessary.

There are many supplements formulated specifically for bariatric patients (i.e. Bariatric Advantage, Celebrate Vitamins) but it is acceptable for you to take a good multi-vitamin such as Centrum, Viactive, or Flintstones Complete. If you are taking a “children’s” chewable vitamin you will need to double the child’s dosage. You should not stop the multi-vitamin unless directed to do so by your physician.

A calcium supplement that contains vitamin D is also recommended daily. The daily dose of calcium is 1200mg with at least 200IU of vitamin D every day, but it is best taken in 2 divided doses to aide in absorption. Inadequate calcium intake can result in osteoporosis & metabolic bone disease.

Other problems may occur if you become deficient in a nutrient. Deficiencies in vitamin A, zinc, & protein may contribute to hair loss. Anemia is another problem which may occur. Causes of anemia may be due to deficiencies in iron, vitamin B-12, or folicin/folic acid.

**Good sources of zinc:**
- Eggs
- Red beets
- Peas
- Cottage cheese
- Whole wheat bread

**Good sources of vitamin A:**
- carrots
- cantaloupe
- winter squash
- V-8 juice
- apricots
### Good sources of iron:
- Dried beans
- Bran flakes
- Eggs
- Oatmeal
- Turkey/chicken
- Beef

### Good sources of vitamin B-12:
- Beef
- Fish
- Eggs
- Cheese
- Chicken
- Milk

### Good sources of Folicin:
- Orange juice
- Northern beans
- Cottage cheese
- Eggs
- Cantaloupe

### Good sources of thiamin:
- Tuna
- Spinach
- Green peas
- Brussels sprouts
- Navy or black beans

**Acute deficiencies may occur within a few weeks during periods of rapid weight loss. DO NOT stop supplements unless directed to do so by your physician. **
Nausea & Vomiting

You will be more successful & have fewer, or no, complications with your bariatric surgery if you carefully & closely follow the guidelines recommended in this booklet. Learn & follow the guidelines on portion size, chewing, liquids, etc. to prevent nausea vomiting.

Recognize & pay attention to the messages your body is giving you. If you feel pressure or fullness in the center of your abdomen or feel nauseated, STOP EATING! Just “one more bite” may cause pain & discomfort. During the meal it may help to stand up briefly to better judge your feelings of fullness.

Use this “trouble shooting guide” to help identify the cause of discomfort, nausea & vomiting. This will help make the necessary changes for the next time you eat.

1. Did you eat too fast or not chew your food well?
2. Did you eat too much?
3. Did you drink fluids with your meal or too soon afterward?
4. Did you eat hard to digest foods such as tough meat or fresh bread?
5. Did you lie down too soon after the meal?

Try to avoid vomiting; it can lead to complications (i.e. band slippage). Reasons for vomiting include: eating too fast, overeating, eating foods too large or bulky to pass through the band or pouch outlet, being intolerant to a certain food (especially breads, heavy meats or bulky vegetables).

If you have seasonal allergies or heavy sinus drainage the accumulation of sinus drainage in your pouch can cause nausea. This may be more noticeable in the morning or when your try to eat or drink. Remedy: when you get up or 30 minutes before your meal take 1 tsp. of lemon juice, then after 15-20 minutes drink something warm, e.g. coffee or tea.

If vomiting continues for more than 24 hours, contact your doctor!
Foods to Avoid

Your ability to tolerate certain foods depends primarily on how well you chew your foods. Each individual will tolerate foods differently. Some patients have found these foods difficult to tolerate:

- **Tough meats, especially beef.**
  - Solution: Buy lean hamburger, try marinating solid meats or use tenderizer.

- **Membranes of oranges & grapefruits.**
  - Solution: Cut grapefruit in half & eat with a spoon avoiding the membranes between sections.

- **Skins of fruits & vegetables.**
  - Solution: Peel apples, pears, potatoes, etc.

- **Fibrous vegetables such as corn, celery, & sweet potatoes.**
  - Solution: Use a food processor or blender & a strainer to avoid indigestible fiber.

- **Fresh bread.**
  - Solution: Try plain toasted bread.

- **Fried foods & concentrated sweets (desserts/candy).**
  - Solution: Bake, broil, or grill foods. Use sugar-free products.

Avoid eating high calorie/high carb snack foods & drinks (chips, cookies, cakes, pies, jams/jelly, regular soft drinks, sweet tea, etc.). If you regularly eat/drink high calorie foods you will not lose weight.

Food intolerances are not uncommon, & vary from one person to the next. Some foods may need to be avoided but not all intolerances are permanent. Bypass patients may have additional food intolerances not experienced by band or sleeve patients. Occasionally some patients are unable to tolerate milk after surgery. Try using “Lactaid” or “Dairy Ease” prior to drinking milk or other dairy products. Milk used in cooking is often tolerated without difficulty.
Chewing

If you swallow food without chewing well, you may cause foods to become lodged in the band or block the outlet of your pouch. This will cause PAIN, DISCOMFORT, NAUSEA, and/or VOMITING. This may result in your pouch stretching, or dilatation of the esophagus. Always remember the following:

• Take about 30 minutes to eat every meal.
• Do not skip meals. This will cause you to eat on the run, or to eat too quickly & forget to chew your food well.
• Chew each bite 20-30 times until the food feels like mush in your mouth.
• Use a small spoon or a baby spoon. This helps you to eat smaller bites & helps control the speed of your eating.
• Learn to savor the flavor & texture of each bite of food.
• DON’T BE RUSHED by others at your table. Explain to them why you must eat slowly & everyone will enjoy their meal more.

The most common cause of food getting “stuck” in the band or pouch is failure to chew the food well.

If you develop vomiting or retching due to food that seems to be lodged in your pouch, try the following:

½ tsp. Aldolph’s Meat Tenderizer
1 tsp. Lemon Juice
½ cup Warm Tap water
Mix well & sip over 1 hour.

If vomiting continues for more than 24 hours, contact your doctor!
What to Eat After Surgery

After your surgery you will go home on a bariatric liquid diet. There are 2 different liquid diets, the Clear Liquid & the Full Liquid diet. Most patients will go home on the Full Liquid diet. Remember that your pouch is small & you will have some initial swelling from surgery which will cause additional restriction. You will only be able to eat a few small spoonfuls at each meal. To help you remember:

\[
\frac{1}{2} \text{ ounce} = 15cc = \frac{1}{2} \text{ medicine cup} = 1Tbsp = 3tsp
\]

Sip each \(\frac{1}{2}\) ounce over a 5-10 minute time period. Try not to exceed \(\frac{3}{4}\) cup (6 ounces) in a 1 hour period. You may experience some pain or nausea because you fill up so much quicker. Stop sipping until the feeling passes.

**Sugar-Free Clear Liquids**
- Fat-free broth
- Sugar-Free Jell-O
- Coffee/Tea unsweetened
- Unsweetened Fruit Juices- no pulp
- Sugar free popsicles
- Sugar-Free low calorie drinks

**Sugar-Free Full Liquids**
- Low-Fat Cream Soups
- Skim Milk
- V-8 Juice
- Sugar Free Pudding
- Oatmeal/Cream of Wheat
- Low-Fat Yogurt

*You may use sugar substitutes (Splenda, Equal, Sweet-n-low, etc.) to sweeten your liquids. DO NOT use sugar.

If liquids are well tolerated, the next progression will be to the bariatric soft diet. Most patients will start soft/puree foods on the 6th day after surgery; your doctor will tell you when to start soft foods. Before you begin your soft diet please carefully review all of the diet tips on the How to Eat after Surgery Page. Continue to measure all of your foods; this will help prevent overeating, nausea & vomiting. The amount that you can eat at a time will depend on which surgery you had & the type of food you are eating.
**Bariatric Soft/Pureed Diet**

<table>
<thead>
<tr>
<th>Protein Foods</th>
<th>Other Foods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cottage cheese</td>
<td>Canned fruit (in juice)</td>
</tr>
<tr>
<td>Low-fat cheese</td>
<td>Soft cooked vegetables</td>
</tr>
<tr>
<td>Smooth Peanut Butter</td>
<td>Canned Vegetables</td>
</tr>
<tr>
<td>Soft Poached Eggs</td>
<td>Bananas (mashed)</td>
</tr>
<tr>
<td>Baby Food Meats or Pureed Meat</td>
<td>Applesauce</td>
</tr>
<tr>
<td>Cold cereals (not sugar coated)</td>
<td>Apples/Pears (peeled)</td>
</tr>
<tr>
<td>Tuna Fish (packed in water)</td>
<td>Melons</td>
</tr>
<tr>
<td>Chicken Salad (with low fat Mayo)</td>
<td>Peaches (peeled)</td>
</tr>
<tr>
<td>Tuna or Ham Salad (with low fat Mayo)</td>
<td>Melba toast/crackers</td>
</tr>
<tr>
<td>Low-Fat Soups</td>
<td>Brown/Wild rice *</td>
</tr>
<tr>
<td></td>
<td>Whole wheat pasta *</td>
</tr>
</tbody>
</table>

*Not all patients will tolerate these foods.

**Soft Textured Foods** Once on soft texture diet (usually after 4-6 weeks) you will be able to add a few new foods. You should use a food processor to chop all of the meats into small pieces, and continue to chew your food well. Choose lean, moist meats. Do not eat tough or dry meats.

- You may now add: turkey, pork, ham, fish, roast beef, lean lunch meats
- Bread may be added as well. Toast bread for better tolerance at first.

**Bariatric Regular Diet** After week 8 you will begin eating a more “regular” diet. You may now add fresh bread, raw vegetables, and other meats. You should continue to use the trial & error method of adding new foods according to how well you tolerate the new items. Be sure that you only try to add 1 new food item at a time to see if you will be able to tolerate it. Be sure you eat 3-4 balanced meals each day. You will need to include 2 servings of dairy, 3 servings of meat/protein, 3 servings of fruits & vegetables, & 2 servings of whole grains. Continue to limit fats to less than 30% of your total calories & drink six 8 ounce glasses of water daily.
Lap-Band Diet Progression

Diet progression for Band patients is a little quicker since there is no cutting of the intestine or stomach and the band is initially empty after surgery. Band patients go home on the bariatric full liquid diet for the first week after surgery. Portions should be 1-2 ounces, up to ¼ cup, per meal for the first week.

**Week 2.** Band patients typically start the soft/puree diet on post-op day number 6 with portions about ¼ - ½ cup, 2-4 ounces, per meal. Depending upon the amount of swelling and your level of restriction you may be able to eat more than this, do not exceed 1/3 – ½ cup per meal. Remember to stop eating as soon as you begin to feel full! You may use protein shakes as snacks.

**Week 3.** Starting the 3rd week until your first adjustment you may notice that you are hungrier. Since your band is empty, it is acceptable to increase your portion sizes. You should still try to keep your portions ½ to 1 cup per meal, which is the ideal portion size for a Band patient. Please note that every patient is different and feels restriction at different levels of adjustment; it may take several adjustments before you begin to notice a good amount of restriction. Just stick to your diet (high protein, low-fat, sugar free foods) and continue to exercise.

**Week 4.** It is now time for your first adjustment. Information about adjustments can be found on the following pages. After your adjustment you may feel an increased amount of restriction with your meals but after a week or two you may not notice it as much. This is normal. Again, remember that everyone is different & you may need several adjustments before you notice a big difference.

**Week 5.** From this point on you may follow the bariatric soft texture & bariatric regular diet, depending on your level of restriction. The requirement for high protein, low-fat, sugar-free foods will remain the same. You should try to limit calories to 1000 – 1200 per day to help achieve a good rate of weight loss. Close follow-up is necessary for proper band adjustment; please keep all of your appointments.
Band Adjustments

When your band is placed, your surgeon leaves it empty. This is to allow your body time to heal, and it also gives you time to become accustomed to the feeling of restriction. Although there are a few patients who do not require an adjustment in order to feel restriction & achieve good weight loss, most will need to have the band adjusted at regular intervals. Each patient is different and there is no way to predict how much fluid or how many adjustments a particular patient will need. The average patient will need 4-5 adjustments initially and may need additional periodic adjustments as time passes.

On the day of your adjustment please follow the instructions below:

• You may only have bariatric clear liquids (see page 14).
• Do not eat or drink anything 2 hours prior to your scheduled adjustment appointment. **We can NOT do an adjustment if you have a full stomach.**
• After your adjustment you will be on bariatric full liquids (see page 14) for the rest of the day.
• The day after an adjustment you may progress back to the bariatric soft diet. After that you may return to your regular bariatric diet as tolerated.

We base the need for adjustments on several factors. These can include your current rate of weight loss, how much & what type of foods you are able to eat, how much restriction you are feeling, and whether or not you are having nausea, vomiting, or reflux. Lap-Band patients can achieve good levels of weight loss, but it is slower than that of bypass or sleeve patients & also requires close adherence to the diet & exercise plan.
Gastric Sleeve Diet Progression

Since the Sleeve is a compromise between the Band & the Gastric Bypass, the diet for sleeve patients has components of both the Band & Bypass diets. While diet progression is more like that of the bypass the portion sizes are more similar to the Band. You will go home on the Full Liquid diet for the first week, during this time you will be limited to 2 ounces, ¼ cup, per meal.

Weeks 2 - 4. On post-op day 6 you will begin the Bariatric Soft/Pureed diet. Portion sizes should be about 2-3 ounces, or ¼ - 1/3 cup, do not exceed this amount. Remember to stop eating as soon as you begin to feel full! You may still use protein shakes as snacks.

Weeks 5 – 8. You may now begin adding some of the soft texture foods to your diet; this does include lean tender meats. During this time you should use a food processor, blender, or grinder to finely chop your meats. You may also add fat-free broth to help moisten meats. You may also try whole wheat bread now. Toasted bread is typically tolerated better at first. Limit portions to 3-4 ounces, 1/3 – ½ cup, per meal or less.

**Remember to take you time. Eat slowly, take small bites & chew your food well.

After the 8th week you will move to the Bariatric Regular Diet. You will be able to add more meats, & raw vegetables with caution. Add new foods one at a time & keep your total caloric intake to 1000 – 1200 calories per day. **DO NOT exceed ½ cup or 4 ounces per meal.

Overeating can result in nausea & may cause your pouch to stretch over time leading to weight regain.
Gastric Bypass Diet Progression

As with the other procedures all gastric bypass patients will be on the bariatric Full Liquid diet until post op day number 6. The first week after surgery portion sizes should be 1-2 tablespoons, or 1 ounce, per meal. Due to the malabsorption created by surgery, Bypass patients are sensitive to sugar in their diet. Sugar intake may trigger dumping syndrome (see next page). Occasionally after bypass surgery patients may become lactose intolerant, Lactaid may help with this.

**Weeks 2 - 4.** You are now ready to begin your bariatric soft/puree diet (see page 14). Portions are still 1 ounce, 1-2 Tablespoons, per meal. Eat slowly & chew well. Remember do not drink with your meals. Food intolerances are not uncommon. Some foods may need to be avoided. Food intolerances vary greatly from one individual to the next, however not all intolerances are permanent (see page 12).

**Weeks 5 – 8.** You may now begin adding some of the soft texture foods to your diet; this does include lean tender meats. During this time you should use a food processor, blender, or grinder to finely chop your meats. You may also add fat-free broth to help moisten meats. Keep portions 1-2 ounces, or up to ¼ cup per meal in weeks 4-6. You may also try whole wheat bread now. Toasted bread is typically tolerated better at first. Portions may be up to 1/3 cup or 2-3 ounces as tolerated starting in week 7.

**Week 8 & after.** You can now start the Bariatric Regular Diet. You will be able to add more meats, & raw vegetables with caution. Add new foods one at a time. **DO NOT exceed ½ cup or 4 ounces per meal. Overeating can result in nausea & may cause your pouch to stretch over time leading to weight regain.**

To prevent dehydration you must sip on water, low-calorie sugar-free beverages, & skim milk between meals. Try to drink at least six 8 ounce glasses of fluid daily. It takes 6-9 months or longer for your pouch size to stabilize & allow you to determine your normal meal size.
Dumping Syndrome

“Dumping Syndrome” occurs when undigested food is “dumped” into the small intestine 10-15 minutes after eating, rather than being gradually released in small amounts from the stomach into the small intestine.

“Dumping” acts as a built in “coach” when sweets or junk food is eaten. Symptoms of dumping syndrome include abdominal fullness, nausea & crampy abdominal pain that may be followed by diarrhea. In addition to these symptoms, you may also experience feeling warm, dizzy, weak & faint; have an increased pulse rate or break out in a cold sweat. These symptoms are harmless & temporary and usually pass in 30 minutes – 1 hour.

General guidelines to treat symptoms:
• Liquids should be given 30-60 minutes after meals & limited to ½ - 1 cup servings.
• Continue small frequent meals to avoid overfilling your stomach.
• Avoid concentrated sweets. Instead, diet should be high in complex carbohydrates & protein & low in fat.
• If dumping is a problem, it may be helpful to lie down for 20-30 minutes after meals to slow transit to the small bowel.

Candy, desserts, & other sweets should be avoided unless they are available in sugar-free form.

Hidden Sugars: Sugar goes by many other names. Read food labels & lists of ingredients carefully when you select food products. Beware of other words for SUGAR: Brown Sugar, Sucrose, Corn Syrup, Corn Syrup Solids, Dextrose, Honey, Maple Syrup, Molasses, High Fructose Corn Syrup, Sorghum, & Turbinado Sugar.

**Remember that Fructose is O.K.
Maintenance Diet

Your bariatric surgery is not a miracle cure. It is important that you maintain nutritious eating habits to help you KEEP the weight off. Your maintenance diet should consist of:

- Eating a well-balanced diet following the recommendations of your surgeon & dietician.
- Continued small portions per meal & eating slowly.
- No sugar or concentrated sweets.
- Continue drinking liquids between meals.
- Stop eating as soon as you feel full.

Maintain a “low-fat lifestyle” by choosing foods with less than 20-25% of the calories from fat. Some food labels give the percentages but many do not. Here’s how you can calculate it yourself:

1. Fat contains 9 calories per gram of fat.
2. To determine the percentage of fat calories:
   a. Multiply the grams of fat per serving by (9).
   b. Divide that number by the number of calories per serving.
   c. Multiply by 100.
3. This equals the percentage of calories from fat. Remember, you want the total to be less than 30%.

Beware of “LITE” foods. The term “LITE” is often given to a food in which water or air has been added, yet it is the same product which still contains too much fat or sugar.

EXAMPLE: canned fruit in LITE syrup still contains a significant amount of sugar. It is best to choose canned fruit with “NO Added Sugar”

Three to four meals a day is the optimal meal plan, however, if you choose to snack, it is best to choose nutritious foods.
Healthy Snacks

Below you will find some examples of healthy food choices.

Fresh Fruit
Canned Fruit (no sugar added) *dried fruits are high in sugar*
Vegetable Sticks (zucchini, carrots, eggplant, etc.)
Non-fat Sugar-Free Yogurt
Non-fat Cottage Cheese
Non-Fat Whole Wheat Crackers
Non-fat or Low-fat Cheese
Sugar-free Whole Wheat Cereal
Popcorn (air popped no added fat) *most microwave popcorn
contains too much fat even the: LITE: versions. Use the fat percentage
calculation as previously described*
Low Salt Pretzels
Sugar-Free Pudding (made with skim milk)
Sugar-Free Gelatin with unsweetened fruit

Contact Us

If you have any concerns or questions please feel free to contact us.

ARKANSAS BARIATRIC SURGERY

Dr. J.D. Fuller       Phone # 501-227-9080
Dr. Mark Gibbs       Fax # 501-227-0490
Dr. Eric Paul