

## **Preoperative diet**

# Nutrition and Dietetics Department

**Patient Information Leaflet** 

## Introduction

This booklet is to give some general information about what to eat and drink if you are due for surgery.

## Why would I need to change my diet?

Having surgery puts a lot of metabolic stress on the body. This booklet is not aimed at **weight loss**, but rather at making small additions and small substitutions to your current diet to try and give you the best outcome after your surgery.

You may even have been recommended to **gain weight** before your surgery in order to optimise your nutritional status.

Optimising your nutritional status prior to your surgery may help to:

- Help you recover after your surgery.
- Reduce the risk of surgical related complications.
- Reduce your length of stay in hospital.

Optimising your diet before surgery is not about:

- Starving yourself to reach that goal weight.
- Avoiding all the foods you like.
- Following a restricted diet.

## **General tips**

- You should aim to have regular, well-balanced meals with a particular emphasis on protein sources.
- Protein sources can come from both meat and non-meat sources.
- Eat plenty of vegetables and fruit, they are rich in vitamins and minerals.
- Use wholegrain varieties of carbohydrates where possible. Wholemeal bread, cereal and pasta provide a good source of fibre and are more filling.
- Aim for 60 minutes of activity each day and avoid sitting for longer than one hour at a time.
- Try and take a vitamin D supplement (minimum 10mg).

## Protein

Protein is important both before and after surgery. After surgery, your body is in a state of metabolic stress and will utilise protein stores (muscle mass) that you build up before surgery. Having a larger store of body proteins will not only aid healing, but will help build immunity.

Try to include a high protein food with each meal. This can include:

- Meat (e.g. chicken, lamb, beef, pork, turkey).
- Fish (e.g. tuna, cod, salmon, herring, trout, haddock).
- Soya, tofu, Quorn and other vegetable protein alternatives.
- Nuts (e.g. peanuts, almonds, walnuts, pecan).
- Seeds (e.g. linseeds, sesame seeds, pumpkin seeds, sunflower seeds).
- Cheese (all cheeses soft and hard).
- Eggs.
- Beans and pulses (lentils, kidney beans, black beans).

As a general rule of thumb, try to aim for at least a third of your meal to be from protein sources.

Protein supplementation may not be required if you are able to get an adequate source from your current diet. Your surgeon may have referred you to a dietitian who may recommend a protein supplement prescription.

## Carbohydrates

These include bread, potatoes, rice, pasta, grains and cereals. It is recommended to opt for wholegrain varieties of carbohydrates, such as whole-wheat seeded bread, wholegrain pasta and brown rice. Whole grain varieties are packed with multivitamins and fibre. These can contribute to an overall improvement in health, such as lowering blood pressure, helping to maintain a steady blood glucose control and lowering cholesterol. Try to continue with wholegrain carbohydrates as a long term choice if possible, even after surgery.

## Fat

Fat is essential for our health. It is a good source of energy, provides us with essential fatty acids and helps the uptake of some vitamins. Fat becomes problematic when we consume the wrong type and quantity. It is known to be better for our health to reduce the levels of saturated fat in our diet, and increase the levels of unsaturated fat. Sources of saturated fat include fatty cuts of meat and processed meats, cheeses and pastries.

#### **Unsaturated fat:**

This includes polyunsaturated fats, e.g. sunflower, corn and soya oils; and monounsaturated fats e.g. olive and rapeseed oil.

Oily fish (omega-3 fatty acids), nuts, seeds and avocados are all good sources of omega-6 unsaturated fats and may help to reduce the level of lipids (fats) in our blood.

Remember: they are still high in calories, so their use should be limited if trying to lose weight, i.e. use low fat spreads or cooking oils and try to grill, bake or microwave rather than frying.

## Fruits and vegetables

These provide a good variety of vitamins, minerals and, importantly, fibre. Fresh, frozen and tinned varieties of fruit and vegetables are all great ways of getting these micronutrients in your diet. Aim for a minimum of five portions of fruit and vegetables per day.

Remember: it does not need to just be on the side of your plate, try and incorporate additional vegetables into the meals you are eating. For example, adding carrot, pepper, mushrooms and plum tomatoes to a pasta sauce is a very effective way of increasing your vegetable intake.

## Exercise

Exercise (if possible) leading up to surgery is just as important as getting your diet right. Resistance exercise, such as body weight, resistance bands or weight lifting can help build our pool of muscle proteins. This will help to increase our store of protein which the body can draw on following surgery. Exercise alone, or a good diet alone, does not have the same synergistic benefit as doing both together.

Aim for resistance exercise at least three times a week if you are able to. Do not feel that that means you have to go to the gym every day, find a routine that fits into your lifestyle and works for you and build up your tolerance slowly.

## Weight gain

Your doctor may have identified a need for you to gain weight leading up to your surgery. This can lead to beneficial outcomes, such as a reduced stay in hospital following your surgery and aiding recovery in this period. If your doctor thinks you may benefit from a small amount of weight gain, please follow the advice in the **small appetite diet sheet**, which should have been given to you alongside this leaflet.

If you are identified as benefiting from additional weight gain, you may have been referred to see a dietitian or been prescribed supplementation to aid weight gain.

## Weight loss

Regular exercise may also result in weight loss, however, it is increasing your protein stores and increasing lean muscle mass via exercise that has the greater benefit.

If you are identified as likely to benefit from weight loss, you may have been referred to a dietitian for diet and exercise advice before your surgery.

A healthy weight loss of 1-2kg (2-4lb) per month may be beneficial if you are identified as benefiting from additional weight loss. If you find yourself losing weight at a faster rate than this, you may not be getting all the nutrition you need to optimise your nutritional status before surgery.

## Supplements (vitamin D, protein, multivitamin)

There is strong evidence to suggest that taking a vitamin D supplement not only benefits for surgery, but for overall health. It is recommended that **all** individuals take a minimum of a 10mg vitamin D supplement daily. This level of supplementation is available over the counter at any pharmacist or supermarket. Your surgeon may recommend a higher dose depending on your vitamin D levels. A multivitamin is not a sole substitute for a well-balanced diet, however, it may be beneficial. An A-Z multivitamin (with vitamin D) may help to improve overall nutritional status, however, it is not essential.

## How do I contact you?

If you have any questions about this diet, or are having any problems with your food, e.g. lack of appetite, please do not hesitate to contact your dietitian (8.30am to 4.30pm, Monday to Friday). If we are unable to take your call, please leave a message and we will call you back.

Dietitian: .....

Telephone number: 01384 244017

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

The dietitians on 01384 244017 (8.30am to 4.30pm, Monday to Friday)

Russells Hall Hospital switchboard number: 01384 456111

#### This leaflet can be downloaded or printed from:

http://dgft.nhs.uk/services-and-wards/dietetics/

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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