

Why do I need vitamins and minerals after bariatric surgery?

All forms of bariatric surgery increase the risk of nutritional deficiencies either because of changes in anatomy, quantity of food consumed, or variety of food. You need vitamins and minerals every single day in adequate amounts in order for your body to function properly. If your body is lacking in nutrients over days, weeks or months, life threatening and debilitating consequences can occur.

- *Fatigue/anemia*
- *Poor immune function contributing to cancer risk, cardiovascular disease, side effects of diabetes*
- *Bone loss/fractures*
- *Neuropathy or neurological impairment*
- *Damage to heart*
- *Blindness*

Why take a bariatric vitamin?

The needs of the bariatric surgery patient are unique. After surgery, bariatric patients have less gastric acid, which is required for proper breakdown and absorption of vitamins. Bariatric products are specifically designed to be processed and absorbed with the new anatomy in a bariatric surgery patient. They also provide high quality ingredients at the higher levels required after surgery.

Vitamin deficiencies can decrease significantly when taking a bariatric-specific supplement versus over the counter vitamin preparations.

Cost of bariatric specific vitamins can vary from \$30-60 per month for all of the recommended nutrients depending on types or forms. When comparing the cost of additional over the counter supplements that may or may not meet the recommended daily needs as well as the cost of vitamin deficiency complications, bariatric specific vitamin supplements are highly recommended to protect your health and your pocketbook.

What supplements will I need following bariatric surgery?

High Potency Multivitamin which includes a minimum of:

- 100-300% of daily value of B2, B3 (niacin), B5(pantothenic acid), Folate (400-1000mcg), biotin
- At least 15-50mg of B1 (thiamin)
- 30-200IU of vitamin E (preferably a natural form, will have a “d-“ in front such as d-alpha tocopherol acetate or succinate not a “dl-“ which is synthetic)
- 1500-3000 mcg (5000-10000IU) of vitamin A
- 60-500 mg of vitamin C
- 90-120 mcg vitamin K
- 100% of daily value for zinc (8-22 mg), selenium, copper (1-2 mg), manganese, chromium, molybdenum
- Ideally also contain choline and inositol

Iron

- 18 mg for low-risk: sleeve or band/men or non-menstruating
- 45-60 mg for high risk: bypass and duodenal switch/prior history of iron deficiency
- Separate from calcium by 2 hours as inhibits absorption
- **MONITOR LEVELS.** Check with your provider as to the quantity of iron that you should be taking

Vitamin B12

- At least 350-500 mcg orally, nasal spray or injections

Vitamin D

- 75 mcg (3000 IU) of vitamin D (include amount in multi and calcium)

Calcium

- Needs to be in the form of calcium **citrate** for improved absorption with decreased gastric acid
- 1200-1500 mg per day total
- The body can only absorb about **500mg at a time**, so divide dose throughout the day

What form should I use? Chewable? Capsule?

- Chewable and gelatin capsules are the easiest for your new anatomy. Tablets are often difficult to break down. Watch calorie count on liquids and gummies.
- Bottom line...find one you tolerate and can be compliant with taking

How do I start?

- Begin 1-2 weeks after surgery when you are cleared by your surgeon
- You will be given the opportunity to sample and purchase at your post op nutrition class
- Discuss the options right for you with your Registered Dietitian, provider, or surgeon at Sage Bariatric Institute
- Visit the e-store at www.sagebariatric.com