

Medical Weight Management (MWM) Centre

Bariatric Surgery Resource*

You have been given this resource because you are interested in undergoing bariatric surgery as part of your obesity treatment. **If you are considering bariatric surgery, be aware that it requires a serious lifelong commitment to your health, as you play a vital role in ensuring the success of your surgery.** The process involves extensive preparation, many appointments before and after surgery, education, and long-term changes to your diet and lifestyle.

If you meet the requirements as summarized in this resource, one of our physicians will refer you to Richmond Metabolic and Bariatric Surgery program (RMBS) when deemed appropriate.

Remember, when reviewing these requirements, the primary goal is to gradually introduce lifestyle changes. Gradual changes to food intake and exercise are essential for your long-term success after surgery. By making changes slowly, you will increase the likelihood that these behaviours will last for the rest of your life.

Surgery is just one of the tools used to manage obesity, weight loss and maintenance, and to truly reach your goals for improved health. We believe, and research supports, that long-term success after bariatric surgery strongly depends on making sustainable changes to what we eat and how we exercise!

1) Do Your Research & Ask Questions! Learn about bariatric surgery for obesity management, what is involved (the benefits & risks), and how this will impact your life and those around you.

Carefully review the contents of the RMBS website: <http://www.rmbsurgery.com>

Other Websites:

Canadian Obesity Network (Public website): <http://www.obesitynetwork.ca/>

Forum on Obesity help: <http://www.obesityhelp.com/>

Obesity Action Coalition: <http://www.obesityaction.org/>

Misconception about bariatric surgery:

<http://www.theglobeandmail.com/life/health-and-fitness/health-advisor/weight-loss-surgery-is-anything-but-an-easy-way-out/article20306480/>

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Here are some things to help further explore and understand bariatric surgery for obesity management.

Books recommended:

Weight Loss Surgery for Dummies: <http://www.amazon.ca/Weight-Loss-Surgery-For-Dummies/dp/0764584472>

Weight Loss Surgery Work Book: <http://www.amazon.ca/The-Weight-Loss-Surgery-Workbook/dp/1572248998>

The Complete Weight Loss Surgery Guide and Diet Program: <http://www.amazon.ca/Complete-Weight-Loss-Surgery-Guide-Program/dp/0778802736>

2) Start a Food and Activity Journal (this can be in the form of a booklet (paper and pen), OR recorded on the computer OR on a mobile phone app - many of our patients have found 'MyFitnessPal', 'Lose It!' or 'Baritastic' to be very useful).

- Write down daily food and beverage intake including types of foods, beverages and condiments. Record the quantities of each (e.g. cups, tablespoons, ounces, etc.).
- Don't forget to record snacks too as these types of foods are often an overlooked source of calories.
- Write down daily exercise activities including type of exercise and times
- This journal is crucial to success! It allows patients and the members of the MWM team to track progress and find areas where positive changes can be made.
- Bring your journal to EACH AND EVERY APPOINTMENT with a team member and bariatric medical visits. Motivation and commitment are keys to being considered for bariatric surgery. Forgetting your journal shows a lack of both.

3) Dietary Tips to Get Started

- Make slow, progressive changes to your food intake. Remember the goal is durable, sustainable, long-term change.
- Gradually limit meals eaten at restaurants and fast-food outlets (Aim to limit eating out to 2 times per week). You have much better control of the food you eat when you buy it and cook it yourself. Don't shop for groceries on an empty stomach – this helps to avoid impulsive decisions.
- Focus on fresh foods in the grocery store. These are a much better alternative to processed foods. Work towards preparing most of your meals from home using whole foods and avoiding or limiting pre-prepared processed foods.
- Get into the habit of reading labels (nutrition facts and especially ingredients list). The more knowledge you have about foods you are eating, the more informed and aware you will be in making healthier choices.

- Eat breakfast, lunch, and dinner at similar times every day and avoiding skipping meals. This means working towards a more structured eating pattern, which is critical after surgery, as you are limited by how much food you can eat in one sitting.
- Plan your meals ahead of time - again, it is very difficult to make good food choices when you're hungry! Planning ahead helps to prevent impulsive food choices.
- Separate solid foods from liquids by 30 minutes and vice-versa. With the gastric bypass whatever liquid you have during your meal or snack will flush food out of the stomach and into your intestine since you no longer has a pyloric sphincter (the valve that connects your stomach and intestine). As a result you will feel less full at meals and snacks, and feel hungry again sooner after eating. With the sleeve gastrectomy the pyloric sphincter remains and you will have a very small pouch so won't be able to fit food and liquids, so displacing much needed nutrition. You may also experience some digestive discomforts as a result of drinking and eating together.
- Start to work on eliminating carbonated, caffeinated, and alcoholic beverages from your diet. You need to be free of these beverages before you start the pre-op diet.
- Liquids should be limited to water, de-caffeinated tea or coffee, or milk.
- Drink 6-8 cups (1.5-2 litres per day) of water a day.
- Feelings of hunger and fullness may be very different after bariatric surgery and change over time, and so mindful eating becomes an important and critical skill to learn. The ideal time to start practicing mindful eating skills and techniques is before surgery. These include eating slowly, taking small bites and chewing your food well, savouring the food and paying attention to taste and texture, putting away distractions and focusing on the eating experience. Book recommendation to learn more: *Eating Mindfully: How to End Mindless Eating and Enjoy a Balanced Relationship with Food*, by Susan Albers
- The MWM Centre dietitian runs a specific Bariatric Surgery Module group medical visits which focus on the nutrition and lifestyle requirements for surgery, pre-op diet, post-op diet stages, nutritional supplements, eating techniques, and more helpful information to help you decide if bariatric surgery is for you so that you can make an informed choice.

4) Exercise Tips

- As with dietary changes, the goal is to gradually introduce exercise in a safe way in order to slowly condition your body and avoid injury.
- Focus both on cardiovascular activities and resistance training.
- Dedicated time should be set aside for exercise at a moderate intensity. Cleaning the house or walking around at work doesn't count.
- The goal is move your body for a total of at least 30 minutes a day at a moderate intensity, if you are able.
- If you need help to move towards this, you can speak to a Qualified Exercise Professionals for FREE at the Physical Activity Service line by calling 8-1-1 at HealthLink BC. Tell them you are working towards bariatric surgery to get more tailored support.

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5) Researching Surgery

Choosing the type of surgery that is right for you is an important step. It must be an informed decision for you so make sure you do your research and have a sense of what form of bariatric surgery, Sleeve Gastrectomy (SG), Roux-En-Y Gastric Bypass (RYGB) or Biliopancreatic Diversion with Duodenal Switch (BPD/DS). Ask questions. The doctors at the RMBS program will review the three types of surgeries offered, their benefits and their risks, and their recommendations based on your medical information. You will ask any further questions and finalize your choice when you meet with the surgeons Dr. Nguyen, Dr. Sampath and Dr. Yorke from the RMBS Program.

6) Mental Health:

- If you have a mental illness, a substantial period of mental health stability (at least 2 years) documented by mental health professional or GP treating the mental illness (a letter will need to be provided as part of the RMBS Program referral).
- No cognitive, personality disorder, or substance abuse disorder that could affect compliance with treatment.
- No history of self-harm/suicide as an increased risk post-surgery.
- No active binge eating disorder.
- Completed a cognitive behavior therapy program such as Living Life To The Full or a Stress Management course.
- A history of good compliance/adherence with medical appointments and treatment recommendations.

7) Other requirements to be considered for bariatric surgery:

- RMBS Program has a 6 month smoke free policy. You must stop smoking and vaping a minimum 6 months before being referred to the RMBS Program and stop using non-prescription or illicit drugs 18 months before surgery.
- If using medicinal cannabis, no smoking or vaping, however if using edibles or tinctures for medicinal use, you can still be referred, though the RMBS program will speak with you about alternatives if possible.
- Have stopped drinking alcohol, beer and wine, caffeine, and carbonated beverages before the pre-op surgery diet.
- Evaluation, diagnosis and treatment of any sleep disorders, especially obstructive sleep apnea, need to be addressed prior to referral and a compliance report provided.
- Good management of type 2 diabetes by having blood sugars levels within target range or improvements in blood glucose levels. This may also involve changes in your medication(s). Hemoglobin A1c need to be less than 8.5%.

- Psychological evaluation of patients before bariatric surgery is a critical step, not only to identify contraindications for surgery, but also — and more so — to better understand your motivation, readiness, behavioral challenges, and emotional factors that may impact your coping and adjustment through surgery and the associated lifestyle changes. This is undertaken by both the MWM Centre and the RMBS Mental Health team.
- Be aware you will be required to buy and take **for the rest of your life every day** certain nutritional supplements such as a multi-vitamin mineral iron, vitamin D, calcium, B vitamins, iron and any others you may need if any nutritional deficiencies develop. This is an added cost that needs to be planned for.
- Be aware if you undergo bariatric surgery for the treatment of your obesity, this requires long-term continued care. It is highly recommended you stay engaged with our program as there are mandatory post-bariatric visits at least once yearly to monitor your health, so that any problems or concerns that develop over time can be addressed by an experienced team. You need to be able to feel safe to share your challenges and struggles, so that you can get help when you need it most! Your caregivers understand and expect that ups and downs happen, and that life changes and the body adapts over time. “Tune-ups” are possible, and useful.

Ineligibility (not limited to):

- ☐ Greater than 65 years of age (over 65 needs to be assessed on an individual basis)
- ☐ BMI greater than 65 (over 65 needs to be assessed on an individual basis)
- ☐ Current drug or alcohol dependency (within 18 months of referral)
- ☐ Recent major cancer (life threatening, within last 2 years)
- ☐ Untreated or inadequately treated psychiatric illness
- ☐ History of self-harm/suicide – as risk increases post-surgery
- ☐ Cognitive disorder, personality disorder, or substance abuse disorder that could affect compliance with treatment
- ☐ Having had gastric surgery before (previous bariatric surgery means you will be considered on a case by case basis)
- ☐ No history of significant gastrointestinal disease - e.g Peptic ulcer, Crohn’s, Colitis, delayed gastric emptying (more so for Roux-en-Y Gastric Bypass Surgery)
- ☐ Using or dependent on nonsteroidal anti-inflammatory drugs (NSAIDs)
- ☐ You have not made appropriate changes in your eating or activity habits
- ☐ You have not attended or have been compliant with your medical appointments.
- ☐ Not taking vitamin D, multivitamin mineral supplements, and others recommended by MWM Centre

Bariatric Surgery Requirements Checklist:

Medical

- ☐ No significant cardiopulmonary or medical comorbidity that requires additional assessment
- ☐ Sleep apnea being treated, uses cpap/bipap or other apparatus nightly (obtain compliance report from sleep company)
- ☐ Blood sugar under good control, Hemoglobin A1c <8.5%
- ☐ Other chronic metabolic issues well treated (e.g. hypertension, dyslipidemia, hypothyroidism)
- ☐ Smoke and vape free for at least 6 months by the time of Richmond orientation (if using cannabis for medical reasons, it is requested you switch to edibles or tinctures)
- ☐ No use of illicit drugs
- ☐ Abdominal ultrasound within the last year (will be arranged by MWM Centre team when appropriate)
- ☐ Pre-op screening for H. Pylori (will be arranged by MWM Centre team when appropriate)
- ☐ Bone mineral density test (will be arranged by MWM Centre team when appropriate)

Mental health

- ☐ Review and possibly redo phase 2 questionnaires at MWM Centre
- ☐ A substantial period of mental health stability documented by mental health professional or GP treating mental illness (obtain documentation from patient)
- ☐ No active eating disorder (e.g. binge eating disorder)

Education

- ☐ Complete 8 week Core program at MWM Centre
- ☐ Completed LLTTF, Mayo Clinic Stress Management, or another Cognitive Behavior Therapy (CBT) course prior to referral
- ☐ Completed the 4 week Bariatric Education Module at MWM Centre
- ☐ Read a recommended bariatric surgery book and research the different types of surgeries

Eating Habits

- ☐ Must be recording food intake daily (at least 80% of the time) with online app or paper & pen
- ☐ Has a sense of food portion amounts having a food scale and household measuring cups and spoons
- ☐ Regular meal pattern (not eating meals at irregular times, breakfast within 60-90 minutes from waking, eating every 2-4 hours)
- ☐ Makes space & time for meal breaks, prioritizes eating & meal times (not skipping meals and snacks)
- ☐ Good basic nutrition knowledge (e.g. balanced meals, protein, fibre/carb and fat rich foods)
- ☐ Able to base daily food choices and groceries on foods that are more wholesome and nutritious (grains/ legumes, fruit and vegetables, nuts/seeds, dairy and protein choices, (reduced use or no longer use of high fat/sugar/salt processed foods)

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- ☐ Reads nutrition fact labels and ingredient list to make healthier choices
- ☐ Able to meal plan ahead (food planning)
- ☐ Prepare most meals and snacks from home
- ☐ Eating out or pre-prepared, processed, convenience foods less than 2 times per week
- ☐ When eating away from home, make healthy restaurant choices
- ☐ Eating a minimum amount of protein daily (60 grams women & 70 grams men). Spreading protein rich foods throughout the day 20-35 grams at meals and 5-15 grams at snacks.
- ☐ Eating some fruit (1-3 servings; where serving = ½ cup) and vegetables (at least 1-2 cups; serving ½ cup or 1 cup leafy greens) everyday
- ☐ Emotional or problematic eating managed with non-food coping strategies
- ☐ No longer eating excessively at nighttime or more than 50% calories after 6 pm
- ☐ Limits junk food or sweets (high calorie density) to <2 per week or satisfied with a small mindful indulgence
- ☐ Practice spreading liquids and solid food by 30 minutes
- ☐ Eating mindfully at meals – chewing food well, eating slowly (taking minimum 20 minutes to consume food), with minimal distractions (no longer eating on the run, at desk, or in car)
- ☐ Drinking minimum of 1.5 Litres (6 cups or 48 fl oz) of water per day - ideally spread throughout day
- ☐ No longer drinking alcohol (beer, wine, liquor), caffeine and carbonated beverages
- ☐ Chooses low/no calorie beverages (no longer drinking high calorie beverages like regular pop, juice, specialty/dessert coffees)

Physical Activity

- ☐ Make time for at least 30 minutes of structured activity each day (not including unstructured activity e.g. household chores, gardening)
- ☐ Has tried to incorporate both cardio (walking, jogging, dancing) and strength (bands, light weights, etc.) training into weekly schedule
- ☐ May wear a pedometer to assess level of activity

Milieu / Mental Wellness

- ☐ Has positive social support, people who support bariatric surgery and will help our patient maintain the nutrition and lifestyle behavior requirements long-term
- ☐ Able to manage things financially
- ☐ Can Identify triggers and barriers to healthy eating and active living, and make a plan for change
- ☐ Improved self-care