



University
Hospitals Sussex
NHS Foundation Trust

Dietary advice during pregnancy following weight loss surgery

Patient information

Introduction

If you are planning to have a baby please contact your bariatric team/bariatric dietitian as soon as possible so that we can advise you on your nutritional intake during your pregnancy. You must also inform your midwife/obstetrician that you have had bariatric surgery as they may need to do some additional checks. such as blood tests and scans.

It is recommended that you wait at least 12-18 months to have a baby after bariatric surgery. This is so you can achieve your weight loss goals and to avoid the risk of nutritional deficiencies.

For most patients the surgical procedure and subsequent weight loss greatly improves fertility. Please use reliable contraception until you are ready to become pregnant.

Dietary advice during your pregnancy

Protein

It is important to include adequate protein in your diet. Include two portions of meat, fish (please note foods to avoid section), eggs or pulses and three portions of dairy products a day e.g. milk, cheese and yoghurts.

Carbohydrate

Include a portion of carbohydrate at each main meal. Choose a slow release carbohydrate as they help to satisfy you and stop swings in your blood sugar. Examples include porridge, muesli, weetabix, shredded wheat, new potatoes, jacket potatoes, wholemeal / granary bread / pitta breads, basmati rice, wholewheat pasta. If you have had a by-pass and are vulnerable to dumping syndrome remember to check food labels for sugar content and aim for less than 5g of sugar per 100g portion.

Iron

If you are low in iron, you will find you get very tired. Your midwife will check your iron levels and advise you if your levels are low. Make sure your diet includes lean red meat, green leafy vegetables, dried fruits (watch the sugar level), nuts, well cooked eggs and fortified breakfast cereals. To aid the absorption of iron into your bloodstream take the iron rich foods with a source of Vitamin C, e.g.citrus fruits, green leafy vegetables, berries, potatoes, diluted fruit juice.

Calcium

Calcium is important for the growth and development of baby's bones. In the last 3 months of pregnancy try and have four portions of milk products daily. If you have been advised to take a Calcium tablet, continue to take it. A portion of dairy is: 200ml milk, 1 pot (150g) yogurt, 30g cheese.

Folic acid

Folic Acid (Folate) is important for pregnancy as it can help prevent birth defects known as neural tube defects, which can cause conditions such as spina bifida. In addition to taking your folic acid supplement every day it is worth boosting your intake with folate rich foods such as green leafy vegetables, brown rice and breakfast cereals and bread that have been fortified with folic acid.

Vitamin D

Vitamin D helps your body to absorb Calcium and helps baby's development. Food sources of Vitamin D include oily fish, fortified margarines and fortified breakfast cereals. The best source of Vitamin D is from the summer sun and exposure of just a few minutes each day can top up your levels but be careful to avoid burning and sun damage.

Foods to avoid

These foods should be avoided due to the risk to baby:

- Raw seafood, such as oysters or sushi
- Cheeses with a white, 'mouldy' rind, such as Brie and Camembert, and blue-veined cheeses like Stilton
- Raw or undercooked meat and poultry. Cook thoroughly, but remember to keep them moist to help with tolerance of your band or by-pass.
- Liver and liver products (pate, liver sausage)
- Shark, marlin, swordfish.
- Eat no more than four medium-size cans (140g) tuna, or two fresh tuna steaks a week, due to harmful levels of mercury.
- Raw or lightly cooked eggs that are produced under the British Lion Code of Practice are safe to be consumed.
- Alcohol.

Supplement Advice

Multivitamin and mineral supplement

Your normal multivitamin and mineral supplement is not suitable during pregnancy. Unless you are taking Forceval, you will need to switch to a pregnancy preparation e.g. Sanatogen Mother-to-be or Pregnacare. Pregaday is not a complete supplement. Your supplement needs to be taken throughout your pregnancy and whilst breastfeeding.

Folic acid supplement

If you are planning to have a baby then it is recommended that you take a folic acid tablet per day pre-conceptually and up until the 12th week of pregnancy. Since you have had a bariatric surgery, you will need to ask your GP to prescribe 5mg of folic acid per day.

Vitamin A

Do NOT take Vitamin A supplements or any tablet that contains Vitamin A (retinol). Too much can harm your baby. This includes cod liver oil tablets.

Calcium and Vitamin D supplement (Gastric bypass or sleeve only)
Pregnant and breastfeeding women are advised to take a supplement of 10mcg per day of Vitamin D. You can carry on with your Calcium and Vitamin D supplement which should include 800mg of Calcium and 20mcg of Vitamin D per day. If you have been advised to take a higher dose of Vitamin D due to low blood levels, continue with this advice.

Iron supplement (Gastric bypass or sleeve only)
You can continue with your iron supplement.

Vitamin B12 injections (Gastric bypass or sleeve only)
You can continue with your 1mg of Vitamin B12 injections every 2-3 months.

Bariatric Surgery considerations

Weight changes during your pregnancy

It is not advisable to lose weight during your pregnancy but if you have fallen pregnant within the first 12 months following surgery this may occur. You may find that you gain weight during your pregnancy and this is normal. However, large weight gain during pregnancy can pose risks to you and your baby. Some women find the change in body shape hard to deal with after they have lost a considerable amount of weight. It is important that you talk about how you are feeling and seek advice and support from the bariatric team.

Gastric band

If you have had a gastric band you may need an alteration of your band inflation to ensure that you are not becoming overly tight and too restrictive with your diet. Close contact and supervision from the bariatric team is essential.

Morning sickness

Take care to maintain your fluid level to ensure that you do not get dehydrated. Sipping fluids throughout the day is useful. Carbohydrates and plain foods are often more tolerable. Crackers, crisp breads etc. are helpful in stabilising your blood sugar and reducing nausea.

Gestational Diabetes Test (Oral Glucose Tolerance Test OGTT)

If you have had a gastric bypass and are vulnerable to eating sugar, this test is not appropriate for you. Please inform your midwife/obstetrician and alternative screening methods should be considered.

For further information on healthy eating during your pregnancy visit the NHS pregnancy

Information website:

<https://www.nhs.uk/conditions/pregnancy-and-baby/healthy-pregnancy-diet/>

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