

# Gastric Banding

*A Guide for Patients*





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## *A Guide for Patients*

*First edition*

Developed by Allina Hospitals & Clinics.

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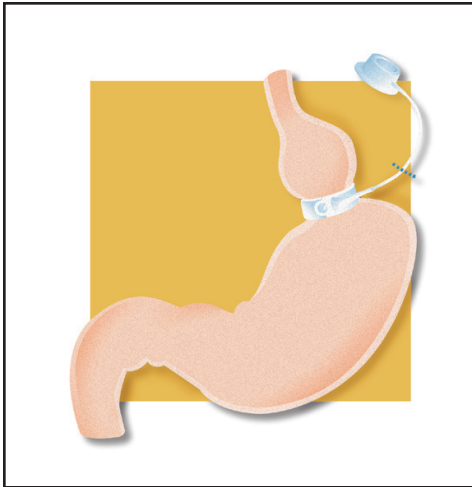


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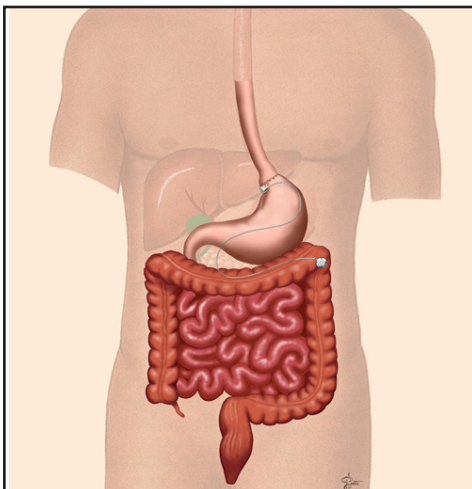
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# Gastric Banding



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**The banding creates a small pouch above the stomach. This limits the amount of food you can eat.**



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**The band is placed around the stomach and an access port is located under the skin of your abdomen. The doctor will use this port to tighten or loosen the gastric band.**

Gastric banding is surgery to limit the amount of food you can eat at one time. An adjustable band placed around your stomach creates a small pouch. Because the pouch can only hold a small amount of food, you feel satisfied faster and longer.

When you eat less, your body stops storing extra calories and instead uses fat reserves for energy. The result is gradual weight loss.

The surgeon places and secures a band around your stomach. The small pouch is created above the band while the larger part of the stomach is located below the band. The narrow opening between the small pouch and the rest of your stomach limits how much you can eat at any one time.

A tube connects the band to an access port placed under the skin in your upper abdomen. The surgeon controls how much food the pouch can hold by changing the tightness of the band. A fine needle is placed in the access port and saline is added to or removed from the band.

- If the band is too loose, weight loss is too slow because the food is entering the stomach too fast. The surgeon will make the band tighter by adding saline.
- If the band is too tight, the surgeon will adjust the band removing some saline.

Gastric banding provides a way to combat hunger and overeating. This may sound like an easy answer but this surgery requires major, life-long changes in your eating habits and your attitude about food.

Every day you will need to make the right food and exercise choices. If you do not choose well, this surgery will not help control obesity.

For a healthy lifestyle after surgery, you will need to make behavior as well as nutrition changes. Hundreds of patients have succeeded with this program. You can too, with self-discipline, emotional energy and the support of family and friends for your long-term health.

# Who May Have Gastric Banding

You and your surgeon will work together to decide if gastric banding is right for you.

You may qualify for gastric banding if:

- you are at least 18 years old
- your BMI is 40 or higher
- your BMI is between 35 and 40 and you have major health problems
- you have been overweight for more than five years
- your previous attempts to lose weight had only short-term success
- you do not have any other disease that may be caused you to be overweight
- you are prepared to follow changes in your diet, exercise and behaviors
- you are willing to continue working with the specialist who is treating you
- you understand you will have a gradual but steady weight loss of 1 to 2 pounds a week once the band is adjusted
- you understand you may need monthly adjustments for up to one year
- you do not drink more than two alcoholic drinks a week.

# Who May Not Have Gastric Banding

You may not qualify for gastric banding if:

- you have an inflammatory disease or condition of the gastrointestinal tract (such as ulcers, severe esophagitis or Crohn's disease)
- you have severe heart or lung or any other disease that puts you at-risk for gastric banding
- you have a problem that could cause bleeding in the esophagus or stomach (such as esophageal or gastric varices, a dilated vein)
- your esophagus, stomach or intestine is not normal (such as a narrowed opening)
- you have had an injury (such as gastric perforation) near the site of the gastric band placement
- you have cirrhosis
- you have chronic (long-lasting) pancreatitis
- you are pregnant

## Note

You may not qualify for gastric banding if you eat a lot of sweet foods or if you often drink milkshakes or other high-calorie liquids, such as alcohol.

- you are addicted to drugs (prescription or illegal) or alcohol
- you are younger than 18 years old
- you have an infection
- you are on long-term steroid or warfarin (blood thinner) treatment
- you cannot or do not want to follow the diet rules before and after surgery
- you have an allergy to materials in the gastric band
- you or someone in your family has or have had symptoms of an autoimmune connective tissue disease (such as lupus or scleroderma).

## Surgery

### How the gastric band is placed

Gastric bands are placed during laparoscopic surgery. This type of surgery uses small incisions (surgical cuts) instead of one large incision.

- You will sign a consent for surgery.
- You will be prepared for surgery.
- You will receive general anesthesia to put you to sleep for the surgery.
- Your breathing, pulse and blood pressure will be checked during surgery.
- The surgeon will make a few small incisions in your upper abdomen. He or she will insert narrow, hollow tubes.
- The surgeon passes thin surgical instruments and a small camera through the tubes into your abdomen.
- He or she can see inside your abdomen by the images taken by the camera. The images are shown on a computer monitor (like a TV screen).
- The surgeon makes a small tunnel behind the top of your stomach. He or she pulls the band around your stomach to form a ring.
- The band has a locking part that holds the band in a circle around your stomach. The surgeon also puts stitches to keep the band in place.

## **Advantages of laparoscopic surgery**

- Most patients report feeling less pain with a few small incisions versus one large incision.
- There can be fewer complications (problems).
- Patients recover faster and are able to resume physical activities sooner.

## **Possible Surgery Complications (Problems)**

The following are some of the possible complications as the result of surgery. Talk with your surgeon if you have questions or concerns.

- nausea and vomiting
- breathing and lung problems (It is important to use the incentive spirometer for 1 to 2 weeks after surgery.)
- bleeding or damage to major blood vessels or organs during surgery (Losing weight before surgery helps lower this risk.)
- infection of the band, access port, or surgery sites
- blood clots (It is important to walk and drink plenty of water after surgery.)
- It is important to lift no more than 20 pounds for two weeks after surgery to avoid moving the band.
- blockage of the outlet (the opening between the new small pouch and the lower stomach). This can be caused by:
  - food
  - swelling
  - over-inflated band
  - band slippage
  - enlarged stomach pouch
  - improper placement of the band.
- leaking (The band can deflate on its own because of leakage.)
- breakdown of the band in the stomach
- dilation (widening) of the esophagus.

# How To Avoid Problems After Surgery

## Foods and Beverages to Avoid

- tough meats (such as beef)
- bread (fresh and fluffy)
- pasta and rice
- fried foods
- carbonated beverages
- concentrated sweets (such as ice cream, candy and cake)

You will have diet guidelines to follow. These will help you reach and maintain your desired weight. The following tips will help you avoid several digestive problems that could cause discomfort.

## Nausea, vomiting, bloating and/or heartburn

Avoid these by:

- eating or drinking at a slow pace
- chewing foods well
- not drinking cold liquids
- not eating too much
- not using drinking straws
- not eating rich, sweet or fried foods
- not eating foods that produce gas
- not drinking carbonated beverages.

If you think your band is too tight, call your doctor.

## Blockage of the gastric band opening

The new opening created by surgery is smaller than the original opening that released food from your stomach to your intestines. The new opening is the size of the dime and it may become blocked with food that has not been chewed well. To avoid blockage:

- Chew all foods to the consistency of applesauce before swallowing.
- Chew foods high in fiber (such as raw fruits and vegetables) well.
- Eat meat that is tender and easy to chew.
- Avoid eating fresh, fluffy breads; pasta; and rice.

## Overeating

To prevent eating too much:

- Eat three meals each day.
- Measure foods before eating.
- Eat slowly. This will allow your brain to receive the message that your stomach is full. It takes 20 minutes for your stomach to tell your brain that you are full. Stop eating when you feel satisfied.

## **Loss of vitamins and minerals**

To help maintain your vitamin and mineral stores:

- Eat foods that are nutritious and high in protein.
- Take a chewable, complete multivitamin once a day. Good choices are Flintstones Complete® and Centrum Chewable®.

## **Food intolerance**

It is important to eat a variety of healthful foods. Try to eat small amounts (1 to 2 tablespoon portions at first) of the following foods to see how well you can tolerate them:

- milk and dairy products
- citrus juices and fruits
- high-fiber vegetables (such as celery or asparagus)
- lettuce
- nuts and seeds
- skin on fruits and vegetables (such as apple or potato).

## **Slowed weight loss or returned weight gain**

In addition to following the other guidelines in this section, avoid foods and beverages that are high in calories, fat and sugar. It is highly recommended that you eat only small amounts due to these foods' low nutrition:

- juice
- Gatorade®
- concentrated sweets (such as ice cream, candy, cake, and cookies)
- chips.

## Fluid loss

You need to replace normal water loss to prevent dehydration and to maintain regular bowel habits.

Symptoms of dehydration include dark-colored urine, foul-smelling urine, or a bad taste in your mouth with nausea. (Your urine should be clear to light yellow in color.)

### Remember:

- Take 20 to 30 minutes to eat each meal.
- Wait 30 to 40 minutes after eating to drink liquids.
- Sip liquids. Do not gulp.
- Do not use drinking straws.
- Avoid beverages that are carbonated or high in calories.
- Avoid alcohol and caffeine.
- Drink eight cups of water or noncarbonated beverages that do not contain sugar or caffeine each day.

## Patient Suggestions

- Go grocery shopping before you go to the hospital.
- Keep lots of liquids at room temperature.
- Drink small amounts of liquids during the day.
- Be dressed during the day so you feel “less sick.”
- Vary your liquids with herbal teas. Mint teas are soothing.
- If you try sugar-free Popsicles<sup>®</sup>, melt them in your mouth before swallowing.
- Add mild seasonings to broth to make it more interesting.
- Watch TV sparingly. There are many food ads.
- Keep a food journal. Keep a journal of the foods you eat and the beverages you drink. Record your reactions to different types of foods.
- Follow the rules.

There are no guarantees for weight loss, even with this surgery. You will need to make a commitment to change your lifestyle. This commitment will need to last a lifetime.

# Clear Liquid Diet: Week One

water	broth, bouillon or granules
sugar-free drink mixes (such as Crystal Lite <sup>®</sup> , sugar-free Kool-Aid <sup>®</sup> )	100 percent fruit juices, diluted one-half water to one-half juice
sugar-free Jell-O <sup>®</sup>	skim milk (may add sugar-free Nestle <sup>®</sup> Nesquik <sup>®</sup> to flavor the milk)
noncaffeinated herbal tea	diluted decaffeinated coffee
sugar-free Popsicle <sup>®</sup>	sugar-free lemonade
Propel <sup>®</sup> Fitness Water (good source of potassium and vitamins)	<b>strained</b> low-fat clear soups that are diluted with water on a 1:1 ratio (such as chicken noodle soup)
protein powder (high-protein, low in fats and sugars) to add to liquids	

You will be able to increase how much you drink over the first several days and weeks. You should work toward drinking 64 ounces of liquids a day.

Your goal on the first day home is to drink at least 42 ounces of fluids. On the second day home, you need to drink at least 52 ounces. On the third day home, you need to drink at least 64 ounces of fluids.

## Tips

- To keep from getting dehydrated, you need to slowly drink water and low-calorie liquids all day long.
- Drink one ounce every 15 minutes. Use your timer.
- If you feel fullness, pain or nausea, stop drinking until the feeling goes away.

## Full Liquid Diet: Week Two After Clear Liquid Diet

In addition to the clear liquids listed on page 12, you may drink the following.

tomato juice	V8® 100 percent vegetable juice or Diet V8 Splash®
<b>strained</b> low-fat cream soups (tomato, split pea, cream soups made with skim milk)	sugar-free or lowfat Fudgsicle® or Blue Bunny® Health Smart® fat-free cream bars

## Pureed Diet: Weeks Three and Four After Full Liquid Diet

Food	Allowed
meats and meat substitutes	<ul style="list-style-type: none"> <li>■ pureed meats</li> <li>■ small curd cottage cheese (fat-free)</li> <li>■ pureed tofu</li> </ul>
cereals	<ul style="list-style-type: none"> <li>■ cooked unsweetened cereals: oatmeal (thinned), Cream of Wheat®, Malt-O-Meal®</li> </ul>
potatoes	<ul style="list-style-type: none"> <li>■ instant mashed potatoes (thinned)</li> </ul>
vegetables	<ul style="list-style-type: none"> <li>■ pureed vegetables (squash, mashed potatoes, baby food vegetables)</li> <li>■ tomato juice (avoid V8 Splash®)</li> </ul>
fruits	<ul style="list-style-type: none"> <li>■ unsweetened, pureed fruit</li> </ul>
milk	<ul style="list-style-type: none"> <li>■ skim milk</li> <li>■ low-fat, low-sugar yogurt without fruit chunks</li> <li>■ low-fat soy or rice milk</li> </ul>
soups	<ul style="list-style-type: none"> <li>■ bouillon</li> <li>■ broth of low-fat soups</li> <li>■ any strained or pureed soups</li> </ul>
beverages	<ul style="list-style-type: none"> <li>■ coffee (decaffeinated)</li> <li>■ noncaffeine herbal teas and sugar-free drinks</li> <li>■ water (drink eight cups or more each day)</li> </ul> <p>Do not have carbonated liquids.</p>
other	<ul style="list-style-type: none"> <li>■ sugar-free gelatin and pudding</li> <li>■ artificial sweeteners (Splenda®, Equal®, Sweet 'N Low®) can be added.</li> </ul>

## Sample Pureed Diet

Meal	Day One	Day Two
Breakfast	<ul style="list-style-type: none"> <li>■ Carnation® Instant Breakfast® (no-sugar added) Mix one packet with 8 ounces of milk.</li> </ul>	<ul style="list-style-type: none"> <li>■ one hard boiled egg blended in a blender with mustard</li> <li>■ ¼ cup cooked unsweetened cereal</li> <li>■ ¼ cup skim milk</li> </ul>
Lunch	<ul style="list-style-type: none"> <li>■ ½ cup fat-free small curd cottage cheese</li> <li>■ ¼ cup peaches blended in a blender</li> </ul>	<ul style="list-style-type: none"> <li>■ ½ cup pureed chicken with small amount of fat-free mayonnaise</li> <li>■ ¼ cup pureed banana</li> </ul>
Dinner	<ul style="list-style-type: none"> <li>■ ½ cup pureed turkey</li> <li>■ ¼ cup squash</li> </ul>	<ul style="list-style-type: none"> <li>■ ¼ cup low-fat refried beans</li> <li>■ ¼ cup pureed carrots</li> <li>■ ¼ cup low-fat yogurt without fruit chunks</li> </ul>

## Soft Diet: Week Five After the Pureed Diet

Food	Allowed
meats and meat substitutes	<ul style="list-style-type: none"> <li>■ tender/moist meats or ground meats (fish, eggs, cheese, cottage cheese)</li> <li>■ natural peanut butter</li> <li>■ tofu</li> <li>■ lean deli meats</li> <li>■ canned tuna or canned moist chicken</li> </ul>
cereals	<ul style="list-style-type: none"> <li>■ cooked unsweetened cereals: oatmeal (thinned), Cream of Wheat®, Malt-O-Meal®</li> <li>■ cold cereals: Rice Krispies®, Cheerios® or Corn Flakes®</li> </ul>
potatoes	<ul style="list-style-type: none"> <li>■ instant mashed potatoes (thinned)</li> <li>■ potatoes: baked, no skin</li> <li>■ pasta or rice (if tolerated)</li> </ul>
vegetables	<ul style="list-style-type: none"> <li>■ tender, cooked carrots, squash, green or waxed beans</li> <li>■ tomato juice</li> <li>■ zucchini</li> <li>■ beets</li> <li>■ stewed tomatoes</li> </ul>
fruits	<ul style="list-style-type: none"> <li>■ unsweetened diluted fruit juices (no more than 4 ounces a day)</li> <li>■ one-third ripe yellow banana</li> <li>■ canned unsweetened fruits in light or natural juices (mandarin oranges, peaches, pears, applesauce)</li> </ul>
milk	<ul style="list-style-type: none"> <li>■ skim milk</li> <li>■ low-fat yogurt</li> <li>■ low-fat soy or rice milk</li> </ul>
soups	<ul style="list-style-type: none"> <li>■ bouillon</li> <li>■ broth of low-fat soups made with allowed soups</li> <li>■ any strained or pureed soups.</li> </ul>
beverages	<ul style="list-style-type: none"> <li>■ coffee (decaffeinated)</li> <li>■ tea and sugar-free drinks</li> <li>■ water (drink six to eight cups or more each day)</li> </ul> <p>Do not have carbonated liquids.</p>
other	<ul style="list-style-type: none"> <li>■ sugar-free gelatin and pudding</li> <li>■ artificial sweeteners (Splenda®, Equal®, Sweet 'N Low®) can be added.</li> </ul>

## Tips

- Start with 1 to 2 tablespoons per meal until you can finish the recommended portions.
- Your goal is  $\frac{3}{4}$  cup per meal (1,200 calories a day).
- **Do not force yourself to finish a meal.**
- Eat three meals a day.
- Do not snack.

## Sample soft meal plan

Meal	Day One	Day Two	Day Three
Breakfast	<ul style="list-style-type: none"> <li>■ Carnation® Instant Breakfast® (no-sugar added)</li> </ul>	<ul style="list-style-type: none"> <li>■ one egg</li> <li>■ <math>\frac{1}{2}</math> cup unflavored oatmeal with Splenda®</li> </ul>	<ul style="list-style-type: none"> <li>■ one low-fat cheese stick</li> <li>■ <math>\frac{1}{2}</math> slice toast with sugar-free jelly</li> </ul>
Lunch	<ul style="list-style-type: none"> <li>■ <math>\frac{1}{4}</math> cup tuna</li> <li>■ three saltine crackers</li> <li>■ <math>\frac{1}{4}</math> cup applesauce</li> </ul>	<ul style="list-style-type: none"> <li>■ one slice turkey</li> <li>■ one slice low-fat cheese</li> <li>■ two cubes ripe watermelon</li> </ul>	<ul style="list-style-type: none"> <li>■ <math>\frac{1}{4}</math> cup sugar-free yogurt</li> <li>■ <math>\frac{1}{4}</math> cup canned peas</li> <li>■ <math>\frac{1}{4}</math> cup cooked carrots</li> </ul>
Dinner	<ul style="list-style-type: none"> <li>■ 2 ounces chicken breast</li> <li>■ <math>\frac{1}{4}</math> cup cooked sweet potato (mashed)</li> </ul>	<ul style="list-style-type: none"> <li>■ <math>\frac{3}{4}</math> cup ground turkey with a small amount of spaghetti sauce and a small amount of melted cheese on top</li> </ul>	<ul style="list-style-type: none"> <li>■ one 2-inch meatball</li> <li>■ <math>\frac{1}{4}</math> cup green beans</li> <li>■ <math>\frac{1}{4}</math> cup applesauce</li> </ul>

## Tips

- Sit at a table and avoid distractions like TV.
- Take 30 minutes to eat each meal.
- Measure and cut up your food before you eat.
- Put down your utensils between bites.
- Do not have beverages with your meals. (Milk on cereal is OK.)
- Wait 30 to 40 minutes after the meal to drink liquids.
- Do not use drinking straws.

## Tip

Feeling pressure at the top of your stomach or having hiccups are signs that you ate too much and/or too fast.

## Fills/Adjustments

After a fill, eat:

- two days liquids
- two days pureed
- normal diet.

# Protein Content of Selected Foods

Food	Portion Size	Protein in gram
<b>Dairy</b>		
milk	¼ cup	2
sugar-free yogurt	¼ cup	2
sugar-free pudding	¼ cup	2
Carnation® Sugar-free Instant Breakfast®	¼ cup	4
dry skim milk powder	3 tablespoons	9
cream soup (made with milk)	¼ cup	2
cream soup (made with water)	¼ cup	1
<b>Meat and Meat Substitutes</b>		
meat	1 ounce	7
egg	one	7
cottage cheese	¼ cup	7
cheese	1 ounce	7
<b>Other</b>		
soy milk	¼ cup	2
cooked cereal	¼ cup	0
fruit juice	¼ cup	0
vegetables	¼ cup	0
broth	¼ cup	0
<b>Protein Powders</b>		
SportPharma®	one scoop	22
Body Fortress™ Whey Protein	one scoop	23 - 26
Six Star™ Body Fuel (advanced whey protein)	one scoop	20
Nectar™	one scoop	20
Matrix™	one scoop	24
No Sugar Added Carnation® Instant Breakfast®	mixed in 8 ounces of skim milk	13
Milk and nonfat powdered milk	8 ounces of milk with one serving of powdered milk	17
UNJURY®	one scoop	20
Beneprotein®	one scoop	6

# High Protein Supplements

Product	Type	Serving Size	Protein	Calories	Fat	Carbohydrates	Sugar	Where to find
Isopure (Nature's Best)	powder drink	2 scoops 20 ounces	50 grams 50 grams	210 280	1 gram 0 grams	0 grams 25 grams	0 grams 1 gram	GNC, online
Isopure Zero Carb	drink	1 bottle	40 grams	160	0 grams	0 grams	0 grams	GNC, online
AdvantEdge Carb (EAS)	bar	1 bar	24 grams	210	5 grams	22 grams	2 grams	Wal-Mart, Target, www.eas.com
Nectar (Syntrax)	fruit drink mix	1 scoop	20 grams	90	0 grams	0 grams	0 grams	www.si03.com
Unjury (ProSynthesis LABs)	powder	1 scoop	20 grams	90	0 grams	3 grams	2 grams	Unity Community Pharmacy, www.unjury.com
BiPro (BiPro USA)	powder	1 scoop	20 grams	80	0 grams	0 grams	0 grams	www.birpousa.com
Matrix (Suntrax)	powder mix	1 scoop	24 grams	130	2 grams	2 grams	2 grams	www.si03.com
Myoplex lite	powder mix	1 packet	25 grams	180	2 grams	19 grams	1 gram	www.eas.com
Optisource (Novartis)	drink	8 ounces	24 grams	200	6 grams	12 grams	0 grams	GNC, www.resource.walgreens.com
No Sugar Added Carnation Instant Breakfast	powder mix (vanilla)	1 packet	5 grams (13 grams with 1 cup skim milk)	60 (150 with 1 cup skim milk)	0 grams	12 grams (26 grams with 1 cup skim milk)	8 grams (20 grams with 1 cup skim milk)	online
Six Star Body Fuel (advanced whey protein)	powder	1 scoop	20 grams	110	2 grams	2 grams	2 grams	multiple sites
Sport Pharma	powder	1 scoop	22 grams	110	2 grams	1 gram	1 gram	Costco
Body Fortress (whey protein)	powder (vanilla)	1 scoop	26 grams	110	1.5 grams	1 gram	1 gram	Wal-Mart, Target

# Before Surgery

- **Lose at least 10 percent of your excess body weight.** Weight loss surgery is major surgery. You are at a greater risk than someone who is not morbidly obese. It is to your advantage to be in the best shape possible when you have surgery.

You need to lose at least 10 percent of your excess body weight. That will also “shrink” your liver and decrease your surgery risks. Losing weight before the surgery will also help you have less pain after surgery. Your recommended weight loss before surgery will be determined when you met with one of the bariatric nurses.

- **Eat a balanced diet.** Your body needs a balanced amount of protein, carbohydrates, fat, vitamins, minerals and trace elements. These help your cells, tissues and organs work well and repair themselves. There is not one food that can supply all of the nutrients you need so you will need to eat a variety of healthful food. Please see the food plan you received from the dietitian.
- **Keep a food diary.** It is helpful to keep a food diary to make sure you are staying on track with your diet. Write the following information in a small notebook each day:
  - amount and types of foods you ate
  - amount of food from each food group you ate
  - how long it took you to eat the meals
  - how you felt during and after eating

After a few days go over your diary and look for trends that may be working against you. If you find a trend, choose something else to eat or try an activity other than eating. For example, if you snack on chips while watching TV because you are bored, try eating an apple (with no skin) or doing a physical activity.

- **Do not smoke.** If you smoke, you **must** quit at least eight weeks before your surgery. You will be having major surgery and you will need your lungs to be in the best shape as possible. Smoking affects your supply of oxygen during surgery.

Smoking is also harmful after surgery. This is because smoking constricts your blood vessels and blocks oxygen from going to the site of the surgery. This significantly slows the healing process.

Smoking increases your chances of getting pneumonia or other lung problems while you recover. Smoking also changes your metabolism and increases your risk of stroke.

- **Have a psychological evaluation.** All weight loss surgery patients are required to meet with a psychologist recommended by the nurse clinician. The health care staff needs to know if you are mentally and emotionally ready to have this surgery and if you are ready to adjust to the changes after surgery. It is common for morbidly obese people to be depressed and have strong feelings of failure, low self-esteem and poor health.

Some people have unrealistic expectations of how their lives will change after surgery. This evaluation will address all of these feelings.

Becoming thin will not cure your negative feelings and problems. After surgery, you may find the psychologists a helpful resource to deal with issues of eating, self-image and changing relationships.

- **Gradually stop drinking/eating caffeine.** It is a good idea to start weaning yourself off caffeine. If you do not, you may have a bad headache from caffeine withdrawal after surgery. Limit yourself to one cup or can of caffeinated beverages each day.

Caffeine is a diuretic, so it can dehydrate you. Because of this, you will need to drink an extra 1 ½ cups of water for every 1 cup of caffeine you drink. Caffeine can irritate your new pouch. Also, caffeine can be an appetite stimulant and make you want to eat more.

- **Avoid drinking liquids with meals.** Drinking with meals after gastric banding will flush the food out of your new smaller pouch and into the lower part of your stomach. You will not stay as satisfied and you may be able to eat more. Wait 30 to 40 minutes after eating before you drink liquids.

# Exercise

Exercise is important before and after weight loss surgery. With regular exercise, your metabolism (rate which you burn calories) increases and your body burns up the excess fat and not muscle mass.

Exercise also strengthens your heart and bones, burns calories, increases your metabolism and relieves stress. For these reasons, exercise **must** become a daily routine in your new life.

Start out slowly if you aren't used to exercising. Do five minutes one day and keep increasing the time. Work up to at least 30 to 45 minutes of exercise each day. There are good exercise videos for people who are out of shape as well as for those who have bad knees or backs.

As you exercise you will lose more weight because you are burning calories and increasing your metabolism. This is especially important to keep your weight from plateauing. Exercise consultants are available to help create an exercise program to meet your needs. Ask your nurse for details.

## Exercise tips

- Find an exercise partner.
- Join an exercise club or class. (Some patients enjoy Curves for Women®.)
- Listen to your favorite motivational music as you exercise.
- Try mall walking, aerobics, swimming or dancing.
- If you have a dog, take it for a walk every day.
- Wear comfortable clothing and shoes.
- Park 15 minutes from your workplace or walk during your lunch or breaks.
- Use stairs instead of the elevator.
- Try not to use TV remote controls or cordless telephones.

- Walking is the most popular exercise after gastric banding surgery. To get the right amount of activity you should take 10,000 steps a day. The average person takes between 700 and 2,500 steps a day. To reach the goal of 10,000 steps a day, you can walk, jog or run.

For two weeks, check how many steps you take every day by wearing a pedometer. (It will count slow and fast steps.) Keep track of your steps. At the end of the two weeks, make a goal for adding steps. For instance, you may want to take 2,500 steps a day for two weeks. Keep adding steps until you reach 10,000 steps a day.

- When your surgery lifting restrictions are lifted, you may decide to start strength (resistance) training for improving muscle tone and strength. You can use free weights (dumbbells), resistance bands or weight machines.

If possible, start a strength training program with a certified trainer. To get the most benefit out of weight training, it is important to do these exercises safely and correctly. The American College of Sports Medicine recommends that people do strength training twice a week. Make sure that you do not target the same muscle group two days in a row. Muscles need to rest 48 hours between sessions.

# How To Read Food Labels

## Nutrition Facts

Serving Size 1/2 cup dry (40 g) 1.  
 Servings Per Container: 13

---

Amount Per Serving

---

**Calories 150**      **Calories from Fat 25**

---

	<b>% Daily Value*</b>
<b>Total Fat</b> 3 g	<b>4%</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">3.</span>
Saturated 0.5 g	<b>2%</b>
Trans Fat 0 g	
Polyunsaturated 1 g	
Monounsaturated 1 g	
<b>Cholesterol</b> 0 mg	<b>0%</b>
<b>Sodium</b> 0 mg	<b>0%</b>
<b>Total Carbohydrate</b> 27 g	<b>9%</b>
Dietary Fiber 4 g	<b>15%</b>
Soluble Fiber 2 g	
Insoluble Fiber 2 g	
Sugars 1 g	
<b>Protein</b> 5 g	
<b>Vitamin A</b>	<b>0%</b>
<b>Vitamin C</b>	<b>0%</b>
<b>Calcium</b>	<b>0%</b>
<b>Iron</b>	<b>10%</b>

\*Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:

	<span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">4.</span>	<b>Calories:</b>	2,000	2,500
Total Fat		Less than	65 g	80 g
Sat Fat		Less than	20 g	25 g
Cholesterol		Less than	300 mg	300 mg
Sodium		Less than	2,400 mg	2,400 mg
Total Carbohydrate			300 g	375 g
Dietary Fiber			25 g	30 g

Source: U.S. Food and Drug Administration

By reading food labels you will become aware of what's in the foods you eat. The following information explains how to read the food label for oatmeal pictured at left.

**1. Serving size.** The serving size lists how many calories and nutrients are in one serving of the food. In this example, there are about 13 servings of oatmeal per container. If you are eating twice the serving size, you are getting twice the calories, fat, saturated fat, sodium, etc.

**2. Nutrients.** Nutrients show how much sodium, fiber, sugars, fat, etc., is in each serving. If you are on a restricted diet, look at the nutrients the food contains.

**3. Percent of daily value.** Percent of daily value shows how the amount of a nutrient in a serving of food fits into a 2,000 calorie diet.

**4. Daily values chart.** Daily values for diets of 2,000 or 2,500 calories appear on the lower half of the food label. These numbers list the recommended limits on total fat, saturated fat, cholesterol, sodium, total carbohydrates and dietary fiber for your diet each day. **Note:** Your specific recommendations may vary from these (such as amount of saturated fat, cholesterol and sodium).

**Ingredients.** The ingredient list is another important part of the nutrition label. It is found on the bottom of the label and shows the order of ingredients from greatest to least. When reading ingredient labels, try to avoid products that contain shortening, hydrogenated vegetable oil and partially hydrogenated vegetable oil.

When reading food labels, compare similar products to find the one with the least amount of saturated fat, trans fat and sodium. Buy products that are high in fiber content.

# Daily Food and Exercise Diary

Date:	
Breakfast	
Time	
Activity while eating	
Lunch	
Time	
Activity while eating	
Dinner	
Time	
Activity while eating	
Snacks: when and why	
Water (8-ounce glasses)	<input type="checkbox"/> one <input type="checkbox"/> five <input type="checkbox"/> two <input type="checkbox"/> six <input type="checkbox"/> three <input type="checkbox"/> seven <input type="checkbox"/> four <input type="checkbox"/> eight
Other Liquids	
Exercise/Activity	
Supplements	<input type="checkbox"/> chewable complete multivitamin <input type="checkbox"/> daily calcium

# Daily Food and Exercise Diary

Date:	
Breakfast	
Lunch	
Time	
Activity while eating	
Dinner	
Time	
Activity while eating	
Snacks: when and why	
Water (8-ounce glasses)	<input type="checkbox"/> one <input type="checkbox"/> five <input type="checkbox"/> two <input type="checkbox"/> six <input type="checkbox"/> three <input type="checkbox"/> seven <input type="checkbox"/> four <input type="checkbox"/> eight
Other Liquids	
Exercise/Activity	
Supplements	<input type="checkbox"/> chewable complete multivitamin <input type="checkbox"/> daily calcium

# One Week Before Surgery

- **Get a physical.** Within seven days before your surgery, you will need to have a health history and physical done with your family doctor. He or she should fax or give the results directly to the hospital as well as give you a copy to bring to the hospital.
- **Go to the grocery store.** You will not feel like grocery shopping after your surgery. Look at page 12 to see a list of choices to buy for liquid meals after surgery. You should buy small quantities. Here is a list of kitchen utensils you should have on hand:
  - blender
  - strainer
  - measuring spoons
  - small plate
  - toddler-size spoon and fork
  - water bottle with no straw
  - ice cube trays.\*
- **Buy over-the-counter pain medicines before surgery.** See page 30 under pain control.
- **Review this book.**
- **Eat healthful food.** Do not eat anything fatty, fried or high in calories. Please don't cheat. Your surgeon can tell what type of foods you've been eating at the time of surgery.
- **Drink only liquids the day before surgery.**
- **Do not eat or drink anything after midnight the night before your surgery.**

\* Ice cube trays can be used to make small portions and freeze pureed food for several days.

# Pre-admission Information

One or two days before your surgery, someone from the admissions office will call you to start your registration. Someone from the surgical team will also call you to answer your questions and give you pre-surgery instructions.

What to bring to the hospital:

- You may bring your own night clothes, but the hospital does have gowns that will fit you.
- You may bring your own personal care items.
- Bring all medicines, in their original bottles, that you are currently taking. This includes inhalers, eye drops and over-the-counter medicines, for your medical team to review.
- Bring your incentive spirometer.
- Bring your insurance card.
- Bring your CPAP machine if you use one for sleep apnea.
- Bring this book.

## At the Hospital

- **Admission.** Arrive at the hospital at least two hours before the surgery, unless your nurse gives you other instructions. Check in with the Admissions/Patient Registration desk. A nurse will give you a pre-surgery interview and tell you what will happen during and after the surgery. The nurse will also weigh you. If you have not kept off or lost all the weight, your surgery may be canceled. If you have smoked in the last eight weeks, your surgery may also be canceled.
- **Before surgery.** About 30 minutes before the surgery, you will change into a hospital gown and robe and go to a pre-surgery area.
  - You will meet the surgery team, including the nurse, doctor and anesthesiologist.
  - You will have an intravenous (IV) line put into your hand or arm.
  - Your family members will be in a waiting room during surgery.

- **Surgery.** This will take between 30 minutes to two hours. When the surgery is done, your doctor will meet with your family in the waiting room.
- **After surgery.** You will go to the recovery room for at least one hour. There, the nurses will watch your blood pressure, heart rate and other vital signs. You will then be taken to your room. Other activities after surgery:
  - Nurses will help relieve your discomfort. This includes pain medicine. If you are in pain, let the nurses know so they can give you the right pain medicine.
  - Staff members will help you get out of bed and take a walk around the hospital floor about two hours after you go to your room.
  - You will still get fluids through the IV tube.
  - Fluids will be started after you have an X-ray showing your band is in the correct placement.
  - Your first fluids by mouth will be small sips of water (at room temperature) and will likely be started the day after surgery.
  - Once you can tolerate water, you can have clear liquids such as broth, unsweetened gelatin and unsweetened, diluted fruit juices. Drink the liquids slowly.
- **Intake record.** While you are in the hospital, you will fill out a record of what you drink and how much you drank. Page 29 has a sample of the form you will get in the hospital. Once you get home, you should keep a record of your intake in a notebook. Your nurse can answer any of your questions.
- **The rest of your hospital stay.**
  - To help prevent breathing problems, take about eight to 10 breaths into your incentive spirometer followed with a cough every hour you are awake. Put a pillow on your incision site while you cough to limit your discomfort.
  - Let the nurses know how you are feeling. Ask for help if you need it.
  - Standing up straight and walking will help you regain your strength.
  - A pharmacist will talk with you the day after surgery.
  - Nurses and your surgeon will check in with you regularly. They will answer any of your questions.
  - You will watch a diet video before you go home.

# Intake Record

Post-surgery day: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Liquids

10 p.m. to 6 a.m.: \_\_\_\_\_

6 a.m. to 2 p.m.: \_\_\_\_\_

2 to 10 p.m.: \_\_\_\_\_

### Summary of diet instructions: 24-hour intake

*Drink slowly ..... When full ..... STOP*

- Sit up straight in a chair when you drink liquids.
- Do not use straws. They will cause you to swallow air and will add to your discomfort.
- Measure liquids and record the amount you drink in the space provided.

**NOTE: 1 teaspoon = 5cc    1 tablespoon = 15 cc    1 ounce = 30 cc**

A small supply of medicine cups for drinking will be sent home with you to use until you are comfortable with the amount to swallow.

- First day home = 42 ounces (84 half full medicine cups or five 8-ounce glasses)
- Second day home = 52 ounces (104 half full medicine cups or six and one-half 8-ounce glasses)
- Daily after second day = 64 ounces (128 half full medicine cups or eight 8-ounce glasses)

# At Home

- **Breathing exercises.** For the first week at home, keep using your incentive spirometer every two hours during waking hours. This will help prevent breathing problems.
- **Pain control.** Many patients may use the prescribed pain medicine for more intense pain. Or, you may take liquid or chewable over-the-counter pain medicine, such as junior strength Tylenol® (chewable), children's Tylenol® (liquid) or Excedrin® Quick Tabs™. You will want to buy these before coming home after surgery. If you don't, you can buy them at the hospital's outpatient pharmacy.
- **Gas discomfort.** If you have gas pains you may try chewable Gas-X®.
- **Activity.** Move around during the day and take naps or rest when you need to. Take short walks as your energy level and the weather allow. Use stairs as you are able. **Exercise every day after surgery.** Slowly increase how long and how hard you exercise. You should be walking at least two miles a day within two months of surgery. If joint problems or arthritis keep you from walking, try swimming. It is OK to swim four weeks after surgery.
- **Activity restrictions.** To help your muscles heal right and to avoid the band from moving, follow these guidelines:
  - Do not lift anything heavier than 20 pounds for two weeks after surgery.
  - Do not do any abdominal exercises (like sit-ups) for two weeks after surgery.
  - Avoid these activities for four weeks: four-wheelers, lawn mowing, running, skiing, swimming and other water sports, golf and exercise clubs.
  - Do not do heavy housework (vacuuming, mopping, lifting laundry baskets, etc.) for two weeks.
  - Do not drive a vehicle until you have been off your prescription pain medicine for at least 48 hours.
- **Feeling lightheaded or dizzy.** Sometimes you may feel lightheaded or dizzy. This is caused by not drinking as much liquid as you did before surgery. You may also get dizzy when you get up from a chair or when you bend over. This can be caused by your blood pressure shifting and it should be temporary.

When you feel lightheaded or dizzy, do not panic. If you can find a comfortable place, sit or lie down. Your body will adjust and your blood will flow normally.

Be sure to drink eight glasses of water each day. If you drink less water, you are at an increased chance of feeling lightheaded or dizzy.

## Tip

There are times the band may feel tighter. This may occur in the morning, with an increase in altitude (like flying in a plane), during allergy season, during times of stress, or during a menstrual cycle. This feeling is temporary.

- **Return to work.** Your surgeon will help you decide how long to stay out of work, depending on the physical demands of your job.
- **When to call your surgeon.** Call your surgeon's office if you notice any of the following signs:
  - increasing redness, swelling, or pain in your incisions
  - temperature higher than 101 degrees Fahrenheit
  - increasing, severe abdominal pain
  - pain, redness or swelling to your lower legs
  - shortness of breath
  - pain in your shoulders
  - nausea or vomiting.
- **Pregnancy.** It is recommended not to become pregnant for 12 months after surgery for the safety of the baby. Becoming pregnant can be easier at a healthier weight. The gastric band may need to be adjusted during or after pregnancy, depending on your nutritional status and needs.
- **Bowel changes.** You may have liquid stools for the first couple of weeks after surgery. This is normal. If they become too frequent, you may take anti-diarrheal products that are liquid or chewable, such as Imodium AD®.
- **Gas or constipation.** It is not unusual to go five to seven days without a bowel movement after surgery. If you feel crampy, bloated and/or gassy, take one tablespoon of milk of magnesia. Be sure to drink lots of water after taking this mild laxative.
- **Emotional changes.** You will likely go through ups and downs when you're at home. These feelings are completely normal and usually go away within a week or so.

# Band Adjustments

Band adjustments will be needed as long as you have your gastric band. An adjustment can be done at your surgeon's office. During adjustments, the surgeon adds or removes saline from the band.

Adjustments are called "fills" when saline is added. Fills tighten the band to increase the amount of tightness around your upper stomach.

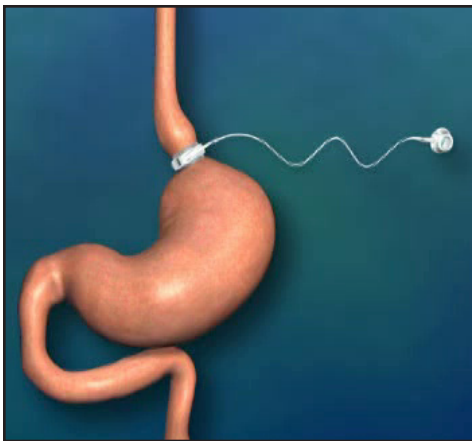
When the surgeon places the band in surgery, it does not have any saline in it. You will still feel some restriction from the empty band.

After surgery, your stomach needs time to heal before you have your first adjustment. This usually takes six weeks.

## Getting an adjustment

It is best to have an empty stomach each time you have a band adjustment. It is recommended you not eat any solid or soft foods for two hours before an adjustment.

- Your surgeon or surgeon's assistant may use one of two methods to locate the port where the saline needs to be injected.
  - X-rays will be taken to locate the port.
  - The surgeon or assistant will press on your abdomen to find the port.
- The surgeon or assistant will disinfect and numb your skin. He or she will insert a fine needle through your skin into the port. The needle may feel like a pin prick.
- The saline will enter the port through the needle.
- After the saline has been added, the surgeon or assistant will ask you to drink some water to make sure the band has not been filled too tightly.
- At each adjustment, a small amount of saline will be added until you are able to eat less and lose weight at an appropriate rate without side effects. This will be your ideal fill level. You will know you have found the right fill level when you are able to lose one to two pounds a week.
- After an adjustment you will need to be on two days of liquids and then two days of pureed foods.



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**The doctor will insert a needle into the access port to inflate or deflate the gastric band. The band is filled with saline.**

## Important

Your ideal fill level may change as you lose weight. If you notice you can eat larger portions of food without feeling uncomfortable, this may be an indication you need a fill. Please make an appointment with your surgeon.

# Weight Loss Surgery Guidelines

- Eat three balanced meals a day. Include protein (eat this first), breads and starches, fruits, vegetables, and low-fat milk.
- Do not snack unless there is one arranged for you by your dietitian or nurse clinician.
- Measure your food portions according to your meal plan.
- Read food labels to help you choose healthful foods.
- Keep a food journal every day.
- Drink eight cups (64 ounces) of fluid each day. Cut out beverages that contain caffeine, carbonation, or sugar.
- Chew every bite of food 20 to 30 times until it feels like applesauce.
- Take 20 to 30 minutes to eat each meal.
- Avoid drinking liquids with meals.
- Wait at least 30 minutes after a meal to drink liquids.
- Do not use drinking straws.
- Eat out no more than one to two times a week.
- Exercise every day. You should exercise enough to raise your heart rate slightly.

# Agreement to Make Lifestyle Changes

I agree to make the following lifestyle changes after gastric banding surgery:

## Dietary Guidelines

1. I will follow the dietary guidelines listed in this book including following a clear liquid diet the first week after surgery, full liquids week two, pureed food weeks three and four, adding soft foods one at a time at week five.
2. I will choose foods low in sugar, low in fat, and high in protein (40 grams or more) each day.
3. I commit to eating three meals each day, with protein first at each meal.
4. I commit to chewing my food slowly and well (to the consistency of applesauce).
5. I will eat each meal for at least 20 to 30 minutes.
6. I will not drink with my meals or for 30 to 45 minutes after eating.
7. I will take the necessary vitamins and supplements as outlined in this book.

## Pregnancy

1. I agree to use effective birth control, even two forms if necessary, for at least one year after surgery.

## Fluid Intake

1. My goal for drinking water will be 64 ounces each day.
2. I will increase my fluid intake with increased levels of physical activity.
3. Alcohol is not recommended after weight loss surgery.

## Exercise Plan

1. My exercise goal will be to exercise an average of 30 minutes each day.
2. The physical activity should be aerobic in nature: using large muscle groups in a continuous rhythmic fashion (walking, biking, dancing or swimming).
3. Exercise can be broken up into three 10-minute sessions each day.

## Follow Up

1. I commit to returning to my bariatric surgeon's office for follow-up appointments at: one week, six weeks, then monthly for one year, then yearly.
2. I will follow recommended referrals made by the bariatric team. These may include referrals to a nutritionist, psychologist or other health care providers.
3. I understand the benefits of attending a support group and will make an attempt to regularly attend one in my area.

I commit to following all of the guidelines outlined by my surgeon and his or her staff. (This includes all instructions/teachings given to me before and after surgery and in this book.)

---

Patient signature

Date

---

Nurse witness

Date

# Gastric Banding Quiz

1. My band is at the right restriction when:

- a. I am losing one to two pounds each week
- b. I am satisfied with three-fourths cup of soft solids
- c. My satisfied feeling lasts four to six hours after I eat.
- d. I am tolerating liquids and purees, avoiding solids
- e. A, B and C

2. I need to be on the liquid phase for how many weeks after band placement?

- a. one week
- b. two weeks
- c. three weeks

3. After each band adjustment it is important to stay on liquids for two days and then purees for two days.

- true       false

4. Success of weight loss surgery depends on my ability to:

- a. make good food choices
- b. include structured exercise
- c. avoid drinking with meals and waiting for 30 minutes after
- d. all of the above

5. After surgery I need to see my surgeon every month up to one year or longer and then every year after that.

- true       false

6. All insurance companies pay for the band adjustments (fills).

- true       false

7. If I add a planned snack per staff direction, the best choice would be:

- a. pretzels
- b. yogurt
- c. low-fat string cheese
- d. crackers or granola
- e. B and C
- f. all of the above

**Ultimately, you are responsible for your weight loss to better health. If you follow the guidelines in this book, you can enjoy the benefits of your success. But if you snack, eat high-calorie foods, don't exercise, and don't follow up with your surgeon, you may fail to lose weight or may regain weight.**

**Be sure you are ready to make a long-time commitment to the new you.**





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