



Dr. Erbella's Lap Band Program

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LAP-BAND Post-Op Eating Instructions

For many people the word "diet" brings to mind suffering and failure, so we will not use it. We will focus on good nutrition & healthy eating habits instead. Right after surgery, there will be a transition from liquids to solid foods during the first 6 weeks. You will start with liquids for the first 2 weeks, and then soft "mushy" foods for the next 2 weeks. After 4 weeks, the following rules will help you succeed during your weight loss journey with the Lap Band.

Ten Important Rules for Patients to Follow:

1. **Eat only three small meals a day** (Do not eat between meals).
2. **Eat mostly solid foods. (Do not drink liquids with your meals** or within an hour before and after eating - This will cause the food to be washed through the band quickly and defeat the purpose of the band...to restrict!).
3. **Chew thoroughly.** (If you don't, you will not reach the sensation of fullness & be more likely to have food get stuck.)
4. **Avoid high calorie liquids.** (While juices are fine for thin people, we can sabotage the whole process with liquid calories!)
5. **Avoid "doughy" or "sticky" foods.** Avoid fibrous food (steak, asparagus, pineapple, rhubarb, broccoli, artichokes, celery), as they may not digest well. Dried fruits are likely to swell and get stuck in the new opening of the stomach. Doughy or sticky foods like pancakes, white bread, popcorn, chips and coconut can also obstruct the LAP-BAND.
6. **Stop eating as soon as you feel full** (If you overeat during the immediate post-operative phase, you will vomit and increase the risk of having the stomach tissue slip up through the band). "Eat only when you are hungry."
7. **Eat slowly and chew thoroughly (15 – 20 times a bite).**
8. **Drink at least 6 – 8 glasses of water per day.** Drink lots of water (48 oz – 64 oz/day) during the day. Avoid gulping water, sip small amounts slowly and gradually through a straw. You may find that cold water tastes better than lukewarm.
9. **Drink only low-calorie or zero-calorie liquids.**
10. **Exercise daily.**

By following these simple guidelines you WILL succeed with the Lap Band!

Other Things to Consider:

- **Stay away from carbonated or citrus drinks** to decrease nausea.
- Food that is difficult to digest also includes nuts, almonds, and peanuts.
- Caffeinated & alcoholic drinks are usually not an issue.
- Eat only good quality food. Solid food is more important than liquid food. In fact, the LAP-BAND will have no effect if you only consume liquid food as it will pass right through

Immediate Post-Op Diet (The First Night):

Clear liquids only (liquids you can see through), broth, Jell-O, apple juice, tea or popsicles. There are also clear protein drinks – Ultra Cal Liquid (Mead Johnson), Isopur (GNC store – raspberry, punch, or orange, has 0-carbs and whey protein), and Enlive (Ross – 10g of protein per 8 oz).

It is common to have post-op edema (swelling) of the stomach around the band as a result of the surgery. Do not be alarmed if you are unable to tolerate or swallow liquids easily the first day. Keep sipping liquids and water to stay well hydrated throughout the day and “wait it out” – do not panic. Things will become easier the following days.

First Two Weeks – Liquids: “Anything through a straw.”

Now you can have any liquid to drink including skim milk and tomato juice (a good source of protein and can be tolerated by LAP-BAND patients, unlike Gastric Bypass patients).

Continue with full liquids such as creamed soups and yogurt and include a “protein shake” (Ensure Light, Boost, Instant Carnation Breakfast) at least twice a day.

It is a good idea to try different “protein drinks” before surgery to see which you prefer. Chances are if you like it before, you will like and drink it following your surgery. You can also experiment and make your own protein drinks or smoothies.

You can at this time consume sugared drinks like fruit juices (however, try to avoid these because they contain too many calories).

Two to Four Weeks – “Mushy”:

Begin pureed or blended foods (for example, baby food, applesauce, yogurt, creamy soups, cooked cream of wheat, farina, cream of rice, pudding). Patients can puree the following foods with skim/soy milk or broth:

- Vegetables
- Meats
- Casseroles

DO NOT TRY SOLIDS YET! Patients who eat solid food too soon run the risk of dislocating the band, thereby developing an enlarged upper gastric pouch.

Fifth Week – Transition to Solid Food:

Begin a regular diet until first scheduled adjustment (if you are losing weight, 1 – 2 lbs/week, there is no need to adjust).

- “Sugar-free” products are OK to use now and should be encouraged.
- Eat ½ cup of food at a time or 1 ounce – 1 ½ ounce by the 5th week

Beware: the majority of patients will find it difficult, if not impossible, to eat **whole chunks of meat**, although ground beef is generally tolerated if well chewed.

Food must be chewed well and that it is important to make good food choices (to avoid patients’ losing their hair, etc., due to lack of protein).

Other Important Issues:

After Each Adjustment:

After Each fill, go back to liquids for 1 day, then “mushy” for 1 day, then resume a regular diet.

Alcohol:

Alcohol has a lot of calories, but an occasional glass of wine or other alcoholic beverage is not harmful to weight loss. One expert surgeon has experienced that those who drink a glass of wine in the evening have better weight-loss results than those who don’t drink at all (Dixon J. et al. Light to Moderate Alcohol Consumption: Obesity and the Metabolic Syndrome. *Am J Bariatric Medicine* 2002; 17(4): 11-14.)

Multivitamin:

Begin taking a **multivitamin** daily to ensure you are getting an adequate amount of vitamins and minerals. Any chewable or liquid multivitamin (adult dose) supplement that they choose is OK. Women who are menstruating should take a multivitamin with iron in it. All patients need to take 1500 mg of calcium daily as well. Older women may need additional calcium as they approach menopause.

Home Medications:

Patients should continue to take their prescribed medications, though they will need to make sure that all medications are **in liquid form for the first 2 weeks** unless approved by their surgeon and physician. Another option is to **cut in half or crush pills for the first 2 weeks**.

Diabetics:

If the patient is diabetic and taking insulin or hypoglycemic medication, work with your family physician to monitor dosage during weight loss – dosage amounts may vary. You should continue to monitor blood sugar levels at home as usual.
