

# UNIVERSITY OF ILLINOIS HOSPITAL & CLINICS

Vitamins for Bariatric Surgery Patients



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# KEY POINTS

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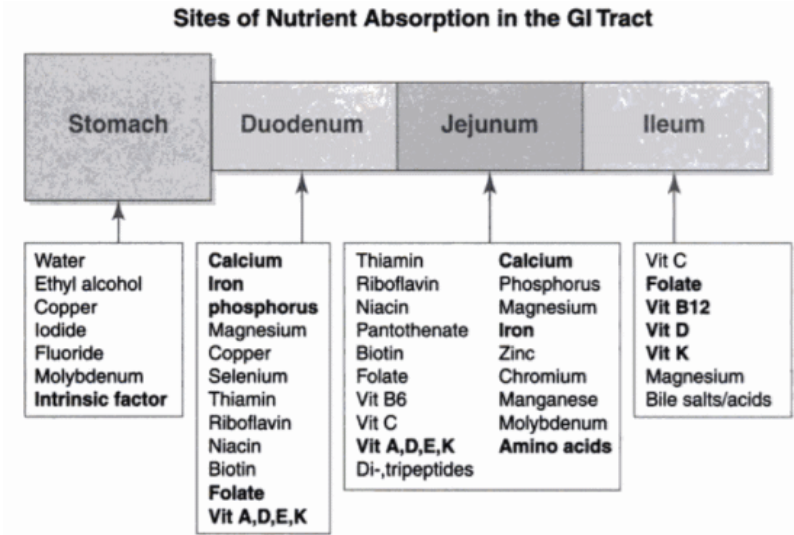
Bariatric Surgery patients must take vitamins every day lifelong

Vitamin levels are monitored by getting bloodwork done on a regular basis before and after surgery



# VITAMIN DEFICIENCIES (LOW LEVELS IN THE BODY)

- **Deficiencies** occur with Bariatric Surgery when vitamins are not taken on a regular basis
- Decreased intake of food (restriction) and a change in your anatomy due to surgery (malabsorption) are the causes
- Without the proper vitamin regimen, the following can occur:
  - **Bone loss** (osteoporosis)
  - **Low iron levels** (anemia)
  - **Hair loss** (alopecia)
  - **Feeling tired**
  - **Permanent nerve damage**
  - **Memory loss**
  - **Balance issues**
  - **Muscle loss and weakness**

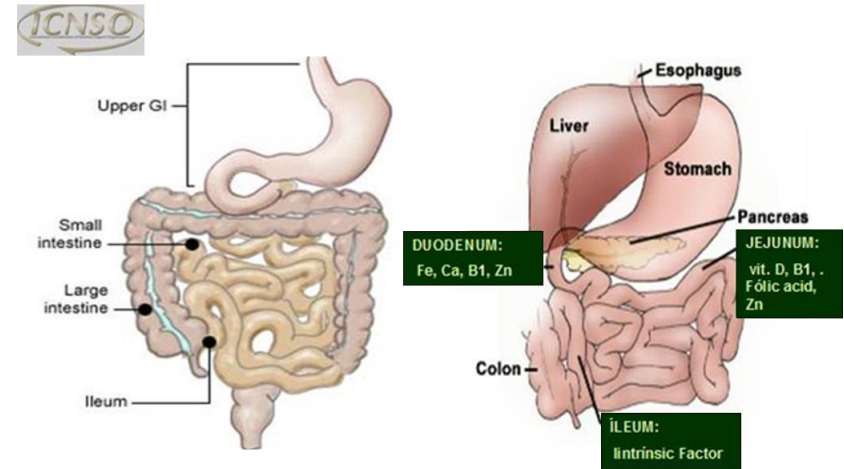


# ROUX EN Y GASTRIC BYPASS (RNYGB)

Gastric Bypass patients are most at risk for low iron, vitamin b12, calcium, and vitamin D

## Recommendations:

- Two complete multivitamins containing iron daily
- Vitamin D based 5000 IU (international units) daily
- Vitamin B12: 250-5000 mcg (micrograms) daily, by mouth or prescription (injection or nasal spray)
- Calcium 1200-1500mg daily

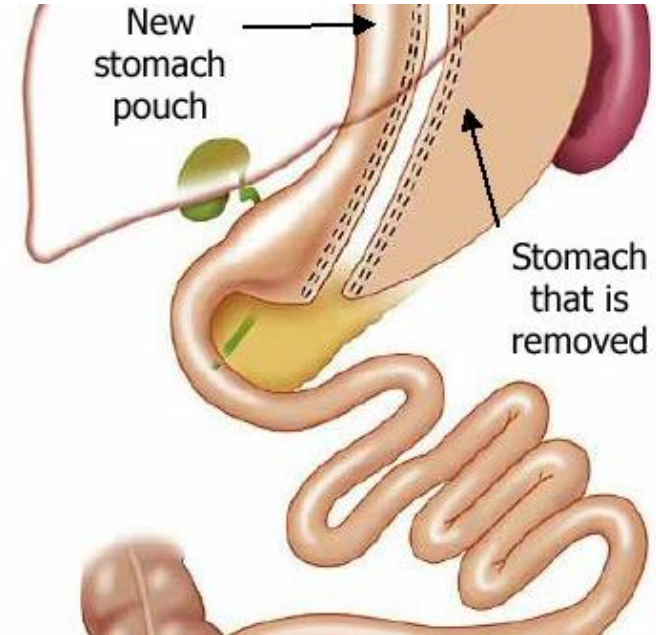


# LAPAROSCOPIC VERTICAL SLEEVE GASTRECTOMY (LSG)

LSG patients are most at risk for low iron, vitamin b12, calcium, and vitamin D

## Recommendations:

- Two complete multivitamins containing iron daily
- Vitamin D based 5000 IU (international units) daily
- Vitamin B12: 250-5000 mcg (micrograms) daily, by mouth or prescription (injection or nasal spray)
- Calcium 1200-1500mg daily

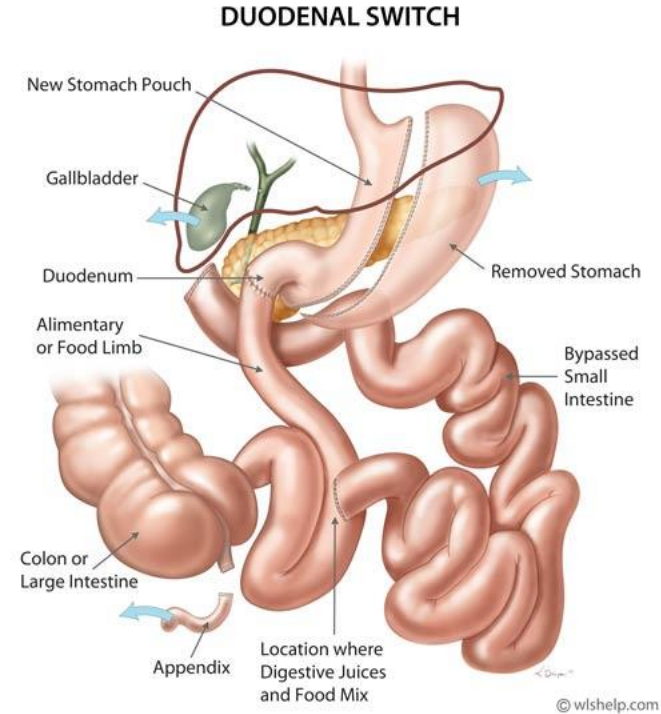


# BILIOPANCREATIC DIVERSION WITH DUODENAL SWITCH (BPD W/ DS)

BPD with DS patients are most at risk for low iron, vitamin b12, calcium, and **fat-soluble vitamins (ADEK)**

## Recommendations:

- Two complete multivitamins containing iron daily
- Vitamin D based 5000-10,000 IU (international units) daily
- Vitamin B12: 250-5000 mcg (micrograms) daily, by mouth or prescription (injection or nasal spray)
- Calcium 1200-1500mg daily
- Vitamin ADEK supplement

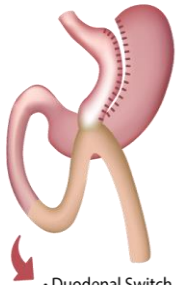




# REVISIONAL SURGERY

Vitamin regimen as your primary procedure in most cases

**Mini Gastric Bypass**



- Duodenal Switch
- Gastric Bypass

**Gastric Sleeve**



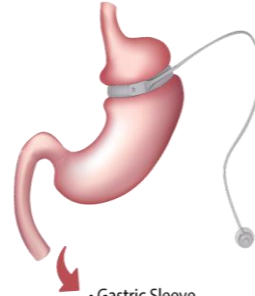
- Gastric Bypass
- Duodenal Switch
- Re-Sleeve

**Gastric Bypass**



- Revision Bypass
- Sleeveing the Bypass

**Lap-Band**



- Gastric Sleeve
- Gastric Bypass

**Gastric Balloon**



- Gastric Sleeve
- Gastric Bypass

# VITAMIN REGIMENT FOR ALL SURGERY PATIENTS

Start at least  
**6 months**  
before surgery

**Multivitamin containing iron:**  
1-2 per day

**Vitamin B12 or B complex:**  
1 per day

**Vitamin D3 5000 IU:**  
1 per day

- Take the above at the same time. Take calcium separately.

**Calcium** (to be taken separately from other vitamins)

- 1,200-1,500mg total per day (divided in 2 doses)

# RECOMMENDATIONS

## MULTIVITAMIN RECOMMENDATIONS: CHOOSE ONE

- **Complete multivitamin containing iron**
- **Prenatal vitamin**
- **Bariatric multivitamins**
- **If chewable is preferred:  
Children's Chewables with Iron**

### **NOTE:**

All multivitamins must be either in pill or chewable form

Gummy multivitamins do not have iron in them so they are not recommended

Do not take senior or silver formulas because they do not have iron in them

# RECOMMENDATIONS

## VITAMIN B12

- **250-5000 mcg daily**
- **1 tablet daily**
- Can also be given as an injection or nasal spray by your physician

## VITAMIN D

- **5000 IU (international units) daily**
- Some people need higher amounts, but this will be monitored by blood work

# RECOMMENDATIONS

## CALCIUM

- 1200-1500 mg daily
- To be taken separately from other vitamins
- 1,200-1,500 mg total per day (divided in 2 doses)
- Calcium Citrate OR
- Calcium Carbonate (Tums) – must be taken with meals

## VITAMIN B1 (THIAMINE)

- **Always take your daily multivitamin to prevent vitamin b1 deficiency**
- Low levels can occur anytime there is **vomiting after surgery**. Let any physician treating you know that you are a Bariatric Surgery patient!

### **SIGNS OF A LOW B1 CAN BE:**

Confusion, weakness, memory loss

Unsteady gait (ataxia)

Vision changes (nystagmus)  
(Can be permanent)

Coma, death

**THANK YOU**

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