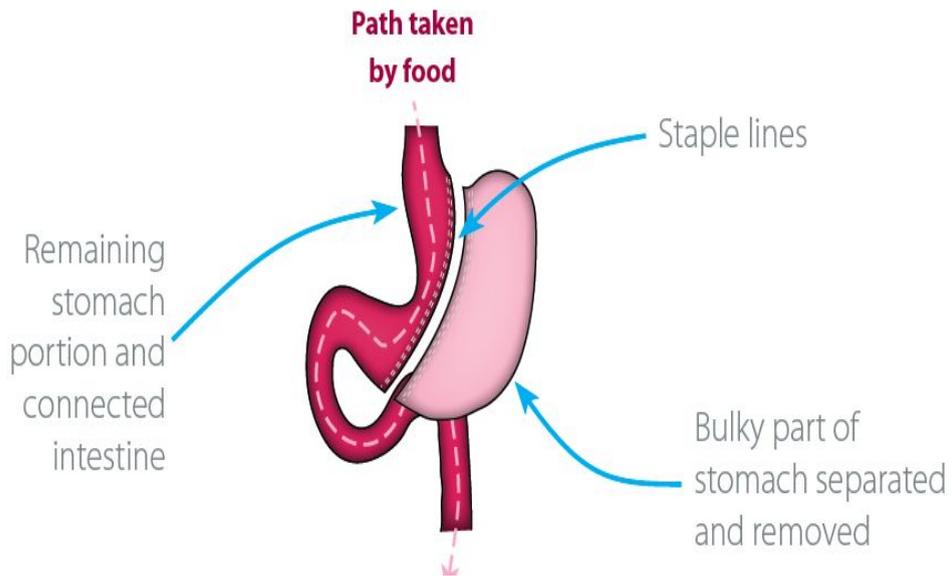
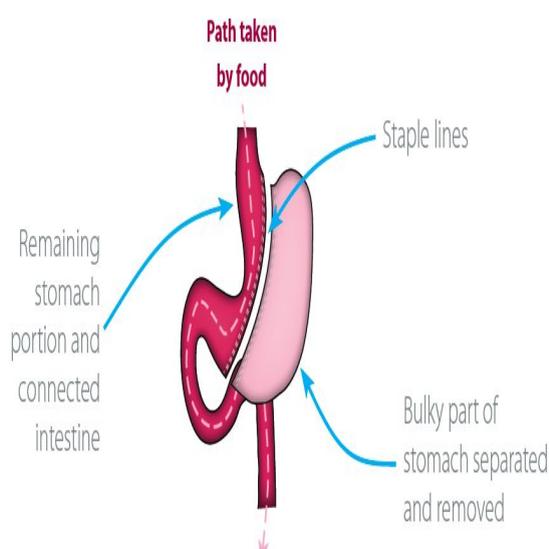


**EATING AND DRINKING FOLLOWING
A SLEEVE GASTRECTOMY**



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What is a sleeve gastrectomy?



A sleeve gastrectomy reduces the volume of your stomach by removing approximately 80% of your stomach and leaving a banana shaped tube (or sleeve) which runs along the inside curve of the stomach. The sleeve is about the size of a marker pen.

This will reduce the overall amount of food that you can eat, help to make you feel fuller sooner and also reduce your appetite. A reduced intake together with a low fat and low sugar diet will help you to lose weight.

Making the necessary lifestyle changes and healthy eating patterns will help you to maintain the weight loss long-term.

Introduction to the post-operative diet

To maximise the benefits of your surgery and avoid complications it is essential that you follow the post operative guidance on eating and drinking.

1. Gradually increase textures of foods.

You will need to avoid solid food for around 8 weeks after your surgery:

Weeks post surgery	Texture	Portion size
1 & 2	Liquid	100-200ml per drink, consume slowly
3 & 4	Puree	Start with 1-2 dessertspoons per meal Max 4 dessertspoons per meal
5, 6, 7 & 8	Soft	Start with 2-3 dessertspoons per meal Max 6 dessertspoons per meal

This slow progression from liquids to solid food will help to ensure that you do not put pressure on your stomach staples and stretch your new stomach sleeve. This may lead to vomiting and discomfort and affect long-term weight loss results.

Remember, this is just a guide and it may take you longer to progress on to each stage. This is not something to be worried about.

2. Choose your food and fluids carefully

- Focus on protein rich foods
- Follow a low fat and a low sugar diet
- Put the emphasis on low calorie food and drinks

This will help to support your weight loss and maintain your lean muscle mass during the rapid weight loss phase. If you struggle to take in enough protein you may find you have low energy levels or suffer with hair loss in future weeks or months.

3. Top-up your nutrition

Following the recommended vitamin and mineral regimen is essential after surgery. Your food choices may limit the quantity and type of vitamins and minerals available for absorption from food. This can make you feel low in energy and may result in problems such as hair loss or brittle nails in the short-term and more serious side effects such as bone thinning in the longer-term.

Recommended supplementation:

- Take a multivitamin and mineral supplement 1-2 per day:
 - Forceval capsule x 1/day (available via GP)
 - Sanatogen A-Z Complete, Tesco Complete Multivitamins & Minerals, Superdrug A-Z Multivitamins & Minerals, Lloyds pharmacy A-Z Multivitamins & Minerals, Sainsbury's A-Z Multivitamins & Minerals and Asda A-Z Multivitamins & Minerals x 2/day.
- Take a Calcium and Vitamin D supplement x2 per day
- Have regular vitamin B12 injections (3 monthly) starting at 3 months following surgery

During the first few months following your surgery you may not be able to swallow a large multivitamin and mineral tablet. Soluble or chewable alternatives are available:

- Forceval Soluble is a complete multivitamin and mineral in soluble form. Take x1 per day.
- Centrum Fruity Chewable is a chewable multivitamin and mineral supplement. Take x2 per day.
- The chewable multivitamin and mineral supplements are **not** complete so should not be used long-term.

It is important to get into the habit of taking your supplements every day.

You may need to take extra supplements such as iron or folic acid but these will be recommended as necessary by your Dietitian or bariatric team.

4. Establish healthy eating and lifestyle habits

In order to maintain your weight loss long-term you will need to:

- Develop a healthy way of eating and drinking
- Include regular exercise in your daily routine

The small stomach and reduced appetite will help in the early stages to lose weight but in the longer term, you will need to make healthy choices, regulate your portion sizes, avoid high calorie foods, and exercise to prevent weight regain.

Post surgery fluid diet - weeks 1 & 2

- Aim to drink at least **2 litres of fluid per day**
- Aim for at least **60g protein per day for women; 70g protein per day for men**
- To ensure you consume enough protein in this 2-week period, you will need to choose an average of **5 - 6 of the protein fluids per day** (see table below)
- You can top up your total fluid intake using choices from the free fluid allowance (page 5) and if necessary small volumes of fluids from the limited allowance (page 5).

Protein fluids

Aim to choose an average of **5-6 varied portions from the protein list** per day. These will need to be spread throughout the day.

Protein fluid	1 portion	Protein content per portion
Semi or Skimmed Milk	200mls (1/3 pint)	7g
Fortified skimmed milk (with skimmed milk powder added)	200ml (2 heaped tablespoons skimmed milk powder)	14g
Soya Milk (with added calcium)	200mls (1/3 pint)	4-6g
Sheeps milk	200ml	11g
Goats milk	200ml	6g
High protein yoghurt (no bits) To be blended/mixed with milk to a drinkable consistency	60g	6-7g
Protein shake (see 'post op diet top tips sheet' for suitable options)	200ml of a ready to drink bottle	15-20g
Meritene (previously known as Build-up) soups (Nestle)	150ml made up with water	7g
Cream of Chicken Soup (sieved)	200g	3g
Cream of Tomato Soup	200g	2g
Aim for a minimum protein intake of 60g per day		

N.B. These protein fluids can be used to make thin soups and shakes (see recipes on pages 7 and 8).

Free fluid allowance

In order to drink up to 2 litres total fluid per day, you will need to have other drinks from the free fluid allowance:

- Still water (tap or bottled, low calorie flavoured water; not carbonated/fizzy)
- Low calorie, no added sugar or sugar free squash
- Soup: tinned, dried or homemade. You may need to dilute with extra water or milk and then sieve to remove bits.
- Coffee and tea, including herbal teas

Limited fluid allowance

If you would like to introduce more varied fluids, you may add **1-2 portions** of the following fluids per day.

Take care not to exceed 1-2 portions of these per day. **These fluids have little protein content and will contribute to your total calorie intake, so try not to use them if possible.**

Fluid	1 portion	Protein Content per portion
Unsweetened Fruit & Veg Juice Dilute with water and sieve if juicing your own fruit, e.g. beetroot and orange or carrot, celery and apple Do not have fruit juice on its own as it is too high in carbs	150ml	0g
Vegetable Juice, e.g. carrot, tomato, mixed vegetable or "V8"	200ml	1.6g
Hot Chocolate low calorie, e.g. Options drink made with water <u>only</u>	200ml	1.4g
Easy Pesto Tomato Soup Measure 200mls of tomato juice into a small pan. Sir in 1 large teaspoon of pesto and heat gently.	200mls	1-2g

Fluid diet - sample day menu

The following table provides an example of how you can manage to consume at least 60g protein fluids throughout the day. You will need additional fluids to reach 2 litres.

Time	Fluid	Protein Content per portion
8.00am	150ml Protein shake	12g
9.30am	Coffee made with 100mls fortified skimmed milk	7g
11.00am	60g of high protein yoghurt mixed with milk	6-7g
1.30pm	150ml Protein shake	12g
3.00pm	150ml tea or coffee with skimmed milk	1-2g
4.30pm	150ml Protein shake	12g
6.00pm	150ml Protein shake	12g
8.00pm	200mls Options drink made up with water	1g
Total		63-65g

Top tips for fluid diet stage

- It is essential that you consume enough protein during the early weeks. This will help to ensure a speedy recovery and minimise side effects such as hair loss in later months. Aim for a minimum of 60g protein per day for women and 70g protein per day for men.
- In order to achieve enough protein, you will need to base your fluid diet on milk and milk products. If you do not drink cows' milk, you will need to find an alternative such as goat, sheep or soya milk.

- Milk powder can be added to soup and milk drinks to further increase the protein content, 1 tablespoon of milk powder provides approx. 3.5g protein.
- See page 7 for recipes and ideas for high protein liquids.
- Additional fluids can be taken throughout the day to reach 2 litres. These include water, tea, coffee, low calorie squash etc. from the free fluid allowance and limited fluid allowance (page 5).

High protein fluid recipes

Fortified milk - 42g protein per pint

This recipe makes 1 pint:

- 4 tbsp skimmed milk powder
- 1 pint / 570 ml cold skimmed milk
- Vanilla extract / unsweetened cocoa powder (optional)

Mix the milk powder with a little of the milk to form a paste

Stir in a pint of cold skimmed milk.

Use this milk throughout the day in tea, coffee, soups, mixed with yoghurt, as milk drink on its own, or in the recipes below.

Fortified fruit smoothie - 17g protein per 250ml portion

This recipe makes 2x 250ml portions:

- 150g plain Skyr yoghurt
- 300mls skimmed milk
- 2 heaped tablespoons skimmed milk powder
- Small amount fruit, e.g. 2 tablespoons coarsely chopped berries

Mix the milk powder with a little of the milk to form a paste

Stir in the remainder of the milk

Blend ingredients together until you get a fluid consistency, sift to remove any bits

Fortified custard – 8.5g protein per 150ml portion

This recipe makes 2x 150ml portions:

- 1 tablespoon Custard powder
- 280mls skimmed milk
- 2 heaped tablespoons skimmed milk powder

Mix the skimmed milk powder and custard powder together using a little of the milk to form a paste

Add the remainder of the milk and heat until boiling, stirring well throughout. This can be done in the microwave (for approximately 3 minutes) or on the hob.

N.B. Add more milk to achieve the fluid consistency required at this stage.

Non-nutritive sweetener or vanilla essence can be added for flavour.

Fortified coffee cooler - 14g protein per 200ml serving

This recipe makes 1 portion:

- 1 tsp coffee
- 200mls skimmed milk
- 2 heaped tablespoons skimmed milk powder

Mix the milk powder with a little of the milk to form a paste. Stir in the remainder of the milk and coffee. Add sweetener if desired.
This can be served hot or cold.

What should I expect after a sleeve gastrectomy?

The first 2 weeks

- For the first two weeks after your operation you are likely to feel tired and although we would encourage you to walk daily, do not overdo things.
- You may be aware of aches and pains in your chest wall and abdomen, especially as you increase your activity and reduce your painkillers. These are referred to as musculo-skeletal pains and are completely normal following keyhole surgery due to the forming of scar tissue.
- You may notice pain in your neck and shoulder; this can happen after any key-hole surgery and should diminish over time. This will improve at a faster rate if you aim to get up and about after surgery.
- Your stomach may feel bloated for a few days following surgery whilst your body returns to normal.
- You may experience gurgling or rumbling in your stomach. This does not mean that you are hungry!
- Constipation can occur following a sleeve gastrectomy operation due to a reduced fibre intake and smaller volumes of food and fluid. Remember to check that you are drinking at least 2 litres per day. If the constipation persists, speak with your GP/pharmacist regarding a laxative.
- Aim to use the time following your surgery to understand the difference between emotional hunger and physical hunger.

Post surgery pureed diet stage – weeks 3 & 4

You should now begin to make the slow transition from fluids to pureed foods over the next few weeks.

It remains important not to stretch the small stomach sleeve with solid foods or larger quantities.

Start with 1-2 dessert spoons of puree for each meal. Portion sizes during this stage should not exceed 4 dessert spoons in total for each meal.

Do not eat larger quantities than recommended even if you feel that you can. The newly created stomach sleeve will stretch and this will lead to you eating larger quantities, not recognising when you are satisfied and your weight loss will be affected.

You may wish to continue with the fluid diet for a little longer than 2 weeks or progress more slowly to a thick soup or pureed food consistency.

General Advice

- Follow a pureed diet of spoon-able consistency (see page 10) for weeks 3-5.
- High protein fluids e.g. protein shakes remain important and can provide a top-up of protein between meals. Aim for a minimum of 60g protein per day for women, 70g protein per day for men.
- Focus on protein foods first (meat, fish, low fat cheese, skimmed milk)
- Start week 3 by eating 3 small meals per day (if you are managing only a few teaspoons of food at this stage, you may need to include a very small mid-morning and mid-afternoon snack).
- Serve your meals in a small ramekin and never exceed this amount.
- Eat slowly (if you are taking longer than 20 minutes, your meal will go cold and this is a sign that you are eating too much).

- Stop eating **before** you experience any bloating or discomfort, these symptoms are your new signal that you have overeaten.
- If food is left on your plate, throw it away. **Never go back to food.**
- Avoid drinking with your meals. This will prevent the fluid mixing with the food and increasing the volume that enters your small stomach sleeve.
- Consume a minimum of 2 litres of fluids every day. You will need to drink regularly throughout the day so consider carrying a bottle of water.

Pureed diet - getting the correct Consistency

Pureed foods should have a smooth consistency and be free from lumps. They should be moist and of a “spoonable” consistency.

You will need a blender, liquidiser or food processor. If you have a freezer, it is often easier to process several portions at once then freeze the extra portions. This can also help you to manage the portion sizes.

Top tip: Freeze pureed foods in an ice cube tray, these individual portions will be approximately 1 dessertspoon and will help with portion control.

To puree food:

1. Cook meat, fish, and potato.
2. Remove any skin or gristle.
3. Cut into small chunks.
4. Add extra liquids such as skimmed milk, clear soup, stock, fat-free gravy or sauce, then blend.
5. Adjust the flavour by using herbs, spices, lemon juice, tomato puree etc.

If you find that you are having difficulty managing certain foods, check that you have added enough liquid and that it has been blended well enough and sieved to remove all lumps if necessary.

Meat, poultry and fish can be more difficult to blend to a pureed consistency. You may need to start with very small amounts of these foods and be more creative with your food choices.

Remember, that your taste for food and your food preferences will have changed so try things that you maybe haven't eaten for years!

Pureed diet stage - sample day menu

Below is a meal plan to help you plan your day.

Note the quantities may be smaller than those stated. Do not exceed these quantities.

8.00am	<p>$\frac{1}{4}$ - $\frac{1}{2}$ Weetabix with skimmed milk <i>or</i> 3-4 dessertspoons of thin porridge or Readybrek made with skimmed milk (made up quantity)</p>
9.30am	Coffee made with 100mls fortified skimmed milk
11.00am	60g of high protein yoghurt
12.30pm	<p>4 teaspoons of pureed chicken <i>or</i> fish in a low fat/fat free sauce <i>and</i> 2 teaspoons of mashed potato</p>
2.00pm	150ml tea or coffee with milk
3.30pm	<p>100ml fortified skimmed milk <i>or</i> 60g high protein yoghurt <i>or</i> 1 individual portion/triangle of low fat cheese</p>
6.00pm	<p>4 teaspoons of pureed chicken <i>or</i> fish in a low fat sauce <i>and</i> 2 teaspoons mashed potato</p>
7.30pm	Milky drink made with 100mls fortified skimmed milk
9.00pm	200mls Light hot chocolate drink (e.g. Options) made up with water

N.B. Vegetables have not been added to this sample day menu at this early stage. To avoid over filling and stretching your new stomach sleeve it is important not

to fill up on vegetables at this stage. Take your multivitamin and mineral supplement daily to provide you with the nutrients you are missing.

Foods to include in the pureed diet stage:

Breakfast:

- ½ Weetabix with skimmed milk (start with ¼ Weetabix initially)
- 2-4 **dessertspoons** of Readybrek or porridge
- 60g of high protein yoghurt e.g. Skyr (see ‘top tips for post-op diet sheet’ for suitable options)

Main meals:

- **Thick soups** containing lentils, pulses such as chickpeas, borlotti beans or other beans, or pureed chicken or fish.

Aim for a maximum of 4 **dessertspoons** of soup.

These can either be homemade or shop-bought. Soups do not contain much protein therefore you will need to add skimmed milk powder to increase the protein content. If the soup is too thick you will need to add more stock, milk or water to thin it down to a pureed consistency.

- **Pureed minced lamb, beef, pork or turkey, Quorn or tofu.**

Aim for 4 **teaspoons** and eat with mashed potato (maximum 2 **teaspoons** potato).

Use a low fat sauce or gravy to make a smooth, pureed consistency.

- **Dhal** is a spiced dish made using yellow split peas, or red or yellow lentils. Split peas require soaking but lentils do not.
- **Lentils** can be cooked and a variety of different foods added to taste. Try cooking lentils and adding some extra low fat cheese spread or crushed garlic, blended tinned tomatoes or herbs or spices of your choice.
- **Cottage cheese** (low fat variety). This is a great, low fat source of protein and can be eaten with mashed potato. If the consistency is not smooth enough, it can easily be mashed with a fork and a little milk added to soften.
- **Spreadable cheese** (extra light variety). Again this can be added to mashed potato to add protein. The cheese portions/triangles are a good way to help with portion control.

- **Tinned plum tomatoes.** These can be used as a useful store cupboard addition to minced meats or added to soups (for example, lentil and tomato soup). Remember to blend them to a smooth consistency.

Healthy snacks between meals:

- 60g of high protein yoghurt
- Individual portion/triangle of low fat cheese
- Low fat, low sugar custard (3-4 teaspoons) with sweetener added as required. Use custard powder to make up with skimmed milk. You can use the fortified milk to boost the protein content of the custard.
- Low fat, low sugar egg custard (3-4 teaspoons).

Post surgery soft diet stage - weeks 5, 6, 7 and 8

You should now be establishing a meal pattern of 3 small meals per day. Eat slowly and chew your food well. You can include some ‘crunchy’ foods such as low fat crispbreads or crackers but make sure they are chewed well (to a smooth paste) and have no hard pieces by the time you swallow.

Start with 3 dessert spoons of soft foods for each meal. Portion sizes during this stage should not exceed 6 dessert spoons in total for each meal.

You will be taking in less fluid in your food once you have moved onto the soft diet so you must make sure that you drink well between meals. You can include ½ pint of skimmed or semi-skimmed milk to have in drinks during the day and one small (150ml) glass natural fruit juice diluted at least 50% with water. If you are struggling to eat enough protein, remember to include some protein shakes between meals.

General advice

- Aim to progress onto a soft, mashed food over the next 1-2 weeks. Soft foods can easily be broken up with a fork.
- Include protein foods at every meal and eat these protein foods first (meat, fish, eggs, low fat cheese, and skimmed milk). Aim for a minimum of 60g protein per day for women; 70g protein per day for men.
- Aim for 3 small meals per day.
- Serve meals in a small ramekin or in a 3-5 inch plate and never exceed this amount.

- Try only one new food at a time. If you feel sick or vomit then your body is telling you that you are not ready for this food. Don't give up but try a small amount of the food again in a few days time.
- Eat slowly and chew food well. You should be spending about 15 minutes on your meals. If you are taking longer than 20 minutes your meal will go cold – this is an important sign that you are eating too much.
- Stop eating at the first of bloating or discomfort. This is a sign that you have eaten too much. Never go back to food.
- Avoid drinking with your meals. If the food mixes the fluid it will increase the volume that enters the stomach tube.
- Thirst is often mistaken for hunger so consume a minimum of 2 litres of fluid everyday.

Soft diet stage - sample day menu

Below is a meal plan to help you plan your day.

Note the quantities may be smaller than those stated. Do not exceed these quantities.

Breakfast 8am	½ Weetabix with skimmed or semi skimmed milk <i>or</i> 3-5 dessertspoons thick porridge or Readybrek <i>or</i> ¼ - ½ slice toast with a scraping of low fat spread and 1 medium poached egg
Mid Morning 10.30am	Coffee made with 100ml fortified skimmed milk or 60g of high protein yoghurt e.g. Skyr
Lunch 12.30pm	1 low fat crisp-bread or cracker <i>or</i> ¼ - ½ slice toast <i>with</i> 4 teaspoons low fat cottage cheese <i>or</i> 1 soft scrambled egg
Mid Afternoon 3.30pm	60g of high protein yoghurt <i>or</i> 1 individual portion/triangle of low fat cheese
Evening Meal 6pm	4 teaspoons minced meat or casserole chicken or fish in low-fat sauce <i>and</i> 2 teaspoons mashed potato or soft cooked pasta

Evening 8pm	60g high protein yoghurt <i>or</i> 1 individual portion/triangle of low fat cheese
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Remember to always eat your protein first, followed by a small amount of low fat carbohydrate.

Foods to include in the soft diet stage:

Breakfast:

- ½ Weetabix or Oatibix with skimmed or semi skimmed milk
- 3-5 **dessert spoons** of Readybrek or porridge
- 3-5 **dessert spoons** of Branflakes or Special K with skimmed or semi skimmed milk
- ¼ - ½ slice toast with 1 soft scrambled egg
- ¼ - ½ slice toast with 2-3 **dessertspoons** baked beans

**Avoid breakfast cereals with added dried fruit or nuts at this stage
Ensure all breakfast cereals do not have sugar added**

Main Meals:

Start with **3 dessert spoons** of soft foods for each meal which **includes the protein and carbohydrate** portion. Portion sizes during this stage **should not exceed 6 dessertspoons in total** for each meal.

N.B. Vegetables have not been added to this sample day menu at this early stage. To avoid over filling and stretching your new stomach sleeve it is important not to fill up on vegetables at this stage. Take your multivitamin and mineral supplement daily to provide you with the nutrients you are missing.

The meals listed below can be served with a small portion of boiled potatoes or boiled or roasted sweet potato, or a small portion of grains such as couscous, bulgur wheat, rice, or soft cooked pasta.

The ratio of protein to carbs should be about 75% protein + 25% carbs.

- **Stews or casseroles** containing lentils, pulses or peas, or small, well-cooked pieces of poultry or meat.
- **Minced meat or poultry dishes** such as cottage pie, shepherds' pie or turkey mince *served with low-fat gravy.*
- **Bolognese or chilli con carne** made with lean mince served with soft cooked pasta or rice.

- **Curry** made with chicken, tofu or lentils and low fat tomato sauces (e.g. rogan josh, balti, jalfrezi). Avoid creamy or coconut based curries which are high in fat.
- **Lasagne or Cannelloni** made with low fat cheese and skimmed milk *or* a low fat or diet variety of ready meal. Use less pasta than you would for a standard recipe in order to keep the carbs low.
- **Soft omelette or scrambled egg** (1 medium egg).
- **White poached fish** served with a white low-fat sauce *or* herbs and lemon.
- **Meat alternatives such as tofu or quorn pieces** can be served with soft potatoes, grains or pasta.
- **Fish pie** made with low-fat sauce *or* low-fat or diet variety of ready meal.
- **Tinned fish** such as mackerel or sardines are soft and provide a good protein source and require little preparation.
- **Dal and lentil dishes** as listed in the pureed diet stage can be used in this stage as an accompaniment to minced meat.
- **Baked beans (2-3 dessert spoons)** served on ¼ slice of toast.
- **Poached or casseroled chicken breast** (¼ of a small cooked chicken breast or 45g).
- **Cottage cheese** (low fat variety) with garlic, herbs or small amount of pineapple. This is a great, low fat source of protein and can be eaten with a low-fat crispbread or cracker.
- **Spreadable cheese** (extra light variety). Again this can be served with a low-fat crispbread or cracker. Cheese portions/triangles are a good way to help with portion control.
- **Hummus** (low fat variety) served with 1 low-fat crispbread or cracker.
- **Tinned plum tomatoes** are a soft and convenient accompaniment to minced meat.

Healthy Snacks between Meals:

- **60g of high protein yoghurt** (see ‘top tips for post-op diet’ sheet for suitable options)
- **Baked egg custard** (low fat and sugar variety). This can be made with skimmed milk and sweeteners.
- **1 individual portion/triangle of low fat cheese**

Portion sizes at this stage are a guide only. Do not exceed these quantities, but also be aware that you may not be able to manage these amounts.

Do not be concerned if you are managing only a few teaspoons of protein, and 1 or 2 teaspoons of carbohydrate. If you feel any discomfort with eating these amounts, you will need to reduce the portion size at your next meal.

If your weight loss starts to slow down or it is not as you or your bariatric team had expected, it is likely that your portion sizes are too large. This can be discussed with your Dietitian at your next appointment or you can contact your Dietitian to discuss further.

Dumping syndrome

Dumping syndrome is caused by the rapid emptying of food from your newly formed stomach pouch into your small intestine (bowel). The small intestine fills with this partially undigested food which acts like a sponge to draw fluid into the gut and causes the varied symptoms of dumping syndrome.

There are 2 types of dumping syndrome:

- "Early" dumping begins during or right after a meal. Symptoms of early dumping include nausea, vomiting, bloating, cramping, diarrhoea, dizziness and fatigue.
- "Late" dumping happens 1 to 3 hours after eating. Symptoms of late dumping include weakness, sweating, dizziness, and rarely heart palpitations.

Dumping syndrome is largely avoidable or manageable by avoiding certain foods (e.g. chocolate, biscuits, cakes, sweets, desserts, high sugar drinks) or changing eating habits and behaviours.

How to avoid/reduce symptoms:

- Avoid sugary and high fat foods (try to choose foods that contain no more than 5g of sugar / fat per 100g)
- Eat smaller meals
- Take your time with eating and chew food well
- Avoid drinking with meals. Leave 30 minutes after a meal before drinking

- Include a source of protein at each meal and keep carbohydrate portions small

Some people will be more prone to dumping syndrome with carbohydrate foods than others. If symptoms are problematic and there is not an obvious cause (i.e. high fat or sugary foods) it is recommended that you keep a detailed food and symptom diary to help identify which foods are more likely to cause symptoms.

Foods that are higher in fibre (and less refined or processed) will take longer to break down and are therefore less likely to cause dumping. For example, some people may tolerate mashed potato but others may experience dumping symptoms and only tolerate new potatoes.

Dumping syndrome can be difficult to understand and has many causes and symptoms. If you have experienced any of these symptoms, please ask to discuss your symptoms further with your Dietitian. It will be recommended that you keep a food and symptom diary for several days in advance of any discussion.

Notes:
