

Going Home After Gastric Bypass or Sleeve Gastrectomy Surgery

Before you leave the hospital, READ THIS PACKAGE.
ASK YOUR HEALTHCARE TEAM QUESTIONS to clarify information.



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Emergency Care after Leaving the Hospital

If you live outside the Greater Toronto Area, **please arrange to stay within a 1-hour drive from the hospital for at least 1 week after you leave the hospital, in case of any medical emergencies.** The healthcare team can provide you with information on nearby places to stay.

Go to the Emergency Department at HRH if you have one or more of the following:



- A fever over 38°C (100.4°F) or shaking chills
- An increase in pulse rate (your pulse races at rest)
- Pain in your legs, especially if the pain is one-sided, swelling, and red - this may be a blood clot
- Chest pain with shortness of breath
- Trouble breathing
- Increased pain at the incision site
- Cloudy or smelly drainage from the incision site
- Persistent pain, nausea, or vomiting after eating
- Prolonged periods of diarrhea
- Signs of bladder infection (urinating more often than usual; burning, pain, bleeding, or hesitancy when urinating)
- Pain in your upper back, chest, or left shoulder
- Persistent hiccups
- Confusion, depression, or unusual fatigue
- Inability to have a bowel movement and abdominal swelling and discomfort.

ABOUT BARIATRIC SURGERY: ROUX-EN-Y GASTRIC BYPASS

Bariatric surgery changes the size of your stomach and the length of your small intestine. The goal is to limit how much food you are able to eat and absorb at one time.

Less food is absorbed because it now bypasses part or most of the small intestine. This surgery can help you lose weight and decrease your risk of health problems, such as diabetes, breathing problems, and coronary artery disease (fatty build up on the walls of the arteries).

This surgery will make it difficult for you to eat large amounts of solid foods. After the surgery, you must eat very small meals. Eating too much food or eating too fast may cause unpleasant symptoms, such as nausea or vomiting.

The Procedure:

- 1** We close off a large portion of the stomach. This leaves a small pouch to hold food. This restricts the amount that you can eat at one time.
- 2** We cut the small intestine below the duodenum and reattach it to the new stomach pouch. This leaves a shortened path for food to travel.

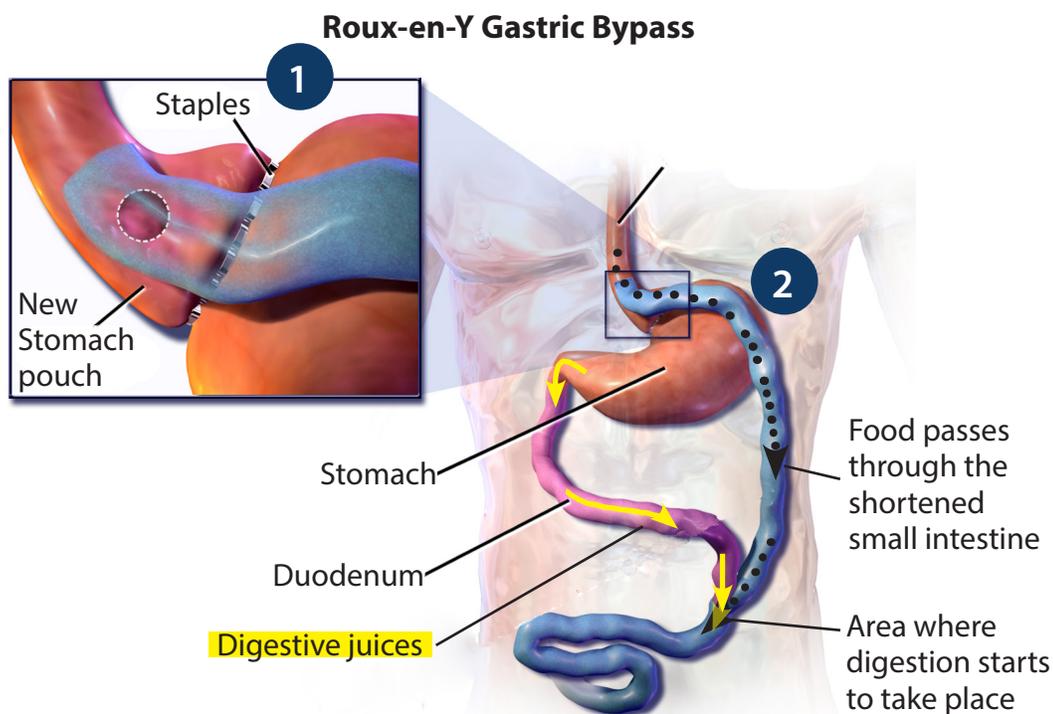


Image Source: Blausen.com staff. "Blausen gallery 2014". Wikiversity Journal of Medicine.
DOI:10.15347/wjm/2014.010. ISSN 20018762



Please follow the **Humber River Health Bariatric Surgery Program Resource Book**, or refer to the **Nutrition After Gastric Bypass or Sleeve Gastrectomy Surgery** summary handout.

Follow the diet

When you return home, be careful to follow the instructions that the dietitian has given you for diet progression.

If you do not follow the guidelines that we gave you, you may undo the benefits of the gastric bypass procedure. Please contact the dietitian if you have any questions.

Drink liquids in small amounts

- High water intake is beneficial, but you should sip liquids slowly and in small amounts.
- Drink only non-carbonated liquids that are low in sugar such as water, crystal light, or diet drinks.
- Drink the recommended protein drinks and low-fat milk.
- Continue to drink liquids (in small amounts) so that you do not become dehydrated. Some signs of dehydration include dry mouth and dark urine.
- Avoid using straws as this can cause you to swallow excess air.
- Speak to your doctor before drinking alcohol.

Eat slowly

Take your time when eating. Eating too much or too fast will cause nausea and vomiting.

Avoid the unpleasant effects of dumping syndrome

Avoid foods or liquids that are high in sugar or fat, such as cakes, cookies, pies, syrups, regular soda, ice cream, milkshakes, energy drinks, and juice.

If you continue to eat foods or drink liquids that are high in sugar or fat, you may experience symptoms of dumping syndrome, such as:

- Stomach pain
- Nausea
- Bloating
- Diarrhea
- Sweating
- Fainting

Take vitamins for life

Take your vitamins and mineral supplements, as prescribed, for life. **This is NOT an option!**

If you do not take the vitamins and minerals, this can cause problems such as anemia (low iron in blood), osteoporosis (having bones that can break easily), and neuropathy (nerve damage).

Heal with protein

Try to take in enough **protein** to help with the healing process after surgery and to **prevent malnutrition**.



Follow-up care is very important after bariatric surgery. Your healthcare team members oversee this care and can help you adjust to changes after surgery. **Make your follow-up appointments as soon as possible. Keep all your appointments.** Ask any questions you have.

Appointments with your Registered Dietitian

After your surgery, attend your regular follow-up visits with the registered dietitian in the Bariatric Clinic on the following schedule. Write the dates and times to remind you of your appointments.

At the visits, you will:

- Learn how to start soft solid foods (at the 1-month visit)
- Have blood work done (all visits)
- Tell the dietitian what you are eating and drinking and how many supplements you are taking (all visits).

Please come prepared with this information.

To book your appointments with the registered dietitian, contact:

Bariatric Clinic, Humber River Health

Tel: (416) 242-1000 ext. 23316

Dietitian Follow-up Appointments

At 1 month: _____

At 3 months: _____

At 6 months: _____

At 9 months: _____

At 12 months: _____

At least every year thereafter.

Appointment with your Surgeon

Make an appointment to see your surgeon 2 to 3 weeks after your surgery, as instructed by your surgeon.

To book your appointment with your surgeon, contact your surgeon's office.

Surgeon Follow-up Appointment

2 to 3 weeks after surgery: _____

Appointments with Other Healthcare Professionals

A **psychiatrist or psychologist or other mental health professional** can help you adjust to change. It may help to talk to someone about your body or other issues.

Please follow up with your family doctor if this is something that you may need after your surgery.

Taking Medicines

- To absorb the medicines properly:
 - Crush all non-chewable medicines and open all capsules. Mix powder with food.
 - Chew any chewable tablets completely and wash them down with liquid.
- You may take liquid forms of your medicines, when available. Shake the bottle well before you pour the medicine dose.
- You will be taking **vitamins for life**. Please make sure that you take your vitamins and mineral supplements daily as prescribed.
- We will adjust your medicines as you lose weight.
- If you are prescribed pain medicine, take them as prescribed for 1 to 2 weeks, as needed.
- If you take medicine for diabetes, speak to your doctor. You may need to adjust your doses to prevent hypoglycemia (low blood sugar). Remember to check your sugars often.

Ask your doctor which medicines you should be taking after your surgery.

AVOID THESE MEDICINES:



- ✗ **Do not** take acetylsalicylic acid (ASA) (Aspirin®) or ASA-containing products.
- ✗ **Do not** take non-steroidal anti-inflammatories, such as ibuprofen (Advil®, Motrin®) and naproxen (Naprosyn®, Aleve®).

Both of these types of medicines may cause ulcers in your pouch. If you were taking these medicines often before surgery, talk to your doctor about which medicines you can take instead of these.

Caring For Yourself

LUNG (BREATHING) PROBLEMS:

- Continue the coughing and deep breathing exercises you learned in the hospital.

PAIN:

- At first, you may have stomach or bowel cramping, shoulder pain, or nausea.

Tell your doctor if pain or nausea is severe or does not improve with time.

INCISION AND WOUND CARE:

- Keep the incision sites clean and dry. Wash the incision gently with mild soap and warm water. Gently pat the incision dry with a towel.
- If your doctor used Steri-Strips® (small white adhesive strips) to close the incision, you can remove them after one week, or leave them on until you see your surgeon.
- Follow your doctor's instructions about caring for the dressing that covers your incisions.

CONSTIPATION:

- Constipation is common after surgery. Prevent it by drinking enough liquids and increasing your fibre intake (try eating oat bran or a hot cereal).
- During the full fluids and puréed diet phase, try to sip at least 16 oz to 24 oz (473 mL to 710 mL) of water between meals throughout the day (as shown in the handouts).
- **Do not strain yourself when having a bowel movement.**

If you continue to have constipation, talk to your doctor before taking any suppositories, fleet enemas, or laxatives.

Resuming your Daily Activities

To ease back into your daily life, resume your normal activities gradually.

SHOWERING:

- Shower as needed. Avoid baths, swimming pools, and hot tubs for 2 weeks after going home. This helps prevent infection at the incision site.

ACTIVITY:

- Your activity will be limited only by your level of discomfort. Because the incisions are tiny, you can lift up to whatever is comfortable.
- Do light housework. Avoid strenuous chores, such as vacuuming or lifting full bags of garbage, until the doctor says it is okay.
- Climbing stairs are okay. Climb stairs slowly and pause after every few steps.
- Do short shopping trips.

DRIVING:

- You may return to driving after at least 1 week or once cleared by your surgeon. Your reflexes and response time may be affected by your surgery and the effects of the pain medicine. You are more likely to be accident-prone.

SEXUAL ACTIVITY:

- You may resume sexual activity after the first 3 weeks.

RETURN TO WORK:

- Ask your doctor when you can expect to return to work. Typically, a person with sedentary work may return to work within 2 to 3 weeks. This may vary on an individual basis.

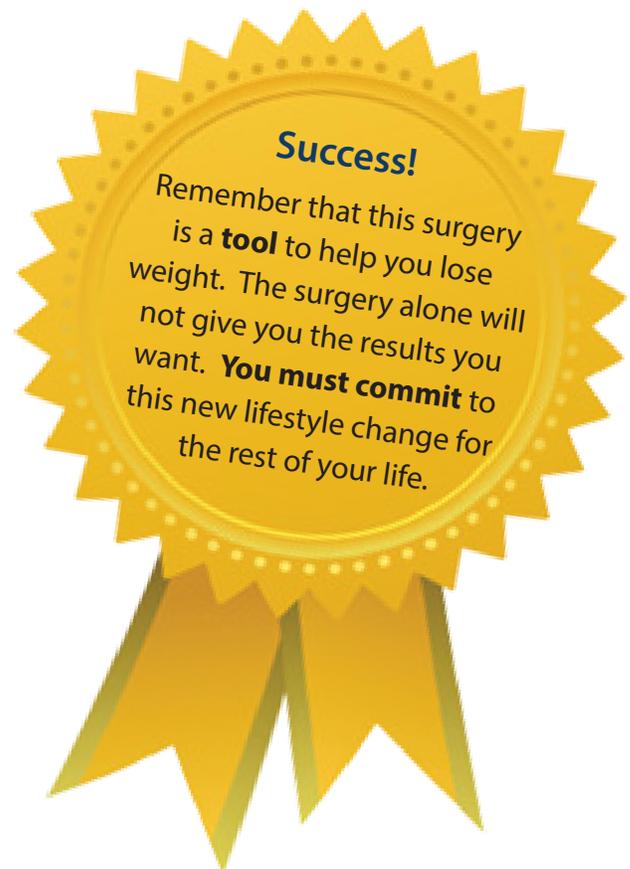
Becoming More Active

It is important to begin an exercise program as soon as possible. Exercise prevents complications after surgery and it improves weight loss.

- Start slowly, but try to be a little more active each day.
- You might try walking. Start by walking short distances. Walk as often as you feel able. Increase your pace and distance each day. When you feel tired or start hurting, stop and rest. Increase your activity slowly.
- Other activity options include chair aerobics or using a stationary bike.
- **Do not** try any stomach exercises, weight lifting or swimming. Ask your doctor when you can return to these activities.

Keep in mind that recovery takes several weeks. It is normal to feel tired. Rest as needed.

Use common sense! If you have pain, STOP what you are doing!



SPECIAL CONSIDERATIONS AFTER SURGERY

Certain problems may occur after bariatric surgery, such as:

Malnutrition

Your body may not be able to absorb all the nutrients it needs. Symptoms include:

- Fatigue,
- Weakness
- Swollen ankles.

Take the vitamin supplements as prescribed, **for life**, to help prevent malnutrition.

Call your doctor if symptoms remain.

Dehydration

Not getting enough liquids or excessive vomiting or diarrhea can lead to dehydration. Symptoms include:

- Feeling “dried out”
- Dry mouth, and/or
- Having dark urine.

Ask your healthcare team for tips on getting enough liquids.

If you increase your fluids and the symptoms remain, seek medical attention.



Temporary Hair Loss

This is a common side effect of this surgery due to the sudden and extreme weight loss.

Lactose Intolerance

You may lose the ability to digest lactose (a sugar found in dairy products). Symptoms include:

- Cramps
- Bloating
- Diarrhea.

Speak to your dietitian and doctor if you think this may be happening to you.

Gallstones and Gallbladder Removal

Extreme weight loss may cause deposits to form in your gallbladder called ‘gallstones’. As a result, you may need to remove your gallbladder at a later date, if you did not have it removed before or during your surgery.

For more information, talk with your doctor.

Loose Folds of Skin

This is common when a large amount of weight is lost. You can get the extra skin surgically removed when your weight has stabilized.

For more information, talk with your doctor.

Pregnancy After Surgery

Talk to your doctor if you are thinking about getting pregnant or about taking oral contraceptives (birth control).

If you have any questions, please contact:

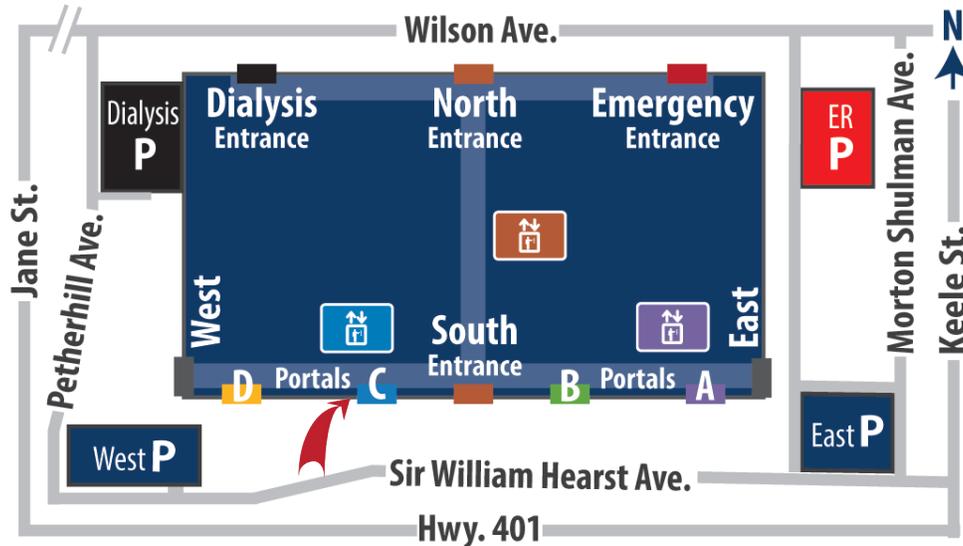


Bariatric Clinic

Humber River Health

1st Floor, 1235 Wilson Ave.,
Toronto, Ont. M3M 0B2

Tel: (416) 242-1000 ext. 23316



The Bariatric Clinic is located on Level 1.

IF ARRIVING BY CAR/WHEEL TRANS:

Enter through Portal of Care 'C' (located on Sir William Hearst Avenue) and walk directly across the hall to the Bariatric Clinic.

IF ARRIVING BY TTC/TRANSIT:

Enter the building through the North Entrance and walk straight ahead. When you reach the south end of the building, turn right and proceed to Portal of Care 'C'. The clinic is on the right.