Protein (8 – 10 oz/day)
A serving can be:
• ½ cup cooked beans/legumes
• 6 oz. sugar-free light yogurt
• ¼ cup lowfat cottage cheese
• 1 egg, ¼ cup egg substitute
• 1 oz. cooked lean meat, poultry, fish, tuna, lowfat cheese
• 8 oz. nonfat milk

Fats (4 Servings Per Day):
A serving can be:
• 2 tbsp. avocado
• 1 tsp. olive oil or margarine

Grains, Beans, and Starchy Vegetables (2 Servings Per Day)
A serving can be:
• ¼ cup cold cereal (<6gm sugar)
• ½ cup hot cereal
• 1 small potato (3 oz.)
• 1 slice whole grain bread

Fruits (2 Servings Per Day):
A serving can be:
• 1 cup berries
• 1 small banana (4 oz.)
• 1 small orange (6.5 oz.) or peeled apple

Vegetables (2 Servings Per Day):
A serving can be:
• 1 cup raw vegetables
• ½ cup cooked vegetables
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Introduction

Congratulations! You are embarking on an important journey toward a healthier weight and healthier new life. The Roux-en-Y Gastric Bypass surgery helps you lose weight two ways – by causing nutrient malabsorption from bypassing a portion of the small intestine, and by surgically reducing the size of the stomach to limit the amount of food you eat. But most importantly of all, YOU are the one who makes the weight loss successful; no surgery can do that for you. Before surgery, your stomach is approximately the size of your fist, with the ability to expand and stretch. After surgery, your pouch is approximately the size of an egg and can only hold a few ounces of food at one time. It cannot stretch like your old stomach nor will the food you eat enter into the larger stomach compartment. For this reason, the type of food that enters your pouch should be healthy and nutritious.

It is essential after surgery that you follow the nutrition protocol recommended to reach your desired weight and stay healthy. If you know someone who has had this surgery at another clinic, his or her post-surgical diet may differ somewhat from the nutrition protocol recommended by Western Bariatric Institute and your bariatric surgeon. Our guidelines are based on the scientific research and long-term follow up with thousands of patients. We believe for optimal weight loss success and health improvement with weight reduction that you should work to strictly abide by the guidelines recommended by the Western Bariatric Institute nutrition program.

Keep in mind that what you eat is only a small part of the total picture. You need to make a commitment to changes in eating and physical activity FOREVER…not just until you have lost the excess weight. This is about building a good foundation of healthy lifestyle habits for life long success.

Congratulations on making these important positive changes for your health. You are worth it!
Section 1

Dietary and General Guidelines
Pre-Operative Nutrition Plan

Prior to your surgery, you are required to follow the Western Bariatric Institute Step-by-Step Meal Plan to help you achieve the recommended weight loss. This will also help ease you into the pre-operative liquid diet. The purpose of the required weight loss before surgery is to make your surgery safer. A 10% loss of excess body weight makes you significantly healthier for surgery and markedly shrinks the fat-infiltrated liver.

The WBI Step-by-Step Meal Plan includes your liquid diet. The purpose of the pre-operative liquid diet is to reduce the size of your liver, reduce intra-abdominal fat, and to improve the surgeon’s view of the stomach and intestines when performing the surgical procedure. This serves to decrease the chances of bleeding and other complications that might lead to conversion to an open incision. The number of weeks you were prescribed to follow the liquid diet was determined by your surgeon and is based on your BMI and your operative risk. The higher your BMI, the more weight loss your doctor desires to make your surgery safer and reduce post operative complications. This weight loss before surgery also helps you establish new eating patterns for long-term success. To help you with the pre-operative liquid diet requirement, Western Bariatric Institute has partnered with Chef Dave Fouts, the “World’s First Bariatric Chef” to come up with a book entitled Shakin’ It Up which provides patients with easy, no added calorie recipes to add flavor to the meal replacement shakes. This book can be ordered online at www.imetabolic.com (click on the e-store) or in the Western Bariatric Institute store.

The pre-operative liquid diet is an important step in your weight loss journey. There are other steps you can take to prepare for surgery, from beginning basic physical fitness steps, to communicating with friends and family, to grocery shopping, and many steps in between. You can listen to an audio program covering all of these pre-operative steps entitled Preparing For Weight Loss Surgery: How To Maximize Success and Lower Your Risk Before Your Operation, available at www.audiodiets.com or in the Western Bariatric Institute store.
Post-Operative Gastric Bypass Diet Progression

After surgery, you will follow four stages of the progression diet before you are following a regular diet plan. Following the recommended guidelines can prevent many problems including: food sticking, belching, nausea, vomiting, dumping syndrome, and failure to achieve your goals. The key to remember is that following the recommended diet instructions will lead to great weight loss! So focus on these principles and stay determined!

Stage 1 - Clear Liquid Diet in the Hospital
You will be following this stage of the diet while you are in the hospital and sometimes for a week or so after the hospital. A clear liquid is anything you can see through. Be sure to check the hospital tray to confirm that you do not receive in error any clear liquids that contain sugar or are carbonated.

Foods Allowed:
- Chicken, beef, or vegetable broth
- Sugar free gelatin
- Sugar free popsicles
- Sugar free, non-carbonated beverages such as Crystal Light or Propel
- Decaffeinated tea, hot or cold

After surgery, you may find that your taste buds have changed and some foods or beverages may be too salty or too sweet. If this is the case, consider diluting things such as broth or sugar free beverages with water. Remember to SIP your beverages….small sips throughout the day.

Stage 2 - Full Liquid Diet for Days 3 – 7 After Surgery
When you are discharged from the hospital, unless directed otherwise by your surgeon, you should follow the full liquid stage for the remaining days of your first week post-operatively. Sometimes your surgeon will advance your diet to full liquids even while you are still in the hospital. You need to follow the liquid diet to let your pouch heal.
- Make sure your full liquids are sugar-free.
- Your servings should be about 2-3 tablespoons per meal. Use standardized measuring spoons to determine portion sizes.
• Most people do not feel hungry most of the time and find it hard to eat even 3 times a day.
• Eat your meals slowly. Allow 20-30 minutes per meal.
• Drink water or zero-calorie fluids throughout the day. Your target is 45 oz of fluids (or more) daily.

Below are foods that are liquid or semi-liquid at room temperature. Sugar-free and low-fat foods must be used.

• Nonfat or 1% milk
• Creamed soups made with nonfat or 1% milk
• Protein supplement drinks, limit 20 grams of protein per serving
• Thinned hot cereal such as cream of wheat, cream of rice, or blenderized oatmeal
• Thinned mashed potatoes
• Thinned sugar-free yogurt, plain nonfat yogurt
• Sugar-free popsicles

Between Meal Liquids (Low Calorie, Less Than 10 Calories per 8 Fluid Ounces)

• Water, Fruit 2 O, Propel
• Crystal Light, sugar-free Kool-Aid
• Broth
• Decaffeinated coffee or tea - no sugar or creamer, can use sugar substitute
• Tomato juice or V-8 (limit to 6 fluid ounces per day)
• FLAT, diet soda - no carbonation
• Sugar-free gelatin

Sample Menu for Stage 2 Full Liquid

Breakfast: 2 - 3 tablespoons hot cereal with 1-2 ounces nonfat or 1% milk
Snack: 2 - 4 ounces protein drink
Lunch: 2 - 3 tablespoons low fat creamed soup
Snack: 2 – 4 ounces protein drink
Dinner: 2 - 3 tablespoons thinned mashed potatoes
Stage 3 - Smooth Foods Diet for Days 8 – 13 After Surgery

Eat foods that have been pureed in a blender or food processor to resemble the consistency of applesauce. You may only be able to consume your protein foods and get full before you are able to eat other foods. Continue to avoid high calorie, high sugar, and high fat foods.

- **Your servings should be about 2-4 tablespoons per meal. Use standardized measuring spoons to determine portion sizes.**
- Always put protein first.
- Drink only low calorie beverages between meals.
- Eat 5 - 6 small meals per day, about every 3 hours. You may have minimal to no appetite but it is important to attempt to take a few bites or sips every 3 hours.
- **DO NOT EAT AND DRINK AT THE SAME TIME. No beverages 30 minutes before you eat, while you eat, and 30 minutes after you eat.**
- Aim for a minimum of 48 fluid ounces of water or low calorie beverage each day.
- Sip, sip, sip. **No straws!**
- Start taking your vitamin and mineral supplements daily as prescribed by your practitioner.
- Take advantage of **Smooth Foods™**, a cookbook by Chef Dave Fouts and Vicki Bovee, M.S., R.D., available in the Western Bariatric Institute store or on iMetabolic’s e-store at [www.imetabolic.com](http://www.imetabolic.com).
## Stage 3 Smooth Foods Diet for Days 8 – 13 After Surgery

<table>
<thead>
<tr>
<th>FOODS</th>
<th>ALLOWED</th>
<th>AVOID</th>
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<tbody>
<tr>
<td>Protein</td>
<td>Strained or pureed lean meat, poultry, or fish (water-packed tuna, fish, ground chicken, ground beef, ground turkey, and soft flaky fish will puree more easily than solid pieces)</td>
<td>Fried meats or eggs</td>
</tr>
<tr>
<td></td>
<td>Eggs</td>
<td>High fat meats like sausage and hot dogs, canned meat spreads</td>
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<td></td>
<td>Low fat cottage cheese</td>
<td>Spicy meats</td>
</tr>
<tr>
<td></td>
<td>Nonfat or 1% milk</td>
<td>Poultry skins or tough meats</td>
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<tr>
<td></td>
<td>Light yogurt</td>
<td>*Avoid pieces of red meat like steak for 6 months</td>
</tr>
<tr>
<td></td>
<td>Plain nonfat yogurt</td>
<td>2% or whole milk</td>
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<tr>
<td></td>
<td>Protein supplement drink (limit 20 grams protein)</td>
<td></td>
</tr>
<tr>
<td>Carbohydrates</td>
<td>Cooked hot cereal without added sugar (sugar substitute can be used to sweeten)</td>
<td>White flour breads, pasta, tortillas</td>
</tr>
<tr>
<td></td>
<td>Smooth mashed potatoes</td>
<td>Rice</td>
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<td></td>
<td></td>
<td>Pastries, baked goods, donuts, biscuits</td>
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<td>Cold cereals</td>
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<td></td>
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<td>Crackers, pretzels, popcorn</td>
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<tr>
<td></td>
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<td>Any starchy food made from refined flours and/or added sugar</td>
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<tr>
<td>Fruits</td>
<td>Unsweetened applesauce</td>
<td>Fruit juice</td>
</tr>
<tr>
<td></td>
<td>Unsweetened pureed fruit</td>
<td>Fruit canned in syrups</td>
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<tr>
<td></td>
<td>(canned pears, canned cherries, canned peaches, bananas, berries, kiwi, passion fruit and guava will puree more easily)</td>
<td>Fibrous fruits such as pineapple and oranges</td>
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<td>Vegetable juice (limit 6 ounces per day)</td>
<td>Dried fruits</td>
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<td>Whole fresh fruits</td>
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<tr>
<td>Vegetables</td>
<td>Pureed vegetables (carrots, green beans, peas, beets, acorn squash, spinach, zucchini, and tomatoes.)</td>
<td>Whole cooked or raw vegetables</td>
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<tr>
<td></td>
<td>Vegetable juice (limit 6 ounces per day)</td>
<td>Any vegetables that are fibrous or have tough skins or seeds such as corn, celery, asparagus, artichokes cauliflower, broccoli, cabbage may cause gas</td>
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<tr>
<td>Fats</td>
<td>Low fat or nonfat mayonnaise, salad dressings, cream cheese, sour cream</td>
<td>Regular fat mayonnaise, salad dressings, cream cheese, sour cream, peanut butter</td>
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<td></td>
<td>Small amounts of butter, margarine, or oil</td>
<td>Bacon</td>
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<tr>
<td>Soups</td>
<td>Broth (chicken, beef, and vegetable)</td>
<td>Soups with chunks of food, pasta, or rice made with heavy creams</td>
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<td></td>
<td>Pureed low fat cream soups</td>
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<td>Misc.</td>
<td>Salt and pepper</td>
<td>Alcohol</td>
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<td></td>
<td>Herbs and spices as tolerated</td>
<td>Nuts, seeds</td>
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<td></td>
<td>Low fat, sugar free non-dairy creamers</td>
<td>Candy, ice cream</td>
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<tr>
<td></td>
<td>Artificial sweeteners</td>
<td>Syrups, jams, honey, sugar</td>
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<tr>
<td></td>
<td>Mustards, Vinegar</td>
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</table>
Preparing Smooth Foods

Foods can be prepared in a variety of tasty ways so that meals are palatable. Cooking methods include: baking, broiling, grilling, roasting, sautéing, rotisserie, steaming, poaching, braising, pan-frying, or using a crock-pot. We recommend sauté and rotisserie to make protein foods moist and tender. Fruits and vegetables can be pureed either raw or cooked. You will need to add flavor to protein by using spices and herbs, marinating the protein before cooking, or cooking the protein with other foods to absorb flavors.

Once the protein is cooked, place 1.5 to 2 ounces in a food processor, add some liquid (see below) and press the puree button. Continue adding small amounts of liquid until the protein is smooth and creamy, like a dip. It is important that you puree everything that you eat so that no food accidentally gets ‘stuck.’ Processed foods are not easily pureed and should not be eaten until solid foods are re-introduced into the diet. Fruits and vegetables can be pureed with the protein or eaten separately on the side.

Liquids that can be added to pureed food:

- Chicken broth (typically added to poultry meals)
- Beef broth (typically added to beef meals)
- Vegetable broth (may be added to any meal)
- Fish Stock (typically added to fish meals)
- Olive, Canola, Peanut, Safflower, or Sunflower Oil (may be added to any meal)
- Water (may be added to any meal)
- Any natural au jus that the protein was cooked in
Sample Menu for Stage 3 Smooth Foods:

Breakfast: 2 tablespoons light fruit flavored yogurt mixed with 2 tablespoons part skim ricotta cheese, flavor with vanilla or almond extract
Snack: 4 fluid ounces protein supplement drink
Lunch: ¼ cup canned split pea soup, pureed in the food processor
Snack: 4 fluid ounces protein supplement drink
Dinner: ¼ cup white tuna albacore tuna spread (recipe follows)
Snack: ½ cup sugar free gelatin

Smooth Albacore Tuna Spread*

Makes 6 ¼ cup servings

Ingredients:
7 ounces white albacore tuna in a pouch
2 tablespoons fresh dill weed, chopped
1 teaspoon hot sauce
1 teaspoon garlic, minced
1 tablespoon fresh lemon juice
¼ cup light sour cream
¼ cup light mayonnaise

Directions:
Place the tuna, dill, hot sauce, garlic, and lemon juice in a 3-cup food processor.
Puree for 20 seconds. Using a rubber spatula, scrape down the sides of the bowl.
Add sour cream and mayonnaise and puree for another 30 seconds.

TIP: Store in an airtight container. It will keep fresh for two days

Nutrition Information:
Per Serving: 90 calories, 8 grams protein, 5 grams fat (1 gram saturated), 20 mg cholesterol, 2 grams carbohydrate, 0 gram fiber, 105 mg sodium

*From Smooth Foods recipe booklet by Chef Dave Fonts and Vicki Bovee, MS, RD (available at www.imetabolic.com).
Stage 4 - Soft Foods Diet for Days 14 – 28 After Surgery

You may now add soft, whole foods. You may need to chop, dice, or grind meat depending on tolerance. These foods should be soft and easy to chew. They should be easy to mash with a fork.

- **Your servings should be about ¼ cup – ½ cup per meal. Use standardized measuring cups to determine portion size.**
- Cut food into SMALL pieces (about the size of a dime).
- Chew, chew, chew. Chew each bite 20-30 times.
- Experiment with solid foods. Try one new food at a time.
- Always put protein first and include protein at every meal.
- Food should be moist.
- Eat 3 small meals and 2-3 small snacks per day.
- Eat only when you are hungry. Other times, drink low calorie beverages.
- **DO NOT EAT AND DRINK AT THE SAME TIME.** No beverages 30 minutes before you eat and 30 minutes after you eat.
- Aim for 64 fluid ounces of water or zero-calorie beverage each day. Sip, sip, sip.
- Eat to the point of when you are starting to feel full. Stop eating before you are full.
- Take your vitamin and mineral supplements daily.
### Stage 4 - Soft Foods Diet for Days 14 – 28 After Surgery

<table>
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<tr>
<th>FOODS</th>
<th>ALLOWED</th>
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<td>Protein</td>
<td>Diced or ground meat, chicken, turkey</td>
<td>Fried meats, fish, or eggs</td>
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<tr>
<td></td>
<td>Fish</td>
<td>High fat meats like sausage, hot dogs</td>
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<td></td>
<td>Eggs</td>
<td>Fish sticks</td>
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<td>Egg substitute</td>
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<td>Low fat cottage cheese</td>
<td>Poultry skins or tough meats</td>
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<td>Light yogurt</td>
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<td></td>
<td>Plain nonfat yogurt</td>
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<tr>
<td></td>
<td>Tofu</td>
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<td></td>
<td>Textured vegetable protein (TVP)</td>
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<td></td>
<td>Veggie burgers, veggie breakfast sausage patty</td>
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<td>Protein supplement drink</td>
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<td>Nonfat or 1% milk</td>
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<td>Carbohydrates</td>
<td>Cooked or low sugar dry cereal without nuts and/or dried fruit</td>
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<td>Potato without skin</td>
<td>Rice</td>
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<td>Whole wheat toast or rye toast (eat with protein food)</td>
<td>Pastry, baked goods, donuts, biscuits</td>
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<td></td>
<td>Wheat crackers or soda crackers (eat with protein food)</td>
<td>Bran cereals, whole grain crackers</td>
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<td>Pretzels, popcorn, snack crackers</td>
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<td>Fruits</td>
<td>Unsweetened canned fruits</td>
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<td>Soft fruits as tolerated (banana, watermelon, cantaloupe)</td>
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<tr>
<td>Vegetables</td>
<td>Soft cooked fresh, frozen, or canned vegetables without sauces</td>
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<td>Vegetable juice (limit 6 oz./day)</td>
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<td>Fats</td>
<td>Small amounts butter, margarine, or oil</td>
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<td>Regular fat mayonnaise, salad dressings, cream cheese, sour cream,</td>
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<td>peanut butter</td>
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<td>Bacon</td>
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<td>Soups</td>
<td>Soups prepared from allowed foods</td>
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<td>Herbs and spices as tolerated</td>
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<td>Low fat, sugar free non-dairy creamers</td>
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<td>Artificial sweeteners</td>
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<tr>
<td></td>
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</tbody>
</table>
Sample Menu for Stage 4 Soft Foods:

Breakfast: 6 fluid ounces protein supplement drink
Snack: ¼ cup low fat cottage cheese
Lunch: ½ cup vegetarian canned refried beans sprinkled with 2 teaspoons reduced fat cheese and warmed in the microwave topped with 1 teaspoon salsa
Snack: 4 fluid ounces protein supplement drink
Dinner: 1 serving Home-Style Hamburger Skillet* (recipe below)
Snack: ½ cup watermelon cubes

Home-Style Hamburger Skillet*

4 servings

Ingredients:
½ pound lean ground beef
1 - 16 ounce can low sodium cut green beans, drained
1 - 16 ounce can no salt added canned potatoes, drained, sliced thin
1 - 14.5 ounce can no salt added diced tomatoes
¼ cup green onion, chopped
½ teaspoon garlic powder
½ teaspoon onion powder
Pepper to taste

Directions:
1. Heat a large non-stick skillet over medium high heat.
2. Add ground beef and cook until no longer pink.
3. Add vegetables and seasonings to skillet and heat through.

Nutrition Information:
Per Serving: 210 calories, 15 grams protein, 6 grams fat (2.5 grams saturated), 35 mg cholesterol, 25 grams carbohydrate, 6 grams fiber, 270 mg sodium

* From Soft Foods recipe booklet by Chef Dave Fonts and Vicki Bovee, MS, RD (available at www.imetabolic.com).
Regular Food Diet for Life

Your plan for a lifetime of healthy eating should include a balanced diet of high quality protein, vegetables, fruit, whole grains, and healthful fats. You have probably noticed that your tastes have changed even though your surgeon did not operate on your taste buds. Some of those high sugar, high fat foods you loved before surgery may not appeal to you anymore. As the months go by after your surgery, you may find you are able to tolerate more foods than you could during the first six months. You need to make a commitment to change eating habits FOREVER, not just until you have lost the excess weight.

The diet principles can be summarized by emphasizing the concept of “protein first”. This means think about preparing some form of protein (legumes, lean fish, cottage cheese are examples) as the first part of your meal. After years of helping thousands of people choose healthy foods and delicious recipes, Chef Dave Fouts and Vicki Bovee MS, RD put the best foods in the world into a cookbook for weight loss surgery patients called *90 Ways to Ditch Your Diet* (360 Publishing, available at [www.imetabolic.com](http://www.imetabolic.com)). Check it out and let us know what you think!

The keys to success for your long term diverse and enjoyable diet are summarized in the points below:

- **Your servings should be about ½ - 1 cup per meal.**
- Eat 3 small meals and 1 - 3 small snacks each day.
- Chew, chew, chew. Chew each bite 20-30 times.
- Always put protein first, include protein at every meal. Your goal is at least 65-85 grams of protein each day.
- Choose fruits and vegetables and whole grains to complete your meals.
- Eat only when you are hungry. Other times drink zero-calorie beverages.
• DO NOT EAT AND DRINK AT THE SAME TIME. No beverages 30 minutes before you eat and 30 minutes after you eat.

• Aim for a minimum of 64 fluid ounces of water or low calorie beverage each day.

• Eat to the point of when you are starting to feel full. Stop eating before you are full.

• Take your vitamin and mineral supplements daily.

"Desire is the key to motivation, but it's the determination and commitment to an unrelenting pursuit of your goal - a commitment to excellence - that will enable you to attain the success you seek."

- Mario Andretti - Race Car Driver
## Regular Food Diet for Life

<table>
<thead>
<tr>
<th></th>
<th>ALLOWED</th>
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<td><strong>Protein</strong></td>
<td>Meats, chicken, turkey, fish, eggs, egg substitute, low fat cheese,</td>
<td>Fried meats, fish, or eggs, high fat meats like sausage, hot dogs,</td>
</tr>
<tr>
<td></td>
<td>low fat cottage cheese, light yogurt, plain nonfat yogurt, shellfish,</td>
<td>fish sticks, spicy meats, poultry skins or tough meats, *Avoid pieces</td>
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<td></td>
<td>tofu, textured vegetable protein (TVP), veggie burgers, veggie breakfast</td>
<td>of red meat like steak for 6 months, 2% or whole milk.</td>
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<td>sausage patty, protein supplement drink, nonfat or 1% milk</td>
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<tr>
<td><strong>Carbohydrates</strong></td>
<td>cooked or low sugar dry cereal without nuts or dried fruit, potato</td>
<td>white flour breads, pasta, tortillas, white rice, pastries, baked</td>
</tr>
<tr>
<td></td>
<td>without skin, whole wheat or whole grain breads, cereals, tortillas,</td>
<td>goods, donuts, biscuits, pretzels, snack crackers, any starchy food</td>
</tr>
<tr>
<td></td>
<td>English muffins, brown rice, whole wheat pasta, whole grain crackers,</td>
<td>made from refined flours and/or added sugar, avoid popcorn for 6</td>
</tr>
<tr>
<td><strong>Fruits</strong></td>
<td>unsweetened canned fruits, soft fruits as tolerated</td>
<td>months.</td>
</tr>
<tr>
<td><strong>Vegetables</strong></td>
<td>soft cooked fresh, frozen, or canned vegetables without sauces, raw</td>
<td>any vegetables that are fibrous or have tough skins or seeds such as</td>
</tr>
<tr>
<td></td>
<td>vegetables as tolerated, vegetable juice (limit 6 oz./day)</td>
<td>corn, celery, asparagus, artichokes, cauliflower, broccoli, cabbage</td>
</tr>
<tr>
<td><strong>Fats</strong></td>
<td>small amounts butter, margarine, or oil, low fat or nonfat mayonnaise,</td>
<td>regular fat mayonnaise, salad dressings, cream cheese, sour cream,</td>
</tr>
<tr>
<td></td>
<td>salad dressings, cream cheese, sour cream, peanut butter, bacon</td>
<td>peanut butter in small amounts</td>
</tr>
<tr>
<td><strong>Soups</strong></td>
<td>soups prepared from allowed foods</td>
<td>soups with pasta, rice or made with heavy creams.</td>
</tr>
<tr>
<td><strong>Misc.</strong></td>
<td>salt and pepper, herbs and spices as tolerated, low fat, sugar free</td>
<td>alcohol, seeds, candy, ice cream, honey, sugar, syrups, jams, avoid</td>
</tr>
<tr>
<td></td>
<td>non-dairy creamers, artificial sweeteners, mustards, vinegar</td>
<td>nuts for 6 months.</td>
</tr>
</tbody>
</table>
Sample Menu for Life

Breakfast: 1 slice whole wheat toast, 1 tablespoon peanut butter, ½ small banana
Snack: 1 piece reduced fat string cheese
Lunch: 3 ounces chicken salad made with low fat dressing with ½ peeled, chopped apple
Snack: 8 baby carrots
Dinner: 1 serving Sierra Primavera with Orange Roughy* (recipe below)
Snack: 1 cup sliced strawberries with 1 tablespoon low fat whipped dessert topping

Dinner- Sierra Primavera with Orange Roughy*

Serves 4

Ingredients:
4 ounces whole wheat pasta, uncooked
1 tablespoon olive oil
½ teaspoon salt
1 clove garlic, minced
½ medium red onion, chopped
2 cups zucchini, chopped
1 pound orange roughy
2 cups fresh tomatoes, chopped
¼ teaspoon red pepper flakes
¼ cup nonfat milk
¼ cup parmesan cheese, grated
2 tablespoons fresh parsley, chopped fine

Directions:
1. Prepare pasta according to package directions; drain.
2. Heat the oil in a large skillet.
3. Add the garlic, red onion and zucchini and cook over medium-high heat until the garlic and onion are golden.
4. Reduce heat to medium and add the orange roughy, tomato, red pepper flakes, and nonfat milk and let simmer for 10 minutes.
5. Stir in cheese.
6. Add the pasta and parsley and mix thoroughly.

Nutritional Information (Per Serving):
290 calories; 29g protein; 7g fat (1.5g saturated); 75mg cholesterol; 30g carbohydrates; 4g fiber; 520mg sodium

*From 90 Ways to Ditch Your Diet by Chef Dave Fouts and Vicki Bovee, MS, RD (available at www.imetabolic.com).
Meeting Fluid Needs

Water is a main part of all body tissues. Every body cell, tissue, and organ needs water. An adult man’s body weight is about 60% water and an adult female’s body weight is about 55% water. A person can survive for months without food, but only days without water. Ideally, water should be your main source of liquid. Other fluids consumed should be free of calories, sugar, carbonation, and alcohol. It is also important that you **SIP** any liquid that you consume. You can no longer gulp or chug liquids without the risk of vomiting.

You must drink a minimum of 64 ounces of fluid per day. The first few weeks or months after surgery, it will be difficult for you to drink this much fluid. Take your water bottle with you wherever you go so you can sip, sip, sip between meals.

Coffee is not recommended in the first month because the coffee bean itself has the potential to be an irritant. Caffeine and alcohol are diuretics, meaning they lead us to lose body water. Caffeine is also an irritant and therefore, decaffeinated tea is your best choice in the first month.

Sometimes after surgery when you wake up in the morning, your stomach pouch may feel unsettled. This may be from body fluids that collect in your pouch overnight. Sipping a warm beverage, such as decaffeinated tea or warm water, can help calm your pouch.

**Beverage Do’s And Don’ts**

- Drink a minimum of 64 ounces of fluid per day from non carbonated, zero-calorie beverages.
- **SIP, SIP, SIP.** Drink beverages slowly to avoid discomfort and vomiting.
- No straws. You can suck up too much air and cause discomfort.
- No beverages 30 minutes before you eat. If you have fluid in your pouch, you will not have enough room for the food you need to eat.
- Never drink liquids while eating a meal.
- No beverages for 30 minutes after you have eaten.
  - The food needs to sit in your pouch to digest so your body can absorb the nutrients when it leaves the pouch.
• If you drink too soon after eating, you will push the food through faster and you will get hungrier sooner.

• Pushing the food through too quickly can cause the opening from the pouch to your intestine to stretch and the food will pass more quickly allowing you to eat too large of portions as time goes on.

• Carbonated drinks should be avoided, even sugar free versions. The bubbles in the soda are gas bubbles. When they warm up to body temperature, they expand and create pressure inside the pouch, causing upset stomach for many people.

• Beverages containing caffeine should be consumed in limited amounts.

• Avoid electrolyte drinks, flavored sweetened coffee drinks, sweetened teas, commercial fruit smoothies, regular hot cocoa, and fruit juices. These beverages may cause dumping syndrome.

• Strictly limit alcoholic beverages (this means less than 4 ounces of wine allowed in a day, and no hard liquor). Alcoholic beverages are high in calories and are absorbed much more quickly after surgery. If they are sweet, drinking them may cause dumping syndrome from the sugar, and add a lot of hidden calories and weight gain.

**NEVER DRINK AND DRIVE!**

**Between Meal Fluids – Zero or Low Calorie**

• Water

• Broth

• Sugar Free Kool Aid

• Diet iced tea (Snapple, Arizona)

• Sugar Free Jello

• Decaffeinated coffee

• Crystal Light

• Propel

• Sobe Lean

• Special K & South Beach Living flavor sticks

• Sugar Free Popsicles

• Herbal tea
Common Problems and Helpful Solutions

Nausea and Vomiting

- Check portion sizes to make sure you are not overfilling your pouch.
- Take small bites and chew 20 - 30 times.
- Eat slowly, 20 - 30 minutes per meal.
- Do not drink beverages 30 minutes before, during, and 30 minutes after eating.
- Sip beverages slowly.
- Follow the guidelines for diet progression.
- Don’t add more than one new food at the same time or more than a couple of new foods on the same day.
- Avoid high sugar and/or high fat foods.
- Call your practitioner if nausea and vomiting persists.

Food “Sticking”

- Prevention is the best medicine.
- Take small bites.
- Chew each bite 20-30 times.
- If you have chewed the food 30 times and it is not semi-liquid, DO NOT swallow it.
- Avoid stringy meat fibers like steak, pork, ribs, and dry chicken.
- Avoid fibrous vegetables like celery, asparagus stalks, broccoli stalks, potato peels, or artichokes.
- Avoid fibrous fruits like fruit skins or peels, fresh citrus membranes, or fresh pineapple.
- Avoid white flour products like white bread, white flour tortillas, white pasta, or white rice.
- If food is stuck, get up and walk around.
- Do NOT drink water to try and push it through.
- If you do have a “food sticking” event, avoid solid foods for approximately 12 – 24 hours to help prevent edema (swelling) or gastritis.
Belching

- Sip beverages slowly.
- No straws.
- Take small bites and chew 20 - 30 times.
- Eat slowly, 20 - 30 minutes per meal.

Dehydration

- Strive for a minimum of 64 fluid ounces each day. It may take you several weeks after surgery to reach this amount.
- Carry your water bottle with you so you can sip in between meals and snacks.
- Keep a glass of water or another low calorie beverage on your desk or next to your chair.
- If you do not like the taste of plain water, add a slice of fresh lemon or lime to flavor it.
- Limit caffeinated beverages.
- Do not over salt foods.
- Limit processed foods since they are usually high in sodium.

Constipation

- You should have a bowel movement every 1 - 3 days.
- Choose higher fiber foods. Beans, fruits, vegetables, and whole grains are your best sources of fiber.
- Drink plenty of water or other low calorie beverages.
- Walk or participate in some other physical activity daily.
- Add a fiber supplement, such as Benefiber or Metamucil, that you stir into water or food rather than a fiber pill.
- Try Kellogg’s All Bran Fiber Drink, 10g per packet (comes in lemonade or iced tea flavor).
- Try Miralax or Milk of Magnesia if these recommendations do not work for you.
- If you are unable to move your bowels after trying all of these suggestions, call the office.
**Diarrhea**

- Avoid high fat, greasy foods.
- Avoid high fiber foods.
- Limit milk and milk products.
- Call your practitioner if you are having four or more loose bowel movements daily.

**Excess Gas**

*This is often related to food intake.*

- Keep a food record to determine which foods are causing problems. Typical foods that can cause excess gas are: broccoli, cauliflower, cabbage, beans, milk, and sugar alcohols.
- Try Gas-X or another simethicone product.
- Walk more.

**Dumping Syndrome**

Not all gastric bypass patients will experience dumping syndrome. Dumping syndrome occurs when you eat something high in sugar, or in a few cases, high in fat. Usually patients who experience dumping syndrome will have a lessening of symptoms over time but may always remain sensitive to certain foods.

When you eat foods that are high in sugar, your pouch cannot digest them sufficiently. The food gets “dumped” into your intestine and this creates a reaction in the intestine as sugars are absorbed into the bloodstream. Your body rushes fluid to the intestine to get rid of the food.

Symptoms will usually start within 10-15 minutes of eating and can include:

- Heart palpitations
- Chills
- Sweating
- Weakness
- Lightheadedness
- Nausea
• Abdominal cramping
• Vomiting
• Diarrhea

Dumping can last from 20 minutes to several hours. There is nothing you can take to make it go away. Chances are you may never eat the food again that caused you to “dump.”

Following are some tips to help you avoid “dumping:”

• Avoid foods high in sugar: cakes, pastries, frosting, candy, ice cream, brownies, cookies, jams and jellies, fruit juices, sweetened coffee drinks, hot chocolate, commercial fruit smoothies, or ready-to-serve meal replacement drinks.
• Check the nutrition information on the food label, less than 12 grams of sugar per serving.
• Watch out for hidden or added sugars. Foods like barbeque sauce, sweet pickle relish, or sweet and sour foods all contain higher amounts of added sugars and can cause problems.
• Check the list of ingredients for added sugars such as: corn syrup, corn syrup solids, high fructose corn syrup, honey, molasses, sugar, and dextrose.
• Avoid high fat foods, fried foods, commercially prepared creamed soups, sauces, and gravies, full fat regular mayonnaise, salad dressings, sour cream, and cream cheese.

Lactose Intolerance

Some patients will become lactose intolerant, or unable to tolerate some dairy products, after surgery. This may get better as time goes on. Symptoms of lactose intolerance may include: abdominal cramping, gas, and/or diarrhea.

• Keep a food journal to determine if milk products are the cause of your discomfort.
• Avoid milk and milk products.
• Yogurt and reduced fat cheeses may be tolerated in small amounts.
• Try fortified unsweetened soy milk.
• Use soy-based or whey protein isolate protein drinks.
• Try Lactaid® brand milk or use Lactaid® supplements when drinking milk.
Food Intolerances
You will find that your tastes have changed since gastric bypass surgery. It is normal to lose the desire or taste for some foods that you ate before surgery.

- Some foods will not “set well” and may cause discomfort for several hours.
- Add new foods in one at a time.
- When adding a new food, try only a few bites.
- If possible, try new foods at home.
- Follow the guidelines for the diet progression. Practice patience. Rushing to add in new foods too quickly can cause rushing to the bathroom.

Hair Loss
Some patients will experience hair loss after surgery. This can be upsetting but rest assured, you will not go bald. Hair thinning typically starts about 3 months after surgery and can continue for up to 6 months post-operatively.

- Make sure you are eating enough protein. Work up to 65 grams a day.
- Take all vitamin and mineral supplements as prescribed by your practitioner.

Plateaus
Plateaus are common and a part of the weight loss process. There is no predicted time for a plateau to occur, nor is there a set length of time for a plateau to last. Your body is adjusting to fewer calories and increased physical activity and needs time to normalize.

- Be sure you are eating enough calories. You can put your body into starvation mode by consistently eating too little.
- Keep a food journal and look at what and how much you are eating.
- Are your eating your protein first?
- Is it head hunger or stomach hunger? Are you eating for emotional reasons?
- How often are you eating? Are you grazing?
- Go back to shakes for snacks or for 1 - 2 meals a day.
- Get in regular physical activity. The goal is to walk 30 - 60 minutes a day or 150 minutes a week of moderate physical activity.
- Weigh yourself only once a week.
• Follow the “10 Rules” at the back of this booklet.
• Read more about overcoming postoperative plateaus and other techniques for successful weight loss at www.SasseGuide.com.
• Remember the scale doesn’t tell the whole story. Look at the other successes you might experience such as reduced joint pain, decrease in medications, less shortness of breath, tying your shoes, and many more.
• Attend a support group meeting to hear how others dealt with plateaus.

Vitamin/Mineral Supplements
After gastric bypass, you will need to take vitamin and mineral supplements for the rest of your life. Because of the surgery, food will be bypassing part of the small intestine where many vitamins and minerals are absorbed. Vitamins do not give you more energy but they help the body use the food you eat for energy. If you do not take your supplements regularly, you will develop vitamin and/or mineral deficiencies and some of these can have serious consequences. You will be asked to get your blood work done before you come in for follow up visits. It is important that you get this lab work about two weeks before your appointment. Your practitioner can review the lab work before your visit and make the necessary adjustments to your supplements if necessary. For more in-depth discussion of vitamin supplements and deficiencies, and a discussion of trace minerals related to gastric bypass surgery, visit www.SasseGuide.com.

The American Society of Metabolic and Bariatric Surgeons recommend the following:

Multivitamin-Mineral Supplement
• Chewable supplement that contains at least 200% of the Daily Value for at least 2/3 of the nutrients. You may have to take at least 2 tablets daily to meet the 200% Daily Value.
• Check to make sure your supplement contains folic acid, selenium, and zinc.
• Avoid time-released supplements.
• Avoid children’s supplements that are incomplete.
• Take with food.
• If the multivitamin contains iron, do not take your calcium supplement within 2 hours of taking your multivitamin supplement.
• You may eventually be able to take supplements in pill form.

Vitamin B12 or B-complex
• Daily needs for sublingual: 350 mcg vitamin B12, 400 mcg folic acid
• Sublingual, or under the tongue, is best.
• Take a B complex supplement if possible.
• Good food sources of vitamin B12 are: meats, poultry, fish, milk, eggs, cheese, or yogurt.

Iron
• Daily needs: 18mg
• Check your multivitamin supplement. You may need to take an additional iron supplement if yours does not contain 18mg total for the day.
• Begin with chewable or liquid. You may be able to progress to a tablet.
• Take your iron supplement with a food high in vitamin C for better absorption. Foods that are high in vitamin C are citrus fruits, strawberries, leafy vegetables, tomatoes, broccoli, or green peppers.
• Do not take your iron supplement with a calcium supplement. You must take them at least 2 hours apart.
• Good food sources of iron are: meat, beans, egg yolks, enriched whole grains, fortified foods, soybeans, or dark green leafy vegetables

Calcium
• Daily needs 1500-2000 mg
• Take a calcium citrate supplement that contains vitamin D
• Take a chewable supplement. You may be able to progress to a tablet but it may need to be cut since some of the tablets are too large.
• Split into 500-600 mg doses throughout the day for best absorption.
• Do not take your calcium supplement with an iron supplement. You must take them at least 2 hours apart.
• Good food sources of calcium are: milk, cheese, yogurt, fortified drinks, and canned salmon or sardines with the bones.

Vitamin D

• Daily needs 800-1000 IU
• Your multivitamin supplement and calcium supplement should be sufficient.
• Do not take additional vitamin D supplements unless prescribed by your practitioner.
• Good sources of vitamin D are: sunlight on your arms and legs 10 minutes daily, fortified foods such as milk, salmon, sardines, egg yolk.

“The first wealth is health!”

- Ralph Waldo Emerson
Section 2

Nutritional Information
Protein

It is important to focus on eating protein first after surgery. Protein is an essential part of all cells and tissues in the body. It is necessary for healing, replacing worn out cells, building new cells, and maintaining a healthy immune system. If you don’t eat enough protein, your body will breakdown muscle and lean body tissue to get the protein it needs for all the jobs it does.

Maintaining your muscle mass by eating enough protein will help you with your weight loss. Muscle tissue burns more calories than fat burns so eating enough protein to keep your muscle mass will help you burn calories throughout the day.

We recommend eating at least 65 - 85 grams of protein daily. For larger people with a greater lean body mass (larger men for example), the desired protein target is higher, in the 80-110 grams per day range. Talk to your doctor about a desired target range for you, and visit www.SasseGuide.com to learn more about protein and the best amount of protein for your body.

Your long term goal is about 30% of your daily calories should come from protein. In the beginning, however, you will most likely not be able to eat this much protein because your portion sizes are very small. It is usually best to continue with a protein shake 1 - 2 times a day until you are able to eat enough protein from solid foods. And remember, most of the doctors and nurses at WBI have one of the protein shakes at least once a day as part of their ongoing weight maintenance effort.

Best Sources of Protein (about 7 grams per ounce):

- Fish, seafood
- Chicken, turkey
- Beef, pork
- Eggs, egg substitute
- Low fat cheese
- Nonfat, 1%, or soy milk (8 fluid ounces)
- Low fat cottage cheese (¼ cup)
- Protein shakes and bars
Good Sources of Protein:
- Beans, legumes
- Soy, tofu
- Meat substitutes such as Boca Burgers, Morningstar Farm products, Garden Burgers
- Nuts, nut butters, and seeds - they are high in fat so you need to limit portion size

Poor Sources of Protein:
- Grains, cereal products
- Fruits, vegetables
- Fats, oil, salad dressings

**Refer to the Regular Diet section for protein foods to avoid.

Protein Shakes, Bars, and Supplements
Protein shakes can help you meet your daily protein requirements after surgery. Your protein goals are 65 - 85 grams a day. It may take you a few weeks or months to meet this protein goal with eating all solid foods. Protein shakes can increase your protein intake until you can meet the requirements with food only.

A protein shake can help you meet your daily fluid requirements of at least 64 fluid ounces per day as well. Just remember to wait 30 minutes after drinking your shake before you start sipping other fluids.

Listed below are some of the types of protein most often used for protein shake supplements:

Milk Proteins
- Whey powder comes from taking the whey, the watery portion, out of the milk during cheese production. The fat is removed and the whey is dried.
- Whey protein concentrate is filtered whey that takes out most of the lactose. Most products are at least 80% protein.
• Whey protein isolate are about 90% protein concentrate. More lactose and fat is removed than from whey protein concentrate. People who are lactose intolerant can usually use this type of protein without side effects.

• Casein is the major protein found in milk. It is absorbed slower than whey.

• Hydrolyzed proteins have the proteins broken down into smaller protein chains which make them easier to digest and are more easily absorbed.

Soy Protein

• Soy protein isolate is made from defatted soy meal. Most of the fat and carbohydrates are removed. Most products are 90% protein.

Protein Shakes

There are many protein drinks on the market to choose from. Many are powdered and can be mixed with water, milk, low lactose milk, or soy milk. If you are mixing the protein powder with milk or soy milk, remember to add the grams of protein from the milk beverage to the total protein grams for your shake.

In general, look for a protein shake that has:

• 10 grams or more of protein per 100 calories
• 3 grams of fat or less per 100 calories
• Less than 12 grams of sugar per serving

Protein Bars

Protein bars can be used as a “take along” food for busy days, while traveling, or just for an easy snack. Although all bars will contain some protein, most of them are not a “protein” bar. Some of them are more like a fortified candy bar because they contain a lot of sugar and may cause dumping syndrome. Check the nutrition information on the food label!

In general look for a protein bar that has:

• 15 grams or more of protein
• Less than 230 calories
• Less than 12 grams of sugar per serving
For more discussion of protein bars and shakes, their nutritional content, and reviews of them, visit [www.imetabolic.com](http://www.imetabolic.com).

**Unflavored Protein Supplements**

After surgery, some people have a difficult time drinking a protein shake for different reasons. Tastes change and something that tasted fine before surgery tastes awful now. Sometimes people have a difficult time with the smell or odor of the protein shakes. Others may have a problem tolerating a protein bar.

There are odorless, flavorless protein powders that can be stirred or mixed into food. Another advantage to these products is that they do not increase the volume of the food, important when you have a small pouch with limited holding capacity. These powders need to be added to foods that are cold, room temperature or after heating. Adding it to the food before heating will cause the protein powder to clump while cooking and it will denature the protein.

Several high quality unflavored protein powders are:

- iMetabolic unflavored
- Unjury unflavored
- Any Whey
- Beneprotein
- Metagenics BioPure Protein
Carbohydrates

Carbohydrates, or “carbs”, are your body’s preferred, fastest source of energy. Your body can break down carbs for energy faster than it can utilize protein or fat. Your body needs carbs every day to feed your brain and to fuel your muscles. Initially, you will be eating a very limited amount of carbohydrates because you will be focusing on eating your protein first. Long term recommendations are about 40 - 45% of your daily calories should come from carbohydrates. If you are eating 1200 to 1500 calories per day, that equals 120 to 165 grams of carbohydrates.

There are two kinds of carbohydrates: complex carbs, or starches and fiber, and simple carbs, or sugars.

Starches

Starches can be whole grain or refined products. Avoid refined white flour refined foods such as pasta, breads, rolls, and tortillas. They usually do not “set well” in the pouch, provide little to no fiber, and are stripped of valuable nutrients during the refining process. White rice can also create pouch discomfort since it can get gummy and expand in the pouch.

Starches to include in your meal plan include:

- Whole grain or whole wheat breads and rolls
- Whole wheat pasta
- Whole wheat tortillas
- Whole wheat couscous
- Barley
- Bulgur
- Quinoa
- Whole grain or bran cereals
- Oatmeal (avoid the prepackaged, sweetened kind)
- Sweet potatoes
- Winter squash
- Potatoes (avoid added fats)
Sugars

Sugars can be naturally occurring in food such as milk and fruit. These foods are good sources of nutrients and should be included in your meal plan. Foods that are refined or processed usually contain added sugars. These foods can be solid foods or beverages. **Added sugars can cause dumping syndrome and should be avoided.** Check the food label for the recommended 12 grams of sugar or less per serving. Unfortunately, the nutrition information on the food label will not tell you if the sugar is a natural sugar or an added sugar. If it is a processed food, you will need to read the list of ingredients to find the added sugars.

**Added sugars to avoid:**

- Brown sugar
- Corn sweetener
- Corn syrup, or corn syrup solids
- Dehydrated cane juice
- Dextrose
- Fructose
- Fruit juice concentrate
- Glucose
- High-fructose corn syrup
- Honey
- Invert sugar
- Lactose
- Maltodextrin
- Malt syrup
- Maltose
- Maple syrup
- Molasses
- Raw sugar
- Rice Syrup
- Sorghum or sorghum syrup
- Sucrose
Natural sugar foods to include in your meal plan:

- Fresh fruits - fruit peels and citrus membranes may cause problems
- Frozen fruit without added sugar
- Fruit canned in water
- Nonfat or 1% milk
- Light or plain nonfat yogurt

Fiber

Fiber is a substance that is found only in plant foods: fruits, vegetables, beans, legumes, grains, and cereals. Constipation can be a problem after surgery and consuming enough fiber can help keep you regular. Higher fiber diets have also been found to help lower cholesterol, help control blood sugar, and help protect against certain cancers. Daily recommendations are 14 grams of fiber per 1000 calories. If you are eating 1200 to 1500 calories a day, you need to eat 17 - 21 grams of fiber daily.

High fiber foods to include in your meal plan:

- Dried beans, lentils
- Bran cereals
- Shredded wheat cereals
- Fruit
- Vegetables
- Whole grain or whole wheat bread, pasta, tortillas
**Fats**

Fats supply energy and essential fatty acids and aid in absorption of vitamins A, E, D, and K. Fats are part of a healthful diet but the type of fat makes a difference to heart health. High intakes of saturated fats, trans fats, and cholesterol increases the risk of coronary heart disease. **Foods that are high in fat can cause dumping syndrome.** Long term recommendations are 25 - 30% of your total daily calories should come from fat. If you are eating 1200 to 1500 calories per day, that equals 27 to 50 grams of fat.

Saturated fats and trans fat are the “bad” fats because they promote plaques on the arteries and raise your triglyceride and cholesterol levels. **Foods to avoid:** snack foods using saturated oils, whole milk, butter, cream cheese, cream, ice cream, whole fat cheeses, poultry skin, high fat animal meats, coconut oil, palm oil, commercially prepared baked goods and fried foods.

Polyunsaturated fats are a healthier fat because they may help lower harmful LDL cholesterol and total cholesterol. Foods to include in limited amounts: vegetable oils, walnuts, or flaxseed. The American Heart Association recommends eating fish (salmon, trout, or herring are best) or shellfish twice a week.

Monounsaturated fats are the healthy fats because they help lower LDL and total cholesterol. These fats may also help raise the “good” HDL cholesterol. Foods to include in limited amounts: olive oil, canola oil, peanut oil, olives, nuts, peanut butter, or avocados.

**Cholesterol**

Cholesterol is a waxy substance found in your bloodstream and your body’s cells. Your body manufactures its own cholesterol to produce cell membranes and certain hormones. You also get cholesterol from the foods you eat. The American Heart Association and the Dietary Guidelines for Americans 2005 recommends no more than 300mg of cholesterol daily. Cholesterol is found in animal products such as meat, eggs, poultry, fish, butter, cheese, whole and 2% milk. Cholesterol is not found in food from plants.
**Sodium**

Almost all Americans consume more sodium daily than they need. Decreasing salt intake helps reduce the risk of high blood pressure. Keeping blood pressure within normal range reduces your risk of coronary heart disease, stroke, congestive heart failure, and kidney disease. The Dietary Guidelines for Americans 2005 recommends no more than 2300mg (about 1 teaspoon) sodium daily. The amount of salt you add at the table accounts for only 5 to 10% of your total intake. About 75% of your daily sodium intake comes from food manufacturers in processed foods and restaurant foods.

**Alcohol**

After surgery, you will not be able to consume alcoholic beverages like you did before surgery. The effects of alcohol will hit you faster and last longer than before surgery. One drink can raise your blood alcohol limit high enough to put you at risk for a DUI.

Should you decide to drink alcohol after surgery, keep the following in mind:

- Wait as long as possible after surgery before having your first drink.
- Alcohol is high in calories and provides no nutritional value. The sweet drinks like margaritas and daiquiris have lots of sugar in them and will cause dumping syndrome.
- Have your first drink at home so you can determine how the alcohol will affect you.
- Alcohol does not count towards your fluid intake for the day. It is dehydrating so you will need to drink more water when you drink alcohol.
- Red wine in small amounts, around 2 ounces per day, may benefit health, but almost all other alcohol just adds calories with no benefit.
- **NEVER DRINK AND DRIVE!**
**Nutrition Labels**

In 1990, The Nutrition Labeling and Education Act was enacted to provide nutrition information for packaged foods. The FDA and USDA have added new regulations over the years and all food labels are required to provide the same information to the consumer. The labels have a lot of information included and it can be confusing.

**What Do You Need To Know?**

**Serving Size**

The information on the label is for one serving. Check the number of servings per package since many packages will contain more than one serving even though the item may look like it should be one serving. After surgery, you may be eating the serving size on the package or less. When you are comparing calories and nutrients between brands, be sure to check if the serving size is the same.

**Calories**

Calories count so pay attention to the amount. Remember the amount of servings you eat determines the amount of calories you actually eat.
Total Fat
You will want to check the amount of fat in the food you are eating since eating high fat foods can cause dumping syndrome. Look at the % Daily Value for fat. 5% DV means it is a low fat food. 20% or more means it is a high fat food. Choose foods that are less than 20% total fat.

Carbohydrates
Foods that are high in carbohydrates can be healthy choices. Whole grains, fruits, vegetables, dried beans, and dairy products are carbohydrates foods that are good for you. What you need to look at is the fiber and sugar content of the food.

Dietary Fiber
If it comes from a plant, it must have fiber. Foods that come from plants and have zero fiber on the food label have been refined and processed to remove the fiber. This also means other nutrients have been removed as well. The white flour products such as bread, pasta, tortillas, and white rice typically do not work well after surgery. Because they lack fiber, they tend to get gummy, lump in the pouch, and do not “set well.”

Sugar
Nobody wants dumping syndrome and one of the best ways to avoid it is to read the food label. Choose foods that have less than 12 grams of sugar per serving. Natural occurring sugar such as lactose in milk and yogurt or sugar found in fruit will not usually cause you to dump. You will need to read the list of ingredients to find the added sugars which may cause you problems. (See the list in the beginning of this section.)
Portion Sizes

A serving and a portion are not the same thing. A serving is a standard amount of food and a portion is the amount you decide to eat. Right after surgery, it is easy to put too much food on your plate because you have been accustomed to eating larger portions. Your portion sizes will be much smaller after surgery.

Putting too much food in the pouch will cause nausea, discomfort, and even vomiting after surgery. Your eyes and head may be telling you to eat more but your pouch won’t want it. It is important that you measure out your food to learn the right amount of food to be eating. Use standardized measuring cups and spoons and/or a food scale. Do not use the dishes and utensils you eat with for measuring as they are much larger than the standard tools.

Tips to keep your portions in line:

• Measure out the food before you put it on your plate.
• Use smaller plates so your eyes don’t speak for your pouch.
• Eat from the measuring cup or another measured dish. You can find 1 cup custard dishes or ramekins in the houseware section of discount stores.
• Use baby dishes. The bowls are usually 1 cup. The plates are divided into smaller portions.
• Use a food scale to weigh out cooked meat, fish, or poultry. Your portion should be about 1 to 3 ounces.
• Use sushi dishes. The rice bowls are usually 1 cup and the plate will hold only a small amount of food.

You can also use everyday objects to determine portion sizes.

• Use your hand to determine your portion:
  o A handful is about ¼ cup.
  o A fist is about 1 cup.
  o The palm of your hand is about 3 ounces.
  o The end of your thumb to the first joint is about 1 tablespoon.
  o Your thumb from tip to second joint is about 2 tablespoons or 1 ounce.
Use common objects to determine your portion:
  o A deck of cards is about 3 ounces.
  o A tennis ball is about ½ cup.
  o A baseball is about 1 cup.
  o A ping pong ball is about 2 tablespoons.
  o A die is about 1 teaspoon.

“Be specific in what you want and use specific words. Empower yourself and become the person you dream about!”

- Anonymous
Section 3

Food Preparation
Cooking Methods & Food Preparation

Cooking methods are important in food preparation following your gastric bypass surgery. Your protein intake, particularly from high quality meats, can be significantly increased by learning how to properly cook and prepare various types of meats to make them moist and tender.

Dry Cooking Methods

Dry cooking methods are recommended when cooking meats and include the following: sauté, rotisserie, grilling, broiling, roasting, and baking. Sauté and rotisserie are the two methods recommended for cooking meats and fish in the first three months after your surgery when you may experience the most difficulty swallowing and digesting foods.

- **Sauté** – To cook food in a preheated pan or griddle with a minimum of fat
- **Rotisserie** – To cook food in dry heat while food is rotating
- **Grilling** – To cook food from heat below
- **Roasting** – To cook food in dry heat with the aid of fat
- **Broiling** – To cook food from heat above
- **Baking** – To cook food in an oven by dry heat applied evenly throughout the oven

To *sauté* food, cook it in a preheated pan or griddle with a minimum amount of fat. This method of cooking is an easy and preferred procedure because cooking time is short (normally under seven minutes) and because there are few guidelines that need to be followed.

1. When sautéing meat or fish, make certain the piece that is to be cooked is no more than ½ inch thick. If meat is thicker than ½ inch, the outside may burn while the inside remains uncooked.
2. It is important that the pan is heated before food is placed in the pan. Preheating the pan ensures that meat is cooked quickly and retains its moisture.
3. NEVER walk away while cooking is in progress. The sauté method requires only two to seven minutes to complete and overcooking reduces moisture, making food difficult to swallow and digest.

**Rotisserie** cooking is another cooking method that helps to retain moisture in meat and makes it easier to eat in the first few months after your surgery. Rotisserie involves cooking food over a
dry heat while the food is constantly rotating. Rotisserie cooking devices are available for purchase and generally require little effort, other than time, for food preparation. However, most grocery stores and many restaurants sell rotisserie-cooked meats, making such moist and tender foods easily available for your consumption.

**Moist Cooking Methods**

Moist cooking methods include pan frying, stewing, braising, poaching and boiling. Moist cooking techniques are rarely used to cook meats, such as poultry, beef, lamb or pork, because these techniques will cause your food to be chewy and tough. On the other hand, moist cooking methods, such as poaching and steaming, are very effective in maintaining the tenderness of fish and seafood, although dry cooking techniques, such as grilling, are also helpful in maintaining moisture and providing tenderness to seafood and fish. One easy to remember rule to follow in choosing between moist and dry cooking methods is, “If it walks on land, dry cooking methods are recommended and if it lives in the water, moist cooking methods are recommended.”

- **Pan Frying** – To cook food in preheated fat or oil partially immersed
- **Stewing** – To cook small pieces of food at below simmering point with liquid
- **Braising** – To cook in a closed container with liquid in the oven or on top of the stove
- **Poaching** – To cook food in a liquid at a temperature below boiling, i.e. ~ 160° F
- **Boiling** – To cook in a liquid at 212°

**Seasonings**

Many foods, such as protein, need added flavor from seasoning. You may find after surgery that foods are bland and that additional seasonings are required. Added seasonings are also necessary to offset the blandness of well-chewed food. Remember that you will need to chew your food extremely well, up to 30 chews per bite. Seasoning helps to guarantee that the first bite of food is as flavorful as the last. After surgery, you may have to triple the amount of seasoning you used before surgery in order to keep foods from tasting
bland. Seasonings may include fresh herbs and spices, such as celery seed, cilantro, basil, chili powder, hot sauce, garlic and much more. Salt, particularly in large amounts, should be limited to avoid thirst and taking in too much sodium.

**Alcohol in Cooking**

The main reason alcoholic beverages are used in recipes is to add flavor. Alcohol causes many foods to release flavors that cannot be experienced without the interaction of alcohol. Alcoholic beverages in marinades also help break down tough meat fibers.

Alcohol not only evaporates without heat, but the majority also burns off during the cooking process. How much remains in the dish depends on the cooking method and amount of cooking time. Heat and time are the keys. Obviously, uncooked foods with alcohol will retain the most alcohol.

**Cooking with alcohol tips and hints** (**In most cases, you have to use your own judgment on substituting alcohol in recipes.**)

- Look at the main liquid of your recipe. Usually the main liquid ingredient can be increased to cover the amount of required alcoholic ingredient.
- If less than a tablespoon of alcohol is needed, it can be omitted although flavor will be different.
- Any variety of juices and/or tomato juice can often be substituted in marinades.
- Non-alcoholic wine or wine vinegar can be substituted for wine.
- Add a small amount of sugar substitute to imitate sweeter wines.
- Use non-alcoholic wines instead of cooking wine or sherry. It should be drinkable or don’t use it. All cooking wines and sherries are loaded with sodium, which detracts from flavor and adds a salty and vinegar flavor to the food.
- When using milk or cream in a sauce containing alcohol, make sure to burn off the alcohol before adding the cream or the sauce may curdle.
- If the alcoholic ingredient in the recipe is intended to be the main flavor and you must avoid alcohol, find another recipe. It just won't taste the same.
**Processed Foods**

Processed foods have been altered from their natural state for either safety reasons and/or convenience. The methods used for processing foods include canning, freezing, refrigeration, and dehydration.

Most tend to think of processed foods as bad, but some processed foods are healthy. For example, milk is a processed food because it is pasteurized to kill bacteria and homogenized to keep fats from separating. Another healthy example of food processing is frozen vegetables. While fresh may be best most of the time, freezing vegetables preserves vitamins and minerals and makes them convenient to cook and eat all year round.

Of course, there are a lot of processed foods that are not good choices. Most processed foods are made with trans fats, saturated fats, and/or large amounts of sodium and sugar. These types of foods should be avoided, or at least eaten sparingly.

**Processed foods that are not as healthy as fresh foods:**

- Canned foods with added sodium
- White breads and pastas made with refined white flour
- Packaged high-calorie snack foods, like chips and cheese snacks
- High fat convenience foods, like cans of ravioli
- Frozen fish sticks and frozen dinners
- Packaged cakes and cookies
- Boxed meal mixes
- Sugary breakfast cereals
- Processed meats such as hot dogs, bologna, and salami

These processed foods and prepackaged meals are very convenient and popular. If you do shop for these foods, be sure to look for products that are made with whole grains, low in sodium and calories, and free of trans fats. **Remember, fresh is best!**
Packing Lunches

Pack just the amount of perishable food that can be eaten at lunch. That way, there won't be a problem with the storage or safety of leftovers. Prepare the food the night before and storing the packed lunch in the refrigerator. Insulated, soft-sided lunch boxes or bags are best for keeping food cold, but metal or plastic lunch boxes and paper bags can also be used. If using paper lunch bags, create layers by double bagging to help insulate the food. An ice pack or frozen beverage should be packed with perishable food in any type of lunch bag or box to help keep the food cold.

10 Tips for Better Brown Bag Lunches

1. **Splurge**: If you are bringing your lunch to work, you are automatically saving money by not eating out. So make your food more enticing than the local fast-food chain's.

2. **Go Grilled**: Nothing adds more flavor than grilled foods. Add cold grilled meats, fish, and veggies to your bagged meals.

3. **Lunch Buddies**: Form a lunch group at work with five other people. On one day of the week, one person makes lunch for all. It's easier to make five of the same lunches at once than to make five different ones every morning. Plus, it adds variety (just make sure you all share the same tastes in food).

4. **Awesome Beverages**: Beverages are one of the most costly lunch items when purchased at a restaurant or even a vending machine. A number of canned and bottled beverages are now on the market, and cost less. Give your lunches some style with iced coffee, flavored sugar free lemonades, Crystal Light, Propel, or hot beverages such as sugar free spiced apple cider.

5. **Yuck…Soggy…**: If you are using moist vegetables or condiments, bag them separately.

6. **Condiments Galore**: Explore new condiments on your sandwich. Try pesto and herbed mayo.

7. **Don't Forget Your Lunch**: Drop your car keys in the bag. You'll never get to work without them!

8. **Wash Your Lunchbox**: Bacteria can grow anywhere, so be sure to clean your box or bag out regularly.
9. **Thermos**: A thermos is great for chilled or hot foods. Prepare your thermos by filling it with either iced or boiling water beforehand. It will help keep your foods at the correct temperature. Remember: keep hot foods hot and cold foods cold to avoid food poisoning.

10. **Nuts**: One of the most boring things about brown bag lunches is the lack of variety and texture. Adding a few nuts or sunflower seeds to salads, soups and even sandwiches makes for crunch appeal.

**Kitchen Supply List**

- Blender
- Mini food chopper (food processor)
- Paring knife
- Chef knife
- Serrated knife
- Cutting board
- Plastic spatula
- Whisk
- Mixing spoons
- Measuring spoons
- Measuring cups
- Scale to weigh food
- Meat thermometer
- Mixing bowls
- Colander
- 10 inch sauté pan
Section 4

New Eating Behaviors
Smart Snacking

Smart snacking is NOT hit-and-miss eating, grabbing what is handy, or running to the vending machine. Here are tips and strategies you can use to make the most of snack time:

- Don’t skip meals. You will be tempted to eat more than you planned because you are hungry.
- Plan ahead. Make sure your have good food choices available and carry them with you if you are out and about or traveling.
- Eat meals and snacks at set times. Having a structured eating schedule will make it easier for you to manage your weight.
- Stick to the appropriate portion sizes. Snacking does not mean “grazing” for an extended period of time on a buffet of foods.
- Beware of eating triggers, those things that lead you down the road of overeating or grazing. Triggers can include certain foods, the time of day, locations, or the people around you.
- Minimize access to foods that are hard for you to control.
- If you are hungry, choose foods that are higher in fiber and water or are more solid.
- Don’t eat foods directly from the box or bag. Measure out a portion size and put the rest away.
- For the first six months or until you are easily consuming 65 grams of protein daily, make an effort to include some protein at snack time.
- Fruits and vegetables can help you feel fuller with less calories, plus they are packed with lots of “good for you” nutrients.
- Eating tuna salad with crackers will be more filling than eating crackers alone.
- The best place to eat a snack is at the table. Eating in the car or in front of the computer or TV is usually mindless eating and leads to overeating.
- An increasing list of tasty protein-based snack treats are available at www.imetabolic.com.
Creating Your Safety Zone

The goal after surgery is to enjoy your food and to make eating a pleasant experience not only while you are losing weight but for a lifetime. It is necessary to change the eating habits you had before surgery to be successful after surgery. A good book on the subject has been written by Dr. Sasse and is called Doctor’s Orders: 101 Medically Proven Tips for Weight Loss Success, available in 2009 at www.imetabolic.com. At WBI, we emphasize ten important rules for your successful weight loss listed below. Creating your safe eating environment will make it easier for you to follow these rules for success:

- Limit the places you eat. We have trained ourselves to eat in front of the TV, in front of the computer, in the car, at our desk, everywhere but the kitchen table. Limiting your eating to the kitchen or dining room table will break those autopilot food associations that send messages to your brain telling you to eat.

- Make eating at the table a pleasurable experience.
  - Use colorful plates to make the meal more appealing. Avoid using paper plates and plastic utensils.
  - Measure out your portions to avoid overfilling the pouch.
  - Use a small plate to avoid having your food “get lost” on the plate.
  - Use small utensils for eating to force yourself to take small bites.
  - Use a placemat and cloth napkin.
  - Eat by candlelight and play relaxing music.
  - Avoid stressful conversations at mealtime.
  - Eliminate distractions, turn off the TV, and put aside the book or newspaper.
  - Chew, chew chew. 20-30 times per bite.

- Plan meals and snacks ahead of time. The less eating decisions you have to make, the easier it is.

- Be a good scout and be prepared. Take food with you if you are out and about, traveling, or having “one of those days.”

- Reduce meals out.
• Learn the difference between pouch hunger, physical hunger, and head hunger, the desire to eat. Before surgery, the head hunger led to eating more calories than needed. After surgery, the head hunger can still cause overeating which leads to discomfort, pain, and vomiting.

• When you realize it is your head telling you to eat and not your pouch, ask yourself what else is going on. Become aware of the moods, time of day, location, or foods that trigger the desire to eat.

• Make a list of activities that you can do that do not involve food. Take a walk, clean a closet, call a friend, do something other than eat when you are not hungry but just want to eat.

• Planning + Practice = Success

Tips for Meals Out

Step 1 - The Restaurant
• Don’t skip the meal or snack before your meal out.
• Research restaurant menus before you pick a place or sit down at the table.
• Check for nutrition information online or at the restaurant.

Step 2 - The Menu
• Look over the menu carefully.
• Look for designated lower fat or lower calorie choices.
• Words to look for:
  o Grilled
  o Baked
  o Broiled
  o Steamed
  o Substitutions allowed
  o Lighter fare
  o Heart healthy (but not always lower calorie)

Step 3 - The Order
• Use your restaurant card.
• Don’t be shy about making a special request, such as dressing or sauces on the side.
• Order off the appetizer menu but watch out for high fat items.
• Share a meal.
• Avoid
  o Cream based soups and sauces
  o High calorie beverages, including alcohol
  o Shiny salads
  o Buffets, salad bars, dessert bars

Step 4 – The Meal
• Decide on your portion size and put the rest in the take-home container before you start eating.
• Slow down your eating.
• Chew, chew, chew.
• Check in with your pouch.
• Always leave something on your plate.
• Congratulate yourself for a job well done.

Keeping a Food Journal
The best way to stay on track or get back on track does not have to be costly. The research shows time and time again that when you write down everything you eat and drink, you will be more successful with weight loss, weight maintenance and meeting nutrient guidelines.

Keep an honest record. Write down everything you eat, not just what is on the food plan. Write down the foods and the portion sizes. Write down all foods consumed at a meal or snack, not just the protein food. If you ate a portion of potatoes, write it down. This should be a record of all foods and beverages, planned and unplanned. If you eat it, you own it.

In addition, you can write down the time you ate, where you ate the food, and/or how you were feeling when you ate the food. This will help you identify those eating triggers that are the desire to eat instead of the physical hunger, or need to eat.
There are different tools available to use for food recording. The one that works best for you is one that you will use.

**Online programs**
- diet.com
- FitDay.com - free
- my-calorie-counter.com - free
- caloriekirin.com - $
- NutraWatch.com - free, can upgrade for $
- trackyourdiet.com - free
- thedailyplate.com - free
- sparkpeople.com - free
- startchallengefood.com – free
- [www.imetabolic.com](http://www.imetabolic.com) coming soon

**PC and palm pilot software**
- CalorieKing.com
- FitDay.com
- health-runr.com
- nutricoach.net
- nutritionanalyser.com

**Portable food records**
- HealthFitCounter
- Robi Assistant

**Paper and pencil**
- You will need to use food labels or look up food values online or in a food value book.
Rate of Weight Loss

Everyone loses weight at a different rate. There is no magic number of pounds that will fall off every week. The rate of weight loss, and the amount of weight you ultimately lose, depends mostly on you, and no one else. Following these guidelines, minimizing excess calories (particularly refined carbohydrates), and exercising regularly will enhance your weight loss. Things to keep in mind:

- Generally, the higher your BMI, the faster you will lose weight initially.
- If you have lost a substantial amount of weight before surgery as directed, your weight loss may be slower after surgery.
- Typically, you will lose the most weight during the first 6 months. Weight loss slows down as the months go by. Make the effort to lose the weight within the first 18 months after surgery.
- Your metabolic rate influences your rate of weight loss. Men lose weight faster than women because they have more muscle mass. If you have a slower metabolic rate, you will lose weight slower.
- Look at your portion sizes. Are you staying within the recommended guidelines? Sometimes the problem can be from not eating enough as well as eating too much.
- Make sure you are eating protein first, veggies and fruit next, carbs last if you have room.
- Avoid higher calorie foods.
- Grazing slows down weight loss and causes weight regain. Eat a set amount of food at set times.
- Is intentional physical activity a part of your daily life? Eating fewer calories is only part of the equation. Moving more is critical for weight loss and essential for weight maintenance.
- Weigh yourself no more than 1 to 2 times a week while you are actively losing weight. Jumping on and off the scale everyday or several times a day is not an accurate reflection on your weight loss and tends to cause frustration.
- Often you will see your clothing sizes go faster than the numbers on the scale reflect. If you are down 3 pants sizes, does it really matter what the scale reads?
- Your rate of weight loss depends on your commitment and motivation to changes in eating and activity. The surgery is only a tool.
- Some weight regain is very common after 18 or 24 months, usually 5-10% of your weight loss. If you have lost 100 pounds, it would be normal to gain back 5 to 10 pounds.
• Remember, your goal weight is not just based on a number on the scale. It is also based on how you feel, the resolution of your medical problems, how you look, your energy level, and your quality of life. Ultimately, all of these things are more important than any number.

**Measures of Success**

It can be very frustrating to know you are following all the guidelines and the scale doesn’t read the numbers you would like to see. Look for other milestones. Some of these will creep up on you! One day, you may notice you are not as short of breath. Your medical problems, such as diabetes, may be gone. Your medications are reduced or eliminated. Your back, hips, knees, ankles, and feet don’t hurt as much. You can tie your shoes. You don’t need a seat belt extender. You no longer go through the drive-thru. You sleep more restfully. Your clothes fit better or are loose. You have increased energy. There are many benefits to surgery other than a number on the scale. **Remember to celebrate all of your successes**!

**Move It and Lose It**

There are many health benefits of physical activity in addition to the effects on weight loss and weight maintenance. As you lose weight, your energy level will increase and joint pain will lessen. This makes it easier for you to get out and move more. Pick an activity that you enjoy, you will be more likely to stick with it and make it convenient.

Walking is great. You can do it almost anywhere. The only equipment you need is a good pair of shoes. If you are an outdoor walker, you will need to have a back up plan for bad weather or lack of daylight. Find a walking partner, walk with the kids or grandkids, walk your dog, walk your neighbor’s dog, listen to music while you walk. Just move!

The number one excuse for not having a regular activity plan is lack of time. Look at physical activity as an appointment you are making with yourself. It needs to be put on your schedule. It’s not a matter of *if* you will exercise; it’s a matter of *when* you will exercise.
The recommendations for activity for adults include:

- All adults should avoid inactivity. Some physical activity is better than none and adults who participate in any amount of physical activity gain some health benefits. Gradually work towards increasing the time spent being active.

- To prevent weight gain, do moderate activity, (brisk walking, biking, water aerobics, general gardening) 5 times a week for 30 minutes (150 minutes). You can do these in 10 or 15 minute segments.

- For weight loss, you will need 45 to 60 minutes of moderate activity most days of the week or 200 to 300 minutes per week and reduce caloric intake.

- For prevention of weight regain, you will need 45 to 60 minutes of moderate activity most days of the week.

- Include muscle-strengthening activities that involve all major muscle groups two or more days per week.

**Stepping Out**

Your pedometer can be a motivator to move more. Set step goals and challenge yourself to increase your steps daily. Wear your pedometer for one week and record the steps at the end of the day. At the end of the week, calculate your baseline daily average. Plan to increase your daily steps by 10% or 500 steps a week at a time.

**Step Details**

- 2000 steps = 1 mile
- 1 mile = 100 calories
- Less than 5000 steps daily is sedentary
- 5000 - 7500 steps daily is low activity
- 7500 - 10,000 steps daily is somewhat active
- More than 10,000 steps daily is active

Look for ways to move more in your daily activities. If you are watching TV, something as simple as getting up and walking around the house during the commercials can give you 30 minutes of walking if you are watching TV for 3 hours. You don’t have to worry about bad weather in your living room! Daily physical activity is essential for weight maintenance. Make it part of your daily routine now. **Make down time up time!**
Bibliography

15. www.RD411.com
10 Important Rules

1. Eat 5 - 6 times per day.

2. Eat only at planned meal times, NO grazing.

3. Eat only good quality foods, remember protein first.

4. Eat slowly (20 – 30 minutes per meal) and remember to CHEW, CHEW, CHEW!

5. Keep portion sizes small, 1 cup max.

6. Stop eating when you are no longer hungry.

7. NO beverages while eating.

8. Drink 64 ounces of fluids per day (low cal, no cal) in between meals.

9. At least 30 minutes per day of physical activity.

10. Take chewable multivitamin/mineral supplement daily.
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