

Diet after the Endoscopic Sleeve Gastroplasty (ESG)

(Non surgical sleeve, “Endosleeve”)

Immediately after surgery

A patient can start taking **low sugar clear liquids** 4 hours after surgery. Initially this should be water and ice chips, but any liquid that is not opaque (i.e. can be seen through) and low sugar is allowed. This includes diet iced tea, low calorie sport drinks (e.g. Propel Water), light soups (e.g. broth), sugar free Popsicles, sugar free Jell-O, etc. There is no limit on the volume of clear liquid that is allowed. However, all liquid should be taken slowly. Extremely hot or cold liquid may be less well tolerated than that of medium temperature. Avoid gulping, as this increases the amount of swallowed air (and subsequent belching) which can be uncomfortable.

Post-op Days 1-7

Follow the general guidelines given above. As the first week post-op progresses larger volumes can be consumed. Liquids that are hot or cold may be better tolerated. Read labels and avoid liquids with too many calories.

Post-op Weeks 2-4(Post-op Days 8-28)

If there are no prior problems, the patient may progress to the **soft low sugar, low fat diet** for weeks 2-4. This does not mean pureed food – a better limit on the consistency of the food is that it should be easily mashed up with a regular fork. Foods that do not pass this test (e.g. chicken or bread) need to be avoided. These meals should also be low in sugar (less than 4-5 grams per meal) and low in fat (less than 6 grams). It is essential to read labels, not only for overall carbohydrate and fat content, but also for specific ingredients. When sugar or high fructose corn syrup is one of the first ingredients, that food product should be avoided. Similarly, saturated and trans-fats should not be consumed. Protein on the other hand should be emphasized with a target of 12-20 grams per meal. Soft foods rich in protein include baked fish, tuna, lean ground beef, and legumes (e.g. beans, lentils).

After Post-op Week 4 (>28 days Post-op)

After the fourth week post-op the patient should start the **solid low sugar, low fat diet**. This includes all solid foods as long as they are low sugar and low fat (see above). The objective is 3 meals a day with approximately 4-5 grams of carbohydrate, 6 grams of fat and 12-20 grams of protein for each meal. Food should be chewed well, but not to the level of puree. It is also essential for the patient to eat slowly as this will help prevent vomiting if there is restriction.

How to Eat after the Endoscopic Sleeve Gastroplasty

Remember that the ESG is a suturing where the stomach is converted from a larger sac – with a large capacity to hold food – to a narrow tube. This method is not as restricting as the gastric bypass or the adjustable gastric band. However, the reservoir function of the stomach is greatly reduced. The operation works because: 1) the ability of storing food in the stomach is much less, and 2) the restricted section of the stomach produced the majority of the hunger hormone and studies are showing a positive impact.

Several important points must be kept in mind. The patient cannot put too much food into the sleeve too fast, which will result in discomfort or vomiting. This unpleasant problem can almost be eliminated if the patient eats slowly and pays attention to what he/she is feeling while eating. Patients should stop eating at the first sign of fullness.

Liquids pass through the new system without restriction and can lead to the uptake of too many calories. Juices, milk, ice cream, latte, Gatorade, sodas, soups etc. should be avoided. Even such “healthy” choices as protein shakes and fortified vitamin drinks should be avoided as they have too many calories. Liquids should be no calorie or low calorie such as: water, iced tea (artificial sweetener), coffee (artificial sweetener), skim or 1% milk, crystal lite, low calorie sport waters (e.g. Propel), and diet sodas (after 30 days). Look at labels. All liquid should be less than 5-10 calories per serving. Protein supplementation should be in powder form (whey protein) and put on solid food.

If these guidelines are followed, the best effect will be achieved with a gastric sleeve, and the patient will get the most weight loss from the surgery.*

* Results will vary by person and are based upon the patient, the surgery type and the compliance with the aftercare program. As with any medical procedure or surgery, there are specific risks and possible complications. The testimonials, statements, and opinions presented on our website are applicable to the individuals depicted. Results may not be representative of the experience of others. Testimonials are voluntarily provided and are not paid, nor were they provided with free products, services, or any benefits in exchange for said statements. The testimonials are representative of patient experience but the exact number of pounds lost and experience will be unique and individual to each patient.