

Stage Three – Regular Consistency Foods

Roux-en-Y Gastric Bypass

This stage is reflective of how you will eat "regularly" as a person who has had Gastric Bypass Surgery. It is important to consume at least **three balanced**, nutrient dense meals while always focusing on getting enough **protein** daily. It is still recommended to introduce new foods or new textures of foods back into your diet slowly; always try only one new food at a meal.

Protein Sources/Low Fat Dairy					
	•		Low fat soft cheese - cottage cheese, ricotta, string		
✓	1 oz. = 6-12 g of protein		cheese sticks		
			Non fat yogurt – Greek style has more protein		
✓	Serving size per meal:		Skinless chicken or turkey – puree if needed; infant food		
	1-3 oz or $\frac{1}{4}$ - $\frac{1}{2}$ cup		Low sodium/fat deli meat		
	•		Extra lean ground turkey or meat		
✓	Always build your meal around		Lean pork (round, loin)		
	protein!		Lean beef (round, loin)		
	r		Tofu, Tempeh		
✓	Use moist cooking methods for		Fish – tuna, salmon, crab, tilapia, shrimp, mussels,		
	preparation		oysters, halibut, sole		
	rr		Eggs/egg substitutes – made as desired		
✓	Try ground versions first		Beans – lentils, black, kidney, white, nonfat refried beans,		
	before whole pieces		garbanzo (hummus), edamame		
	r				
Vegetables – cooked or raw					
			Carrots		
✓	Serving size per meal:		Green beans		
	1-3 oz or $\frac{1}{4}$ - $\frac{1}{2}$ cup		Squash/Zucchini		
	-		Potatoes – sweet, white, red (no skins)		
✓	Canned are ok – make sure they		Mushrooms		
	are low sodium or wash under		Tomatoes		
	water before serving/cooking		Low sodium tomato juice		
			Broccoli		
✓	Fresh or frozen – both have the		Cauliflower		
	same nutritional value		Leafy greens – spinach, kale, arugula, collards		
			Asparagus		
✓	Consume a rainbow of		Cucumber		
	vegetables		Eggplant		
	-		Lettuce		
✓	List is NOT all inclusive		Cabbage		
			Corn		
			Peas		
			Celery		
			Artichoke		
			Brussel sprouts		
			Penners		

Fruits ✓ Serving size per meal: 1-3 oz or ¼ - ½ cup ✓ Not all inclusive		Apple, pear, nectarine, peach, plums Berries — Blueberries, raspberries, strawberries, blackberries Banana Melon — cantaloupe, honeydew, watermelon Citrus Fruit — orange, grapefruit, tangerine, Clementine's Pineapple, papaya, mango Grapes Cherries Dried fruits — without any added sugars
 ✓ Serving size per meal: up to 1-2 oz or ¼ cup ✓ Introduce no earlier than 8 weeks after surgery ✓ Not all inclusive 		Unsweetened oatmeal or cream of wheat Whole wheat bread – toasted tolerated better Whole wheat pasta Brown rice Quinoa* Couscous* Whole wheat/grain crackers Low sugar cereal – bran, whole wheat/grain
Healthy Fats ✓ Serving size per meal: 1-2 tablespoons; up to 1 oz or ½ cup ✓ Not all inclusive	000000000	Olive oil Coconut oil, Avocado (1/8 th or 2 oz) Nuts* - unsalted, with no added fat Seeds* - unsalted, with no added fat Nut butters* - "nut" should be the only ingredient Ground flax seed Olives Vinaigrette dressings Reduced calorie butter

Common problem foods:

- ✓ **Red meat** (steak, roast beef, pork) the muscle fiber of these foods may still be too difficult to chew enough and break down in your mouth to pass through the stoma
- ✓ Untoasted breads, rolls, biscuits try toasting for better tolerance
- ✓ Pasta
- ✓ Rice
- ✓ Membranes or citrus fruits
- ✓ Dried fruits, nuts, popcorn, coconut
- ✓ **Raw fruits and vegetables** salads, skins of fruit or vegetable

Points to remember...

- ✓ Chew your foods well
 - o Make sure to get to an apple sauce consistency before swallowing
- ✓ Eat Slowly
 - o Eating too fast can cause discomfort, nausea or vomiting
- ✓ No more than 4 6 ounces per meal (*half* should come from protein)
 - Use small Tupperware/Pyrex or ramekins to help with measuring servings
- ✓ Stop as soon as you are full
 - Listen to your hunger and satiety cues
- ✓ Only one new food at a time
 - o If you do not tolerate something; leave it alone for a couple days before you try it again
- ✓ Keep hydrated at least 64 ounces per day
- **✓** Eat and Drink separately
 - o Wait **30 minutes** after eating before drinking fluids.
- ✓ Protein, Protein goal of <u>60 grams</u> per day minimum
 - o Use protein supplements or protein snacks between meals to help reach this goal
- ✓ Walk daily
 - Increase physical activity as able/recommended by the surgeon
- ✓ Take your Vitamins!

Foods to avoid:

- ✓ **Sticky foods:** soft bread, sweet rice, macaroni and cheese, high fat melted cheese, custard
- ✓ **High fat and high sugar foods:** fried foods, greasy foods, butter, margarine, regular mayonnaise, sour cream, regular cream cheese, whole milk, half and half, ice cream, cakes, cookies, pies and other desserts, bacon, sausage, regular luncheon meats, regular potato and tortilla chips, heavy cream and salty gravy and sauces.
- ✓ Refined and processed foods: canned foods with lots of 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, high calorie frozen foods (pizza rolls, poppers, breaded meats), packaged cakes and cookies, boxed meal mixes (hamburger helper), sugary breakfast cereals, processed meats
- ✓ Other: Based on individual tolerance, you may need to avoid stringy foods like raw celery and asparagus stalks as these may block the stoma. Cruciferous vegetables like cabbage, broccoli and cauliflower may also cause gas in some individuals, so try them in small amounts first.

Your New Lifestyle

Your new eating habits should center on healthy food choices to reach your weight loss and maintain this goal for many years after surgery. Eat a balanced diet including lean protein, vegetables, fruits, low-fat dairy and whole grains ensure you are getting all the nutrition you need to stay healthy. It is still important to avoid and limit high sugar and high fat foods. Tolerance and portions of foods can change as the years pass which can contribute to old, unhealthier habits. Your gastric bypass is a tool to help you with weight loss but diet and exercise will continue to be your best defense in preventing weight regain years after surgery.

Plateaus

Plateaus are common and almost inevitable with any weight loss journey. You may find yourself at a stand still on the scale despite your continued efforts with healthy nutrition and physical activity. This can be very frustrating and discouraging. For some people, this can happen at the 6 or 12 month mark but for others this can happen more frequently. There is no way to determine when a plateau may happen and everyone will experience something a little different.

When you experience a plateau, the first step is to examine your diet and physical activity. Ask yourself if you are still practicing the habits that helped you lose weight initially. Are you eating 3 meals per day; getting enough protein; listening to your hunger and fullness ques; measuring your foods? Are you still making time for physical activity? It may be time to change things up to "shock" your body and jump start your weight loss again. Try new foods or recipes and activities to help keep you on track and prevent boredom.

Weight Regain

The possibility of weight regain typically rears it head about 2-5 years after surgery. The best strategy is to recognize the gain early and examine the possibility for the regain. One challenge may be your body's natural ability to adapt after surgery. The amount of calories you absorb from your meals now is greater than what you could absorb for the first year after surgery. Another challenge may be an increase in your pouch (stomach) size. The stomach is a muscle and capable of stretching when increased amounts of food are consumed over time. This is also a good time to look at your daily habits. Similar to weight loss plateaus, take a look at your diet and physical activity. Have you been less aware of your food choices? Have you put off exercising? Are you "grazing" on food all day? Remember, weight loss surgery only stops you from overeating in a moment. Make sure to follow up with the doctor and clinic as we are here to help prevent and tackle these challenges with you.

Follow Up

Follow up is an important aspect of weight loss surgery. It is important to have your blood work done every year to determine if you have any vitamin/mineral deficiencies and monitor labs such as cholesterol, triglycerides or blood sugar levels. Follow up can also help keep you accountable to your new lifestyle. If you move, it is important to establish care with a bariatric center in your new location. Ask the doctor for recommendations.