



**Northumbria Healthcare**  
NHS Foundation Trust

# Your eating plan after having a gastric band fitted

Issued by the Nutrition and Dietetic Department

## Introduction

This leaflet provides you with advice on how to eat well following your weight loss surgery and is based on experience of what works well for most people.

Follow the suggestions in this leaflet to help prevent your smaller stomach from stretching; to get the nutrients you need for good health and to prevent nutritional deficiencies and side effects such as nausea, vomiting, bloating and blockages.

Your commitment to healthy eating and changes to lifestyle habits will help you to lose weight, maintain your weight loss and help you feel well.

Physical activity remains important to help manage your weight in the long term. You should aim to include 30 minutes of activity five or more days per week. This should be an activity which leaves you slightly breathless and warm.

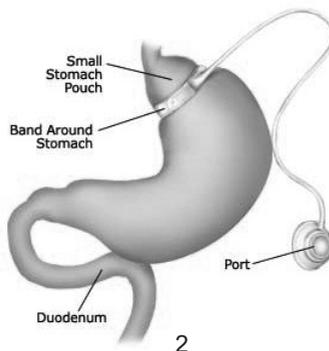
Your nutrition plan after bariatric surgery is for life.

## How the gastric band works

The gastric band works by slowing down the speed at which food travels through your stomach. This will help you to eat smaller portions by making you feel full with less food.

However, you will only recognise these fullness signals by eating slowly and following the advice in this booklet.

Gastric Lap Band Surgery



The aim is for small mouthfuls of food to be taken, chewed well and to be allowed time to be 'squeezed' through the band which sends signals to your brain, to tell you that you are full.

If you eat too quickly or drink with your food then the food will be forced through the band too fast and you will not experience these signals.

If you over-eat or the band is too tight, there is a risk that the food might collect in your stomach and/or gullet above the band. You might get heartburn-like symptoms if this happens.

You will still need to follow a healthy, low fat and low sugar diet and avoid 'grazing' between meals to achieve the weight loss that you want.

## **Band fills/adjustments**

When you first attend the clinic after having surgery, the team will discuss with you when and how much to fill the gastric band.

The gastric band will be filled in the clinic room wherever possible. The band itself is connected to tubing which is then connected to a port, which can be felt under the skin. A special needle is carefully inserted into the port (see diagram on page 1) which allows fluid to be removed or inserted. This makes the band looser or tighter.

**Each time the band is filled go back to a softer consistency of food for 24 hours.**

## **Weight loss – what to expect**

You will lose most of your excess body weight in the first one to two years after surgery.

The speed that you lose weight will vary from person to person.

Whilst you may lose weight very quickly, it can be common with the gastric band for your weight loss to be more gradual and slow.

Make sure that you are not snacking between meals and that you eat three small, healthy meals per day. If you eat too little over a long period of time, your metabolism (the speed at which we burn calories) may slow down. You may also find that you are losing inches instead.

## Vitamin supplements

- For the **first month only** after surgery you should take a chewable/liquid multivitamin and mineral supplement once a day. Choose a variety which says: ‘multivitamins with minerals’ and suitable for adults. You can buy these over the counter
- **After the first month** you should be able to take a tablet multivitamin and mineral. Choose a variety which says on the label: “A-Z multivitamins and minerals” or “Complete multivitamins and minerals”. **Take one tablet a day for life**

You may need to take additional supplements on the advice of your bariatric specialist dietitian or consultant. This is usually because your blood tests have shown a deficiency and/or your diet is lacking in the nutrient.

## Food re-introduction

Please refer to the ‘meal ideas booklet’ for more information.

Initially your stomach will have some swelling and tenderness from the operation therefore it is important that you gradually increase the texture of your foods from liquids to solids over a 4-6 week period.

If you have trouble eating a certain food at first, stop eating it and try again in a week or so. It may be helpful to keep a food diary to record what you ate and how you tolerated the food.

The diet after surgery is split into 4 stages:

Stage	Texture	When to start	For how long
1	Fluids only	Day of surgery	1 day
2	Pureed Foods	Day 1-2 (as advised) post operatively	2-4 weeks
3	Soft Foods	Week 2-4 post operatively	2 weeks
4	Solid Foods	Week 4-6 post operatively	Ongoing

## Portions

It is difficult to give set portion sizes for each stage. This is because the amount of food people can eat after surgery varies between individuals. It is therefore important to eat slowly and stop eating as soon as you feel full.

As a guide, we expect your first few meals to be no more than 3-4 teaspoons. This will slowly increase to an egg cup size portion. By the time you are on stage 3 (soft diet) you should be taking no larger than a saucer sized portion. Eventually your normal portion in the longer term will be a side plate sized portion (7 inch/18cm plate).

It is important that you increase the portion sizes slowly so you do not stretch your new pouch - if this happens it will affect your long term weight loss.

## How to eat after surgery

- Eat slowly, take small bites of solid food and chew them very well
- You may find it helpful to eat your food using smaller cutlery
- Do not eat and drink together – avoid drinking 30 minutes before a meal and one hour after a meal
- Food should be chewed to a paste before swallowing
- Choose foods that are easy to chew so that they break down into small pieces
- Focus on enjoying your food and make time for each meal
- Avoid distractions such as the television, telephone, computer or work while you are eating
- Pay attention to your body's signals of hunger and fullness. Learn to know when you start to feel full and stop eating at that point
- **Always follow the 20:20:20 rule:**
  - chew every mouthful 20 times
  - pause for 20 seconds between mouthfuls
  - a meal should last approximately 20 minutes

## Meal pattern

- Have three small meals a day
- Avoid snacks
- Plan your meals in advance
- Include protein in each of your meals. Higher amounts of protein are found in lean meats, poultry, fish, eggs, beans/legumes and low-fat dairy products
- Choose foods from all the main food groups. Each main meal should contain protein, vegetables and carbohydrates. Eat a mouthful of each food group in turn
- After four to six weeks, choose foods that are mostly solid
- Choose low sugar and low fat foods to help you lose weight

## Fluids

- Do not drink with food
- Try to drink two litres of fluids each day – keep a drink with you throughout the day
- Sip drinks slowly – do not gulp quickly. Initially a small glass may take up to one hour to drink
- Do not drink fizzy liquids as they can cause bloating and may stretch the pouch. Drink water, sugar free still drinks, tea or coffee instead
- Do not use straws to drink your liquids. This may cause gas or bloating
- Avoid alcohol. Alcohol is high in calories and has no nutrition. If you continue to drink alcohol regularly your weight loss will be affected. We recommend you avoid alcohol for at least three months after surgery

## Foods to avoid

- It is common not to be able to eat certain foods after a gastric band.
- Some foods may stick in your stomach pouch or cause blockages. Foods such as overcooked rice, overcooked pasta and soft doughy breads are more likely to be sticky and are best avoided
- Avoid foods which are hard to chew. This includes dry, tough meats, stringy vegetables, fruit, vegetable skins, nuts and popcorn
- Large pieces of food can cause blockages and vomiting. So make sure you chew your food well
- Avoid chewing gum as it can cause bloating

The following list gives examples of these foods which you may struggle to eat and alternatives.

Foods To Avoid	Alternative to try
Bread	Crackers Crispbreads/breadsticks Toast Pitta bread / wraps
Overcooked rice, overcooked pasta	Rice and pasta cooked still in “pieces” / al dente cous cous
Tough dry meats	Cook meats in slow cooker / oven for longer time until soft and tender Wafer thin cold cuts Minced meats Flaky fish e.g. poached / steamed white fish or salmon Canned tuna mixed with low fat mayonnaise Eggs – soft boiled / poached / scrambled
Skins on fruit & vegetables  Fibrous and stringy vegetables e.g. stringy beans / cabbage / onions / lettuce / sweetcorn	Peeled fruit and vegetables Ripe soft fruits Tinned fruits in natural juice Cauliflower, broccoli, carrots, root vegetables (buy frozen to reduce waste). Chop onions finely or use food processor Try grating fruit or vegetables
Oranges/grapefruit	Soft ripe fruits e.g. peeled peach / plum / pear / tinned fruit in natural juice
Nuts, dried fruits, seeds and foods containing these	-
Coconut	-
Popcorn	-

# Potential problems

## Vomiting

- May indicate that your band is too tight, especially if you notice particular difficulty with tender solid foods. Contact your Bariatric Specialist Dietitian or Specialist Nurse for advice
- May also be due to eating too quickly, eating too much, not chewing food well, eating the incorrect texture of food or having a drink too close to food

If you cannot keep any food or fluid down seek medical advice immediately. Either contact one of the bariatric team or your GP.

Out of hours - attend Accident and Emergency (A&E) and make sure they know you have a gastric band.

## Constipation

- Can be common after weight loss surgery as you are eating less
- Often due to lack of fibre and/or fluids
- Anxiety and depression can make it worse
- Choose high fibre cereals and include plenty of fruit and vegetables
- Eat regularly
- Ensure you drink two litres of fluids each day
- Ensure regular exercise
- See your GP if the problem persists as you may need laxatives

## Dizziness/light-headedness

- Often due to lack of food, irregular meals and/or dehydration
- Eat regular meals with a starchy carbohydrate at each meal
- Try to eat every three to four hours during the day
- Ensure you drink two litres of fluids each day





## **Alternative Formats**

If you would like a copy of this information in large print, another language, audio tape or other format please call the Contact Centre on **03 44 811 8118**

## **Other sources of information**

### **NHS 111**

### **NHS Choices**

[www.nhs.uk/pages/homepage.aspx](http://www.nhs.uk/pages/homepage.aspx)

### **NICE (National Institute for Health and Clinical Excellence)**

[www.nice.org.uk](http://www.nice.org.uk)

### **Patient Advice and Liaison Service (PALS)**

Freephone: **0800 032 0202**

Text: 01670 511098

Email: [northoftynepals@nhct.nhs.uk](mailto:northoftynepals@nhct.nhs.uk)

### **Northumbria Healthcare NHS Foundation Trust**

General Enquiries **03 44 811 8111**

[www.northumbria.nhs.uk](http://www.northumbria.nhs.uk)

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