

LESSON ONE: INTRODUCTION (NO NOTES)

LESSON TWO: HUNGRY, HUNGRY HORMONES

Ghrelin= hunger “gremlins” driving you to eat (aka ‘the hunger hormone’)

Leptin = hormone produced by fat cells, if levels are high, it tells your brain you are satisfied. Excess weight can cause **leptin resistance** which means the brain does not get the message to be satisfied.

Dopamine = signals pleasure in the brain; foods high in sugar and fat are shown to produce more dopamine making them more addictive

Take home message: Weight loss is not just about willpower. There are powerful biological processes going on that are important to know about because knowledge is power!

LESSON THREE & FOUR: HOW SURGERY CHANGES THINGS

Gastric Sleeve

Approximately 70% of the stomach is removed allowing portion restriction. In addition, the portion of the stomach removed decreases ghrelin. Gastric sleeve is often marketed that you eat less and feel less hunger.

Gastric Bypass

Two main mechanisms for weight loss are portion restriction and malabsorption of calories. Bypass is often marketed that you cannot eat as much and you do not absorb as much. **Dumping syndrome is more common so those with a strong sweet tooth might be encouraged to have a Bypass.*

Take home message: Both Surgeries are considered metabolic surgeries. Cutting on the stomach has been found to improve metabolism and regulate blood sugars.

LESSON FIVE: GENETICS AT PLAY

Genetics plays a part in body weight but for complex reasons we are still learning about. One possible gene variant may lead to someone having more ghrelin. Another gene variant might mean someone is more likely to struggle with addiction.

Genetics are fascinating and a reminder that our bodies are complex, however, genetics is not destiny. Home environment, support, stress relief, and understanding your body and hunger control are all keys to overcoming genetic variants.

Take home message: *Similar to lesson two, weight and hunger control is far more complex than eating less and working out harder.*

LESSON SIX: WATER TIME, MEAL TIME

Water is incredibly powerful in hunger control. It is more than a cute health tip! The brain gets thirst confused with hunger. Staying hydrated allows you to identify if you are truly hungry.

Aim for 64 to 96 ounces of hydrating fluids. I count something hydrating if it is not caffeinated, not carbonated and under 15 calories for 8 ounces.

While water is the top priority in between meals, it really should be avoided during and after meals (45-60 minutes). Programs differ but I am okay with drinking up to the first bite. Drinking with or too soon after a meal will increase food transit time through the stomach pouch, leaving you hungry sooner.

Take home message: Prioritize water all day long, but at the right times (not during or after meals).

LESSON SEVEN: PROTEIN, BUT TEXTURE MATTERS

Protein is certainly promoted a lot after bariatric surgery, but it helps to know exactly *why*. (See my video course "[Do's and Don'ts of Protein](#)")

Protein has many great benefits, however, the texture really matters for controlling your hunger. Liquid protein (protein shakes) will leave the pouch the fastest and you can drink more in a liquid than you can eat in a solid.

Soft protein (cottage cheese, Greek yogurt, flaky fish, tuna salad, etc) goes down easy but leaves more quickly. Soft proteins are often eaten when someone is having discomfort from eating too fast or too large of bites. Sticking to soft proteins past the healing phase of diet can cause hunger control issues later.

Take home message: Solid, lean protein (chicken, lean beef, pork, etc) will fill the pouch with a smaller amount and keep hunger away the longest. It does require small bites and eating slowly to tolerate well, but yields great results for hunger control and weight loss.

LESSON EIGHT: FULL FAST, HUNGRY FAST

Premature fullness is when a post-op patient eats a few bites and is hungry quickly thereafter. Too speedy of eating or too large of bite sizes can cause the brain to be triggered to stop eating early but causing hunger soon after.

Taking bites the size of a black bean (or pinkie fingernail) and pausing in between bites allows you to listen to natural fullness cues and being more mindful in your eating. This often means eating more at a meal time but staying full for longer and grazing less often.

Take home message: Eating behaviors play a big role in staying in control of hunger. Slow down, take small bites and stay in tune to your cues from your body.

LESSON NINE: WHY SOME FOODS MAKE YOU HUNGRIER

Foods that are higher in carbohydrates will drive up hunger. They are more addictive and cause swings in blood sugars. Even the smells of refined carbohydrates can drive up the appetite.

Going too long without eating will also make us feel more weak in the face of tempting smells and visuals of carbohydrates. They are absorbed quickly and leave you hungry faster. This includes whole grains, brown rice and even quinoa.

The first 3-5 days of reducing carbs and focusing on protein are physically uncomfortable as the body adjusts. Focus on water and allow more protein at your meals or protein based snacks to get through this period.

Take home message: Protein takes longer to digest than carbs, is lower in calories than fat and keeps blood sugars more controlled. Even if you do have something higher in carbohydrates, pair it with protein to slow down the absorption of sugar.