Diet and Nutrition After Gastrectomy: What You Should Know



General Guidelines and Issues to be Aware of

After total gastrectomy, your digestive system:

- · Holds a smaller quantity of food
- · Cannot grind food
- · Cannot digest and absorb every nutrient in food effectively
- · Will not send you the same signals to tell you to eat

To compensate for these effects, you will need to:

- · Eat smaller meals, having at least 6-8 small meals per day
- · Avoid drinking a lot of fluids with your meals
- · Chew your food very well
- · Take the recommended vitamins every day
 - > See the section on vitamin supplements
 - > Also talk to your dietitian about your individual needs
- Have small meals every few hours even when you don't feel hungry.

YOU WILL NEED TO:



Eat smaller meals & chew food well



Avoid drinking a lot of fluids with meals



Take your vitamins

Side Effects to Expect After Total Gastrectomy

Weight Loss:

Weight loss is fastest the first month after surgery. You can then expect gradual weight loss for 6-12 months after gastrectomy. This weight loss includes loss of both fat tissue and muscle mass. Speak with your dietitian to get specific recommendations to help you avoid losing weight too quickly, to avoid losing too much weight or too much muscle mass and to maintain a healthy weight long-term after gastrectomy.

Early satiety, or feeling full quickly.

- To get enough nutrition despite early satiety, you will need to eat high-calorie and high-protein foods every 1-2 hours until you are able to eat larger amounts.
- You can find guidance on your meal plan in "Diet and Nutrition After Gastrectomy: Your Plan."
- As your body adapts after surgery, you will gradually be able to increase portion sizes.

Anorexia, or not feeling hungry.

After gastrectomy, your body does not have the usual signals to tell you to eat. Therefore, you may forget to eat or forget to eat often enough to meet your nutrition needs.



- > To make sure you get enough nutrition:
 - Eat on a schedule, rather than waiting until you feel hungry.
 - Set timers or other reminders to eat and drink throughout the day.
 - Try protein drinks.

Nausea:

You may feel nauseous if you eat too much or don't chew your food well enough.

- Eat only small amounts of food, eat slowly and chew your food thoroughly before swallowing.
- If it has been more than two hours since your last meal or snack, nausea may be a hunger signal.









Constipation:

You are more likely to become constipated if you do not drink enough fluids, and it can be difficult to drink enough fluids after surgery because you feel full quickly (early satiety).

• To avoid constipation:

- > Sip on fluids between your meals.
- > Aim for at least 64 ounces of fluid per day.
- Choose unsweetened protein drinks for some of your small meals.
- > Take a short walk between meals and snacks.
- Talk to your dietitian about when it is safe to add high-fiber foods back into your diet. Talk to your dietitian and healthcare team about medications if constipation continues.

Bile Reflux:

Bile reflux is when bile, the digestive liquid produced by your liver, backs up into your esophagus (the tube between your mouth and the rest of your digestive tract).

To avoid bile reflux:

- > Sleep with your head elevated at least 30 degrees, about 6 inches or more.
- > Stay upright for at least 30-60 minutes after eating.
- > Maintain good posture and avoid leaning forward at the waist.
- > Eat small meals throughout the day and chew your food well.
- > Avoid constipation.
- If bile reflux continues despite taking these physical steps to avoid it, you may need medication. Talk your dietitian and health care team about your options.

Dumping Syndrome:

Dumping syndrome happens when large amounts of food or undigested food pass too quickly into the small intestine.

Symptoms of dumping syndrome can happen right after you eat (early dumping syndrome) or hours after eating (late dumping syndrome).

DUMPING SYNDROME

Early Dumping Syndrome.

- > Symptoms of early dumping syndrome include:
 - Abdominal cramping
- · Urgent diarrhea

Bloating

Feeling faint or weak

Nausea

Late Dumping Syndrome

- > Symptoms of late dumping syndrome can include:
 - Confusion
- Cold Sensation
- Sweating
- Double vision
- Drowsiness
- Blurred vision
- Weakness
- Hunger
- Dizziness
- Nausea
- Heat sensation
- Fear/anxiety
- Difficulty speaking
- Tiredness

shaking

- Palpitations
- Shivering/trembling/
- Tingling in the lips
- Difficulty concentrating
- To prevent both early and late dumping syndrome:
 - > Avoid foods and drinks with added sugars.
 - > Eat small meals often during the day.
 - > Eat protein at each meal and snack.
 - > Separate fluids from solid foods by at least 30 minutes.
 - > Chew food thoroughly.
 - Avoid meals or snacks with large portions of carbohydrates (example: fruit, starch) and always eat carbohydrates with protein.
- To treat dumping syndrome:
 - If you experience early dumping, sit upright in a chair or lie with the head of the bed at a 30-degree incline to slow the movement of food through your intestine. Eat or drink again as soon as possible to replace what your body did not fully absorb due to dumping.
 - If you experience late dumping, eat or drink a carbohydrate with protein as soon as possible to correct your low blood sugar. Do not correct low blood sugar with simple sugars or added sugars.



Staying Hydrated After Total Gastrectomy

Since you will feel full quickly and cannot drink large amounts while eating solid foods, you need to sip fluids throughout the day to avoid dehydration.

Dehydration can lead to constipation, electrolyte imbalances, fatigue, dizziness, confusion and nausea. Chronic dehydration increases the risk of kidney stones.

Talk to your dietitian about your fluid goal.

To avoid dehydration after gastrectomy:

- Start sipping on fluids early in the day and sip continuously between meals.
- · Keep a water bottle with you at all times.
- Don't wait until you feel thirsty to drink. If you are thirsty, you are already mildly dehydrated.
- Set a timer to remind yourself to drink.
- Use a food diary to track how much you are drinking.
- Avoid caffeinated beverages until you can meet your fluid needs every day.

Contact your health care team if you are unable to drink enough fluids to stay hydrated or if you experience severe dehydration.



Alcohol after Total Gastrectomy

Alcoholic drinks increase the risk of dehydration. In addition, even small amounts of alcohol can cause intoxication and low blood sugar after a total gastrectomy.

Some studies suggest an increased risk of alcohol use disorder after gastrectomy. Be cautious with any alcohol intake.



Vitamins and Minerals

You are a high risk for multiple vitamin and mineral deficiencies after total gastrectomy. Specially formulated vitamins, referred to as bariatric vitamins, result in fewer deficiencies than standard multivitamins.

Calcium citrate is the form of calcium that can be absorbed without stomach acid.

Take the recommended bariatric multivitamin and calcium citrate supplements every day. Take the calcium citrate at least 2 hours apart from iron-containing supplements.



You must take your multivitamin and calcium citrate every day to avoid problems associated with deficiencies, such as anemia, hair loss and low bone density. Talk to your dietitian about which specific bariatric formulated multivitamin and calcium citrate supplements are right for you.

Dental Care After Total Gastrectomy

After a total gastrectomy, you need to chew every bite of food completely so that your intestines can absorb your food, and you need healthy teeth to do this!

To make sure your teeth are healthy:

See your dentist before your total gastrectomy

- See your dentist every 6 months after surgery.
- Brush, floss and use mouthwash often during the day.
- Take your vitamins every day to avoid any micronutrient deficiencies.

