

Whipple Diet Guidelines

Immediately after your Whipple surgery, you will not be allowed to eat or drink for about 5 to 7 days. You will receive IV fluids only during this time. You may not have an appetite or even nausea. It is normal for bowel function to slow down or stop for a while after this type of surgery. Your healthcare team will be checking you daily for signs that your bowel function has returned. These include: bowel sounds, gas, and bowel movements. After your bowel function has returned, you will be allowed to have clear liquids, such as, Jell-O® and broth. If you tolerate these foods, you may then try other soft, non-spicy foods until you can tolerate your usual diet. Your dietitian will help you with food choices during this time.

Once your diet begins to return to normal, it is important to try and eat high protein foods. You may have a type of temporary feeding tube called a Jejunostomy tube or J-tube placed during surgery. If you are not able to eat enough by mouth, we may recommend using your J-tube for tube feedings. This will help your bowel function return to normal and also provide enough calories and protein for healing. Getting enough protein every day is very important for healing after surgery.

Nutrition-related symptoms after Whipple surgery may include:

Some symptoms and side effects are more common than others after Whipple surgery. Most people have at least some of these symptoms and they can range from very mild to very bothersome. Your specific diet recommendations will need to be adjusted with the help of a dietitian to find foods that work best for you.

Common:

Feeling full quickly
Poor appetite
Loose or fatty bowel movements

Less Common:

Lactose intolerance
Delayed Gastric Emptying
Diabetes

If you are feeling full quickly...

Eat small, frequent meals throughout the day. After surgery, most patients feel full after eating small amounts of food. To get the nutrition you need, you should eat **three small meals with three snacks in-between**. Your breakfast, lunch, and dinner should be about half the size you were eating before the surgery. Using a salad plate for your meals can help determine your new meal size. Snacks between meals are very important to make-up for the smaller portions and lack of calories at mealtimes.

Choose foods for meals and snacks that provide a lot of calories and protein in a small portion. This is called calorie or protein density. It is important to get enough protein in your diet to help with healing, fight off infection, build blood cells, and rebuild muscle. You should include protein at each meal and snack. Examples of foods that have a high density of calories and protein are ice cream, yogurt, milk, cheese, peanut butter, eggs, and granola bars.

Sample menu

8:00am	BREAKFAST
	Egg (1)
	Toast (1)
	Margarine (1 tbsp.)
	Whole milk (1 cup)
10:00am	SNACK
	Yogurt with fruit (1 cup)
10:30am	Water (1 ½ cup)
12:00pm	LUNCH
	Egg salad sandwich (1)
	Canned peaches (1/2 cup)

12:30pm	Water (1 ½ cup)
2:00pm	SNACK
	Peanut butter (2 tbsp.)
	Butter crackers (8)
2:30pm	Water (1 ½ cup)
5:00pm	DINNER
	Salmon (3 oz.)
	Rice, buttered (1/2 cup)
	Green beans (1/2 cup)
5:30pm	Water (1 ½ cup)
7:00pm	SNACK
	Ice cream (1 cup)
7:30pm	Water (1 cup)

Your dietitian will also review the following nutrition handouts with you:

Power Snacks

Diet Guidelines for Boosting Protein

Milkshake Recipes

Limit fried foods and tough meats

At first you may have difficulty tolerating fatty foods such as fried foods, heavy sauces, and gravies. Choose meats that are tender and cooked with moist heat. Limit fatty foods to small amounts until you know whether or not you can eat them without feeling bloated or queasy after the meal.

Try high protein drinks

Milkshakes, Boost[®], Ensure[®], or other liquid supplements can help you increase the calories and protein in your diet without feeling as full. Liquids are usually well tolerated and can be used to help maintain your weight and speed recovery. Calorie free liquids (water, coffee, tea, sugar-free beverages) should be consumed in-between meal and snack times.

Lactose intolerance

Lactose is the sugar found naturally in milk. If you find that you are having difficulty with dairy products, you may be lacking the enzyme required for digesting lactose. This can happen in varying degrees and does not happen to everyone. It may also be temporary. A trial of lactose-free dairy products or temporarily eliminating dairy from your diet can help determine if you have lactose intolerance. Your dietitian can provide more information about managing lactose intolerance and lactose-free products.

Delayed gastric emptying

After surgery, you may find that you feel full quickly after eating only a small amount of food. This can be due to the decreased size of your stomach after surgery and due to delayed or slow gastric emptying also known as gastroparesis.

This is a common side effect after Whipple surgery. A handout titled *Delayed Gastric Emptying* is available and provides more detailed information about managing this side effect. If you are having these symptoms, ask your dietitian for more information.

Fluids are VERY important

We recommend drinking fluids in-between meals, instead of with meals, to reduce the feeling of fullness at meal times; however, it is VERY important to drink enough daily fluid to prevent dehydration.

Most people need to drink between 6 to 8 cups of fluid each day. This includes anything that is liquid at room temperature. If you are physically active or spend a lot of time outside in the heat, you may need more fluids. Keep a bottle of water or other fluid with you at all times as a reminder to take sips throughout the day.

It is important to drink enough fluids during the weeks leading up to your surgery as well as after your surgery. Thirst is not always the best indicator of proper hydration, so it is important to pay attention to the amount of fluids you are drinking. Any fluids (except alcohol) count toward your daily intake, so if you don't like water, drink other fluids such as tea, coffee, and flavored beverages.

Do I need enzymes?

After surgery, your doctor or dietitian will determine if you will need enzyme supplements. Continuous diarrhea, frequent bowel movements, and steatorrhea (fatty stools) are common signs that the pancreas is not making enough enzymes to help your gut digest food. In these situations pancreatic enzyme supplements may help.

You may need to take pancreatic enzymes if you have any of the following:

- Frequent bowel movements
- Stools that float
- Stools that are very light in color, frothy, greasy, or foul smelling

What about Diabetes?

In addition to making digestive enzymes, the pancreas also makes insulin and glucagon. These are hormones that are required for blood sugar control. It is not common, but sometimes Whipple surgery can cause diabetes due to the lack of these hormones. If you already have diabetes, Whipple surgery can make it more difficult to control. Your doctor may make a referral to the Moffitt diabetes educator to discuss using insulin to control your diabetes.

Multi-vitamins and supplements

Dietary supplements such as vitamins, minerals, and herbs are not recommended at this time due to the possible interaction with other medications. High doses of some vitamins can interfere with blood clotting time. It is always best to get nutrients through foods, including vitamins and minerals; however, there may be times when your doctor prescribes a supplement for a specific reason. Please discuss taking any over-the-counter dietary supplements with your healthcare team.

If you have a feeding tube...

If you have a Jejunostomy tube (J-tube), the nursing staff will teach you how to use this type of feeding tube. Please follow all instructions you receive regarding your J-tube. Ask your nurse or dietitian for a copy of the ***J Tube Feeding Instructions***. Your social worker and dietitian will also arrange for a home health company to deliver supplies to your home and assist you with using the feeding tube.

Common complications are a clogged tube or a tube that slides out of your stomach. If your tube becomes clogged, you can try to unclog it with warm water. If this does not work, contact your home health provider for more assistance. If the stitch that is holding the tube in place comes loose, it is common for the feeding tube to “fall out.” If this occurs, simply slide the tube back into the hole and secure it with a piece of tape. It is important to replace the tube as soon as possible so the hole of the J-tube does not close. **Contact your surgical team immediately at (813) 745-8459.**

Key points about eating after Whipple surgery

It is common to have a decreased appetite after Whipple surgery. Your appetite will return but you may never be able to eat the same amount you did before surgery and your appetite may not be as “hearty.”

It may take a few weeks or months to tolerate all the foods you were used to eating before your surgery. Eating small amounts of a variety of foods is the best way to know what works for you.

1. Getting enough calories and protein with good nutrition is extremely important for your recovery. If you are not eating enough and you are instructed to use your feeding tube in order to get enough calories and protein, it is very important that you use it and follow all instructions.
2. If your doctor prescribes enzymes, it very important you take these as directed.
3. If you are able to eat solid food, be sure to have small meals and snacks frequently (every 2 to 3 hours) throughout the day.
4. Keep track of your fluid intake each day and make sure you are drinking enough to prevent dehydration.
5. Keeping a daily journal of your diet after Whipple surgery can help determine which foods work best for you and help your dietitian recommend foods for you.

Produced by the Patient Education Department. Reviewed by Patient & Family Advisors.

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