

Going Home

After weight loss surgery

This section of the Guide to Your Weight Loss Surgery explains what to expect when you leave the hospital.

When to Call

Call your nurse or the surgery resident on call **right away** if you have any of these symptoms. They may be a sign of a serious problem:

- A hard time breathing
- New pain in your chest or calf, or in another part of your leg
- Fever over 101.5°F (38°C)
- Vomiting that occurs often and does not get better
- Bleeding or drainage from your incision
- Burning or pain when you urinate, or needing to urinate often
- Not being able to swallow food or keep food down
- Heart rate higher than 150 beats per minute



Call your nurse or the surgery resident on call right away if you have any of the symptoms listed on this page.

Common Questions and Concerns

After you go home from the hospital, you may have questions or concerns that you do not know how to handle. Many patients have questions about eating, pain issues, bowel function, fatigue or low energy levels, and not being able to exercise.

Eating

You will meet with your dietitian at every clinic visit. Together, you will adjust your diet to make sure you stay well-nourished while you are losing weight.

Here are basic guidelines for eating when you go home:

Gastric Bypass and Sleeve Gastrectomy Patients	Laparoscopic Gastric Band Patients
<p>At home, you will follow a blended diet until your first clinic visit. Pay attention to the foods you eat: what you are eating, the consistency of the food (how thick or thin it is), how often you eat, how much you eat, and how quickly you eat. If you eat too much too quickly, or if you advance your diet too soon, you may have nausea and vomiting.</p> <p>At your first clinic visit after surgery, you will meet with the dietitian to talk about advancing your diet to soft, easy-to-chew foods. It is important to eat and drink during this time, even if you do not feel hungry.</p>	<p>Right after surgery, your first meals will be clear liquids such as Jell-O and broth. As your diet advances, you can include full liquids like milk and protein supplements.</p> <p>Once you go home, you will follow the Full Liquid Diet until your first clinic visit. At this visit, you will meet with the dietitian to talk about advancing your diet to a Pureed Blended Diet. It is important to eat and drink during this time, even if you do not feel hungry.</p>

See Section 10, “Lifestyle and Diet Changes,” for more information. If you cannot solve your eating issue on your own, please call your dietitian.

Pain

You should expect to have pain after surgery, and it may last for several weeks. You will go home with liquid pain medicine to help keep you comfortable.

Pain can be caused by your incisions, swelling, or stress on your muscles. Pain may also come from eating too fast or too much at a time. Remember to eat slowly, chew your food well, and follow portion recommendations.

Incision Pain

You may have pain around your incisions. Place a small ice pack over your incisions for short periods to help reduce this pain. Be sure to wrap the ice pack in a clean towel or cloth to protect your skin. If your incisions become swollen, red, or more tender, call your nurse.

Your pain medicine should help with incision pain. You may also be able to take liquid acetaminophen (Tylenol) for more relief. **Check with your doctor or nurse before taking any medicines other than the medicines that were prescribed for you.**

Constipation

Constipation can cause stomach pain. Be sure to take your stool softener, drink plenty of fluids, and walk every day. You may also take laxatives as advised by your doctor.

Call your nurse right away if you have:

- Severe constipation with pain that is getting worse,
- Stomach *distention* (bloating), and
- Vomiting

These symptoms can be signs of a more serious problem, such as a bowel obstruction.

Gas Pains

You may also have gas pains. To help ease these pains:

- Try an over-the-counter medicine that contains *simethicone*.
- Avoid carbonated drinks and vegetables in the cabbage family, since they can cause intestinal gas.

You may also have cramping, diarrhea, and *dumping syndrome* (weakness, dizziness, nausea, and fast heart beat right after eating). Talk with your dietitian and change your diet as needed to stop or prevent these types of pain.

Muscle Pain

The types of pain you have will change over time. Your surgical pain will slowly lessen.

Gastric Bypass and Sleeve Gastrectomy Patients	Laparoscopic Gastric Band Patients
Most patients who have had gastric bypass and sleeve gastrectomy surgery do not need regular doses of prescription pain medicines after the first 2 to 3 weeks after surgery.	Most patients who have had gastric band surgery do not need regular doses of prescription pain medicines after the first 1 to 2 weeks after surgery.

As you become more active and begin using muscles that haven't worked hard for a long time, you may have more pain or soreness in other areas. This pain may occur only when you are in certain positions or move a certain way, and it will not be constant. Use warm packs or ice packs and take acetaminophen (Tylenol), as needed. You may also get relief from a warm shower or relaxing bath.

Fatigue

You should expect to feel fatigued (very tired) and have low energy after major surgery. Prescription pain medicine can also make you feel sleepy. You may need to take naps from time to time.

But, you should also resist the urge to stay in bed. Walking and other exercise will help increase your energy and stamina. Start out slowly and increase your activity every day.

What to Expect During Your First Weeks at Home

- Recovery from major surgery takes about 4 to 6 weeks. Healing after surgery goes on for as long as a year.
- Your recovery will depend on many factors, such as the type of surgery you had, your medical condition before surgery, and any complications after surgery.
- Your first several days at home after surgery will likely be overwhelming. You may feel tired or weak. You may feel anxious or unsure, and even a little depressed.
- We require you to have a support person at home with you for at least part of each day for the first 1 to 2 weeks. Your support person can help with meals, shopping, chores, personal care, driving, and even child or pet care. Your support person can also be your “cheerleader,” and help you stay focused on the progress you are making.

Week 1 After Surgery

During the first week, you should be able to:

- Shower every day.
- Walk 150 to 200 feet, with or without using a device such as a walker to help you.

Weeks 2 to 3 After Surgery

During the first 2 to 3 weeks:

- You may be on prescription pain medicine that contains opioids. Do not drive a car or use machinery while taking this medicine.

Weeks 4 to 6 After Surgery

During the first 4 to 6 weeks:

- Slowly increase how much you lift, but do not lift anything that causes pain.
- Your energy level will slowly increase.
- You may be able to return to work outside of the home.

6 Weeks After Surgery

Starting 6 weeks after your surgery:

- You should be able to eat solid foods.
- You will likely be able to manage without help from others.
- You should be able to do some activities and exercise for longer times.

Recovery is different for each person. Do not feel discouraged if your recovery does not match this timeline. Everyone has setbacks. These are short-term. Overall, you will be making progress toward your goals of weight loss and better health.



By your clinic visit 6 weeks after surgery, we want you to be walking 1 to 2 miles a day, or about 30 minutes a day.

Activity

You must be active to lose weight and be healthy. When you are home after surgery, be as active as possible during the day. Rest when you need to rest, but get up often to walk about in your home. This keeps the blood flowing in your legs and helps increase your energy level.

As you feel stronger, start taking short walks outside. You may need someone to walk with you at first. By your clinic visit 6 weeks after surgery, we want you to be walking 1 to 2 miles a day, or about 30 minutes a day. Most patients are able to do this.

At your follow-up visits with your surgeon, we will assess your progress and talk about other activities for you to begin. Some of the activities that we encourage you to try are:

- Using an exercise bicycle (stationary bike)
- Water aerobics
- Daily walks
- Walk-a-thons

Doing these activities will burn calories. Exercising and following the eating plan your dietitian and surgeon have recommended will help you lose weight. Some patients may need to work with a physical therapist or an occupational therapist to help them do some activities.

Walk as much as you can without getting overly tired. Each week, as you are recovering from your surgery, try to increase the distance you are walking and your activity level in general. This will help you get your strength back faster.

You will need to follow a good exercise and eating plan for the rest of your life. Your surgery is a tool to help you lose weight. Exercise and the proper diet will help you lose the weight and keep it off. See Section 10, “Lifestyle and Diet Changes,” to learn more.

Showering and Incision Care

- Shower daily. You may need to use a shower chair and a hand-held shower attachment until you are stronger. Gently clean with soap and water. Pat dry with a clean towel.
- Do **not** put any creams, lotions, or antibiotic ointments on your incision(s).
- Wash your hands before touching your surgical site and before putting on any dressings (bandages).
- If you have Steri-Strips (thin strips of tape) on your incisions:
 - Do not pull them off. They will fall off on their own in about 2 weeks.
 - It is OK for these strips to get wet.
- Clean any drainage with warm water.

If you had an **open weight loss surgery** with a larger incision:

- You will have staples over your wound. These will be removed at your first or second clinic visit after surgery.
- Tape a sterile 4-inch by 4-inch dressing over your wound. Change this dressing 2 times a day, or more often if the dressing becomes dirty or soaks through.
- A small amount of clear or blood-tinged drainage from your wound is normal. This usually stops in 1 or 2 days.
- If you have increasing blood or drainage, or if the area around an incision is getting more painful and red, call the clinic nurse or after-hours phone number. Tell the nurse or on-call doctor this is happening.

Other Reminders

Blood Thinner Medicine

Gastric bypass and sleeve gastrectomy patients will need to give themselves injections of a blood thinner 2 times a day. If you have any questions, call the Center for Bariatric Surgery Clinic at 206-598-2274.

Bowel Care

You should be having a bowel movement every 2 to 3 days. Regular bowel movements will prevent a blockage in your bowel and keep you more comfortable. If you are not having regular bowel movements:

- Call the clinic nurse.

- Use a laxative such as senna or milk of magnesia. You can buy these products at any drugstore without a prescription.
- Also see information on “Bowel Care” in Section 9 for more tips to help with bowel movements.

Products such as Gas-X will help reduce gas (*flatulence*). You can buy them at any drugstore without a prescription.

Diabetes Care

After weight loss surgery, many people who have diabetes need a smaller dose of their diabetes medicine(s) or can stop using them. When you are discharged from the hospital after surgery, you will receive dosage instructions for your diabetes medicine(s).

You must schedule an appointment with the doctor who manages your diabetes, either your primary care doctor or an endocrinologist. This appointment should be set for 1 to 2 weeks after you are discharged from the hospital or care facility. At this visit, the doctor will review your blood sugar levels and adjust the doses of your diabetes medicine(s) if needed.

Always check with your doctor before stopping any prescription medicines such as diabetes or blood pressure medicines.

Mental Health Medicines

If you have been taking antidepressants or other medicines that a psychiatrist prescribed, have that doctor check them after surgery. Your doses may need to be changed.

Vitamin B12 (for Gastric Bypass and Sleeve Gastrectomy Patients)

Starting 6 weeks after surgery, you will need to start taking vitamin B12. You can take a vitamin B12 pill every day or have an injection every month. You will need to take vitamin B12 for the rest of your life.

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Center for Bariatric
Surgery: 206-598-2274