

Behavioral Fundamentals Workshop

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Agenda

Over the next hour we will explore the following questions:

- **Committing to Change**
 - Why is bariatric surgery right for me?
 - What stage of commitment are you in?
 - How do I start to prepare for the journey of bariatric surgery for post-op success.

- **Introducing Mindful Eating Concepts**
 - How did you get here?
 - How can you change your behavior now so you can be successful long term.

- **Awareness: Staying Successful**
 - What are the challenges you might experience after surgery?
 - How can you manage them?

Bariatric Surgery- Why are you here?

I am struggling to lose weight long-term.

I want to relieve or prevent a medical issue like diabetes.

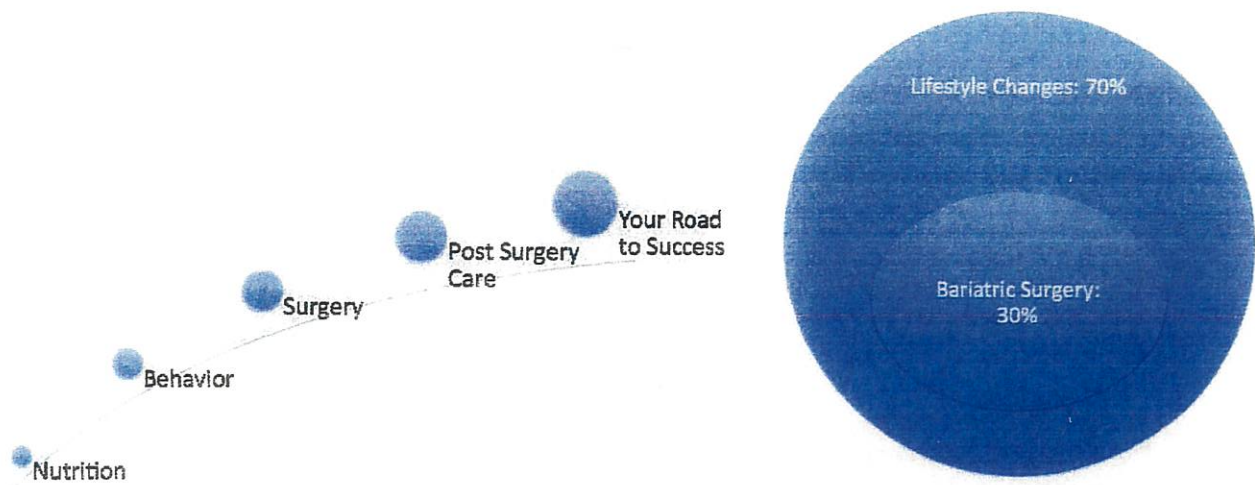
I want to reduce current medications.

I have difficulty with mobility and exercise.

I feel hungry all the time.

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Surgery is a tool. Real Change Comes From You!



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Stages of Change

Stage One: Precontemplation

- In the precontemplation stage, people are not thinking seriously about changing and are not interested in any kind of help. People in this stage tend to defend their current bad habits and do not feel it is a problem.

Stage Two: Contemplation

- In the contemplation stage people are more aware of the personal consequences of their unhealthy habits and they spend time thinking about their problem. Although they are able to consider the possibility of changing, they tend to be ambivalent about how to change. At this point the negative aspects of the bad habits and the positives associated with giving it up often create a push/pull effect.

Stage Three: Preparation/Determination

- In the preparation/determination stage, people have made a commitment to make a change. Their motivation for changing is reflected by statements as: I've got to do something about this, this is serious. Something has to change. What can I do? This is the research phase.

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Stages of Change....Continued

Stage Four: Action/Willpower

- This is the stage where people believe they have the ability to change their behaviors and are actively involved in taking steps to change their unhealthy behaviors by using a variety of different options.

Stage Five: Maintenance

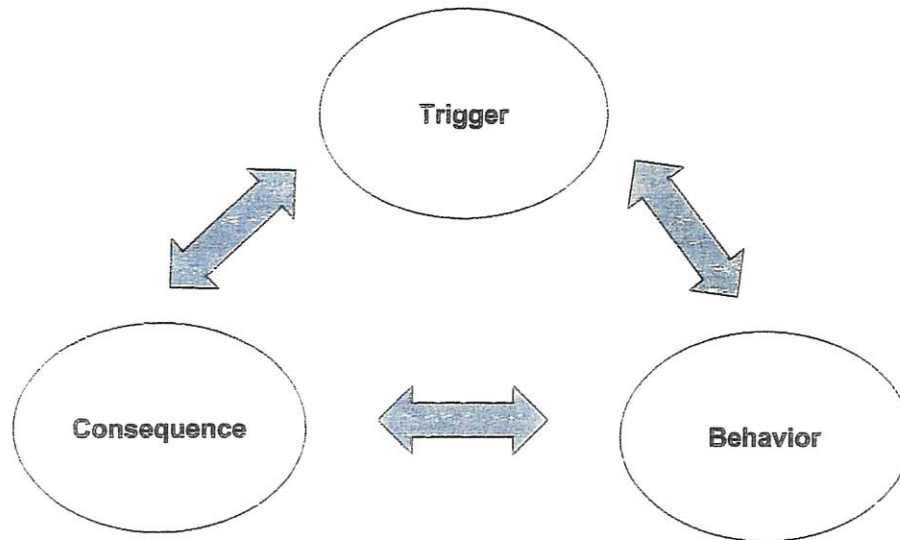
- Maintenance involves being able to successfully avoid any temptations to return to the unhealthy lifestyle or habits that were negative. The goal of maintenance stage is to maintain the new status quo and continue with your healthy journey.

Transcendence

- Eventually, if you "maintain maintenance" long enough, you will reach a point where you will be able to identify your emotions and understand why you do the things you do. This is the stage of "transcendence", a transcendence to a new life. In this stage the unhealthy habit is no longer an integral part of your life but to return to it would seem abnormal, even weird to you.

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Maladaptive Eating Cycle



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Mindful Eating

What is it?

A simple definition of mindful eating is eating with intention and attention—or eating with purpose and awareness. Mindfulness is beneficial because it teaches individuals to focus their intention and attention on what is happening in the present moment, which, in turn, helps them disengage from habitual, unsatisfying, and unskillful habits and behaviors.

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Mindful Eating as a Bariatric Patient: Start Being Your Own Private Investigator!

Why do I eat?

When do I eat?

How do I eat?

What do I eat?

How much do I eat?

Am I Active?

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Mindful Eating- Why do I eat?

Do you eat when you are hungry or do you eat in response to emotional and physical cues?

- **Emotional triggers cause us to use food as a coping mechanism**
 - Boredom
 - Stress
 - Sadness
 - Anger
 - Loneliness
 - Happiness
 - Pain
 - Fatigue
- **Strategies for avoiding emotional or physical triggers**
 - See Handout- "Ways to Nurture Ourselves without Food"

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Maladaptive Eating Patterns- Why do I eat?

Binge eating is a very different experience. Binge eating is overeating, but key to the binge eating definition is that binge eaters experience a loss of control. Once the binge eater begins eating, they feel they cannot stop eating even if they are uncomfortably full.

Whereas overeating might be caused by feeling good, binge eating is often driven by poor body image, low self-esteem, trauma or body image issues. Binge eating is also typically associated with:

- Consuming a larger amount of food than others would consider reasonable in a short period of time, even when not hungry
- Eating more rapidly than normal
- Eating until uncomfortably full
- Eating alone and being embarrassed about eating behavior
- Hiding food

The binge eating disorder criteria includes:

- Recurrent binge eating
- Binge eating occurring at least once a week for three months
- Experience of the binge eater of lack of control while bingeing

Binge eating disorder is made up of compulsive behavior and needs to be treated like an addiction, generally with the help of a professional.

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Maladaptive Eating Behaviors- Why Do I Eat?

- Compulsive Overeater
 - People with this type have trouble shifting their attention and tend to get stuck on thoughts of food or compulsive eating behaviors.
- Impulsive Overeater
 - People with this type struggle with impulsivity and have trouble controlling their behavior even though nearly every day they intend to eat well
- Impulsive-Compulsive Overeater
 - People with this have a combination of impulsive and compulsive eating disorder
- The SAD or Emotional Overeater
 - People with this type often eat to medicate underlying feelings of boredom, loneliness or depression
- Anxious Overeater
 - People with this type tend to use food to medicate underlying feelings of anxiety, tension, nervousness and fear.
- Adrenaline Overload Anorexic
 - For most people, excess stress leads to gain weight

● Handout Provided

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Mindful Eating- When Do I Eat?

Do you eat when you are hungry or do you eat in response to environmental cues?

- **Environmental Cues Can Also Trigger An Urge To Eat.**
 - Mealtime preparation. (oops!! I just ate my meal before my meal)
 - Holidays, Celebrations, Sunday Dinners
 - Advertising (I love watching the Food Network)
 - Large portion sizes (buffets, restaurants, someone else making your plate)

- **Strategies for Avoiding Environmental Triggers**
 - Keep trigger foods out of the house
 - Avoid locations that are likely to create mindless eating (break room, fast food restaurants)
 - Weigh and measure your foods, exercise portion control
 - Redirect attention by engaging in alternative activities during trigger times

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Mindful Eating- How Do I Eat?

- Focus on eating your **protein first**
- Eliminate or minimize distractions while eating, including watching television, working, driving, and reading.
- Sit down to eat, preferably at a table designated solely for that purpose.
- Take a deep breath to calm and center oneself before eating.
- Appreciate the appearance and ambience—a feast for the eyes—before taking the first bite.
- Savor the aromas and flavors of the food.
- Take small bites and chew each bite thoroughly. (toothpaste consistency)
- Put the fork down between bites to keep attention focused on the current bite and chewing.
- Pause frequently while eating to identify early physical signals of satiety.
- After eating, notice how you feel physically and emotionally.
- Avoid eating and drinking at the same time.

Handout provided with my behavioral tips

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Mindful Eating- What Do I Eat?

Studies have shown that yo-yo dieting leads to inconsistent weight loss, preoccupation with food, feeling of deprivation and negative feelings of self.

- Yo-yo dieting encourages mentality of good food/bad food mentality
- Remember food doesn't have feelings
- Eating off plan will occur, accept this as normal. Get back on track next meal.
- Review and keep implementing information from the nutrition class.

Focus on:

- You have to **SHOP, COOK** and **PLAN** your meals.
- Hydration is very important aim for **48-64oz.** of fluid intake per day.
- Eat every **3-4 hours**
- Eat complete meals. This includes: **Protein, Fat and Carbohydrate**

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Mindful Eating- How Much Do I Eat?

Getting to Know What is Full vs. Too Full

- **Avoid:**
 - Eating until the plate is clean and especially cleaning everyone's plate at the table. **Please** fire yourself from the clean everyone's plate job.
 - Eating until feeling uncomfortable
- **Strategies for Eating Until Full**
 - Take smaller bites
 - Pause between bites
 - Use a smaller plate
 - Pay attention to physical cues:
 - **Before Surgery** sense of fullness will occur in the mid or lower stomach.
 - **After surgery** sense of pressure may occur just below the sternum. Other cues include coughing, sneezing or belching may occur just before the discomfort point is reached.
 - **After surgery** remember you will be able to eat only 2-3 oz of food in the beginning.

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Post Operative Challenges: Avoiding Weight Regain Post Surgery

- Have both snacks and meals throughout the day. Eat with a purpose.
- Avoid grazing patterns. Eat every 4 hours.
- Avoid trigger foods from the past. Most likely, they were not healthy foods anyway!
- Monitor caffeine and sugar intake.
- Keep on being self-centered: meal plan, shop, cook and exercise.
- Avoid ritualistic eating patterns. (Keep trying new foods one at a time)
- Keep food journaling, using your food scale and reading labels.
- Take your vitamins and make sure your yearly bariatric check-ups are up to date.
- Participate in aftercare support programs.

Post-Operative Challenges: Transfer Addiction

Weight loss surgery does not cause addictions. However, 17% of bariatric patients report to have alcohol use disorder (transfer addiction) three years after surgery (presented at Obesity Week 2014). Instead, people who are addicted to food may find a new compulsion once they are unable to overeat. The lesson to be learned from addiction transfer is that to lose weight successfully and keep the weight off, you must find a way to treat the cause of your food addiction.

Dieting and surgery will treat the symptom -- obesity, but not the issues that caused you to overeat initially.

To improve your odds of success, you need to be honest with your surgeon about your eating habits and other lifestyle issues before and after surgery, and you need to participate in the behavioral programs prescribed. With openness and hard work, you can set yourself free from your old habits and body weight.

Post-Operative Challenges: Keep in Mind Eating with a Purpose

Mindful eating skills may address many of the behavioral problems commonly seen after bariatric surgery. These problems include the following:

- Eating too quickly, taking large bites, not chewing thoroughly
- Eating while distracted, leading to overconsumption
- Not savoring food and, therefore, having difficulty feeling satisfied with small volumes of food
- Eating too much, leading to discomfort, vomiting, and/or distention of the pouch
- Grazing or frequently eating small amounts of food
- Consuming high-calorie soft foods and liquids that do not provide satiety
- Emotional eating or eating for affect regulation
- Continuing to consume certain foods despite dumping syndrome
- Preoccupation with food
- Not consuming enough protein and other nutrient-rich foods
- Struggling to establish consistent physical activity
- Feeling deprived, guilty, or left-out in social situations
- Difficulty adjusting to life after Bariatric Surgery.

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Post-Operative Challenges: The Lapse

- **Lapses will occur** – they are a definite and important part of recovery. Simply regard them as challenges or learning experiences. The important thing is to take them in your stride and not think that you are back at square one.
- **What to do if you do lapse:**
 - Stop and think! Try to intervene as soon as possible and extract yourself from the situation
 - Keep calm! Observe yourself with detachment. Your first reaction will be to feel guilty and blame yourself – let these feelings slowly go away. Remember that this is a normal part of recovery.
 - Think of how far you've come. You can be in control once again!
 - Review the situation that led to the lapse. Were there early warning signals? Did you make an attempt to cope? What have you learned for the next time?
 - Take charge: Put into action one of your coping techniques.
 - Get help: Now is the time that your supporter can be of greatest value. Get in touch with your support team. **Refer to the post-op aftercare supports listed in the back of the packet**

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Additional Handouts

A Guide For Friends And Family

Action Steps For Maladaptive Eating Patterns

Behavior Modification Techniques

Tips For Dining Out After Weight Loss Surgery

Ways To Nurture Yourself Without Food

Post -Op Aftercare Supports

Monthly Peer Support Groups

Monthly Focus Workshops

Monthly Nutrition Workshops

Individual Behavioral Counseling with Ann Marie LiCausi, LMSW

Individual Nutritional Counseling with Jennifer Turesky, RDN



Binge Eaters vs. Overeaters

Binge Eating is a very different experience. Binge eating is overeating, but key to the binge eating definition is that binge eaters experience a loss of control. Once the binge eater begins eating, they feel they cannot stop eating even if they are uncomfortably full.¹

Whereas **Overeating** might be caused by feeling good, binge eating is often driven by poor body image, low self-esteem, trauma or body image issues. Binge eating is also typically associated with:

- Consuming a larger amount of food than others would consider reasonable in a short period of time, even when not hungry
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The binge eating disorder criteria includes:

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Binge eating disorder is made up of compulsive behavior and needs to be treated like an addiction, generally with the help of a professional!

Inward Symptoms of Binge Eating Disorder

While some binge eating symptoms are visible to others, the defining symptoms are only truly known by the binge eater. Only that person knows whether their overeating symptoms are due to a lack of control. As some binge eaters are good at hiding their compulsive eating symptoms, there may be additional signs on which others can't pick up.

These include:

- Frequent episodes of eating amounts of food that others would find abnormally large
- Frequent feelings of being unable to control what is being eaten or how much
- Eating until uncomfortably full
- Eating large amounts of food when not hungry
- Eating alone out of embarrassment of the amount of food being eaten
- Feelings of disgust, depression or guilt after eating
- Feelings of low self-esteem, anxiety
- Loss of sexual desire (NEDA)

(Healthy Place Americas Mental Health Channel)

Sufferer descriptions might include comments like the following:

- *I cannot control myself. I'll open the fridge and eat. No matter what time of day, even if I've just finished breakfast or dinner. I'll still search for food. I'm not necessarily hungry, I'm just addicted – its like a drug. The more I have the more I want. I eat it so quick, like there's no tomorrow. And it's always in secret. I even bring food to bed, and in the morning I put the wrappers in an outside dustbin so no-one knows what I've eaten.*
- *If I know that my family and husband are going out, I'll make up an excuse to stay home, that way I can eat and eat and eat.*
- *I'm so disgusted and ashamed of myself. I hate myself for doing it. I know it's wrong while I am doing it but I will carry on. That is what I can't understand, while I'm bingeing. I know what I'm doing but I don't stop. Food is ruling my life. I just wish I could take it or leave it. But it's never enough.*
- *I eat properly in front of other people and eat masses when I get home and on-one can see me.*
- *I go backwards and forwards to the fridge looking for something to satisfy me and nothing seems to.*
- *I start a diet on Mondays and by 11 o'clock I am in the biscuit tin, saying here I go again.*
- *I am fine for a while then I say just one bit of chocolate won't hurt then it's like I've blown it so who cares and I will start again tomorrow.*
- *I eat in the car before I get home stuffing my face and if people knew what I was doing I couldn't bear it.*
- *I get this craving in my head and my mouth for chocolate and I can't relax until I have had it.*

Action Steps for Maladaptive Eating Patterns – Why Do I Eat?

Type 1: The Compulsive Overeater

Action Step 1: Behavioral Interventions that boost serotonin to help compulsive overeater:

- Exercise to allow more of the serotonin precursor.
- If you get a negative or food oriented thought in your head more than three times get up and go do something to distract yourself
- Make a list of 10 things you can do instead of eating so you can distract yourself
- People with this type always do better with choices, give yourself choices regarding foods.
- Avoid all or nothing belief systems. Rainbow thinking, allows for more control.

Type 2: The Impulsive Overeater

Action Step 2: Behavioral Interventions that boost dopamine to help impulsive overeaters:

- Exercise: helps increase blood flow and dopamine in the brain – especially doing an exercise you love
- Clear focus: make a list of health goals displayed where you can see it everyday
- Outside supervision: Someone you trust checking in with you on a regular basis to help you stay focused. Accountability is supportive.
- Avoid impulsively saying yes to offers for more food or drink and practice saying “No thank you, I’m full” Stop being a people pleaser.

Type 3: The Impulsive-Compulsive Overeater

Action Step 3: Behavioral Interventions that boost both serotonin and dopamine to help impulsive-compulsive overeaters:

- Exercise
- Set goals
- Rainbow thinking allows flexibility.
- Avoid impulsively saying yes. Does this food have a purpose?
- Having options = choices = control.
- Distract yourself if you get a thought stuck in your head

Type 4: The SAD or Emotional Overeater

Action Step 4: Behavioral interventions that boost mood to help SAD or emotional overeaters:

- Exercise to increase blood flow and multiple neurotransmitters in the brain
- Kill the ANTs (automatic negative thoughts) that steal your happiness

- Write down 5 things that you are grateful for everyday (this has been shown to increase your level of happiness in just three weeks)
- Volunteer to help others which helps to get you outside of yourself and less focused on your own internal problems (volunteer packet available)
- Surround yourself with great smells, such as lavender
- Work to improve your relationships

Type 5 and Type 6 The Anxious Overeater and The Adrenaline Overload Anorexic

Action Step 5&6 Behavioral Interventions that boosts good brain output and calms the brain to help anxious overeaters:

- Exercise
- Control the anxious
- For sleep, try and turn off all electronics 30 minutes before bed.
- Try relaxation exercise such as
 - Meditation
 - Prayer
 - Hypnosis
 - Deep breathing exercises
 - Aroma therapies

Action Step 7: Three tips to keep your insulin levels balanced

1. Have frequent small meals throughout the day rather than a few large meals.
Large meals tend to cause a greater insulin response
2. Control your carbohydrate intake. The more carbohydrates in a meal, the greater the insulin response
3. Emphasize more low-density carbohydrates and fewer high-density ones. The low-density carbohydrates such as broccoli, cauliflower, green beans and carrots have more fiber and fewer carbohydrates than high-density carbohydrates such as bread, pasta, rice and cereals

Supporting Your Loved One Before and After Weight Loss Surgery

A Guide For Friends and Family

The following information was put together to offer supportive suggestions to the friends and families of patients undergoing weight loss surgery. Weight loss surgery is a life-changing event that may affect the patient and their loved one in different ways. Throughout this process you may not know what your role is. At times it may feel confusing and difficult for you. Therefore, this handbook may act as a supportive tool to help assist with the many roles you will play from pre-surgery to life after surgery.

Pre-surgery Support

Being supportive with your loved one's decision. No matter what you feel, you need to remember that the journey to have weight loss surgery has been long and hard for your loved one. Being supportive can make the difference between long-term success and failure.

Become informed. Do your research with your loved one or on your own regarding weight-loss surgery. This includes various surgical procedures and the lifestyle changes they will need to make pre/post surgery that will make their surgery successful. Make sure you sort out the good from bad on the internet.

Help keep things organized. At times the information provided can be overwhelming. This would be a great time to give your loved one a pre-surgical gift-a three ring binder. All the information –notes, handouts, copies of correspondence, doctor's reports, insurance information, instructions, names and phone numbers- will all go into this binder. Get tabbed divider pages, folders- whatever it takes to stay organized. This acts as a wonderful way to stay in control of the situation.

Accompany your loved one to medical appointments. This is a wonderful way to show support. This may be a great time to ask questions you may have, voice any of your concerns or just sit and listen. Compile a list of questions together before the office appointment so you can make the most of the time with the surgeon.

Go with your loved one to a support group. If you've been given the opportunity to accompany your loved one to a support group meeting, take advantage of it. Your presence there will benefit you both. At these meetings, expect to see other loved ones who could end up being a part of your support network. You'll find invaluable information- patient testimonials, an idea about life after surgery, informational handouts and community referrals.

The "Protector Role". At times throughout the pre-surgery process, you will likely be the person people turn to with questions they are too afraid to ask the person facing surgery. This can be a challenging role for you, especially if some people are negative about the surgery. Remember a large portion of these opinions are based on misinformation. Whenever possible answer questions, let others borrow your information and remind them of why your loved one is pursuing surgery. In more extreme cases you may need to protect your loved one if certain people still "don't get it". Short-term boundaries should be established which may include limited visits, phone time or e-mails.

Help with pre- surgical nutritional changes and exercise routines. It is important to implement preliminary lifestyle changes prior to surgery. If the individual waits to change until after surgery is over, chances of failure are high. Life style changes need to occur well before surgery for true success and maintenance after surgery. To make a fresh start, help clear out the kitchen of all trigger foods and unhealthy foods. Then, help your loved one think of ways to improve old shopping and cooking habits. Think of the kitchen as a healing environment. Make sure it is clean, organized and a room you enjoy being in. Start to purchase protein powders, bariatric vitamins and some of the foods on the recommended food list. Follow the nutritional guidelines provided to you from the workshop and pre-surgical nutrition/exercise group. Along with your recommended discharge plan from your treating surgeon, these informational tools will be an important part of post surgery after care. You can also help make transition to a more active lifestyle easier by participating in the exercise with your loved one. Remember that exercise doesn't have to be strenuous. Any enjoyable physical movement has value. It's enormously helpful when friends and family members become involved in this process. The more involved family and friends are pre-surgery, the better the chances are for your loved ones long-term success

Make arrangements for help and support after surgery. If you plan on being the main caretaker after surgery, you'll need to establish reinforcement for yourself. Ask supportive and dedicated family members and friends to volunteer their help while your loved one is healing. Put together a list of tasks that your friends and family can assist with. This may include, taking care of pets, preparing approved meals, straightening up, and grocery shopping, lifting heavy things, caring for the children and taking loved ones to post-op appointments. As a reminder it's not selfish to take some time for yourself to recharge, you will be a better caretaker when you do.

After the Surgery

It's finally over and now you're anxious to see your loved one. Don't be alarmed by all of the medical equipment. It is a normal part of the post- surgical process. Remember, it's normal for your loved one to look pale and weak after surgery. It's also expected for your loved one to experience fatigue and pain after surgery. Again, all of this is normal. Rest is essential for healing following surgery. There will be many things asked of you in the days to come.

Reassure Children Once Again. How children react to the whole surgical process depends on a few things. Such as how old they are, how you react and respond to their questions. Explain as much as your child is able to understand, making sure you're taking the child's age into consideration. Avoid information overload. Children will guild you regarding what they want to know about this process with the questions they ask. Children respond positive to unfamiliar situations when they feel safe and have structure. That's why it's important to have a plan well established before surgery.

Dealing with the question: "Was this the right choice?" It's not uncommon for people who have had this surgery to ask, was this the right choice for me? In many cases, feeling fearful and doubtful after surgery is normal. The best way to support your loved one, if they are struggling with this question, is to

reassure them of all the reasons why they wanted the surgery. Remind them of the futuristic plans you both made together and provide love and affirmation. Remain positive and keep any negative thoughts and feelings elsewhere. One way to make your loved one feel special is to decorate their hospital room before they get out of surgery. This allows for positive support immediately to take place and also adds an immediate spirit lifter for your loved one.

Loved one = patient advocate. In many hospitals, the nursing staff has an overwhelming workload, with many patients to look after. Therefore it's important for you to have an open mind and don't be afraid to be your loved one's advocate. Ask questions, and if things seem out of order, be sure to point it out. If your loved one is on any psychiatric medication for depression, anxiety, bipolar disorder etc., it is important to make sure the medical staff is reminded of this. Also, encourage your loved one to walk while they are in the hospital. Breathing and leg pumping exercises are also beneficial towards a speedy recovery.

The Return Home Providing round the clock care for the first few days after surgery is essential. The main focus for your loved one is rest, eating and drinking (RED). This might become the new code word in the house as a reminder to all that this is part of healing.

Understanding mood swings Your loved one may be taking medication, which can affect behavior. Also, tiredness, pain, and discomfort may contribute to a cranky mood. After surgery women's estrogen levels may raise and waves of emotions may appear, shifting from fear to regret, sadness to elation. Anesthesia can cause depression even weeks after surgery. During this time, try and be patient and understanding. This is a healing time not only physically but emotionally as well.

Provide a comfortable environment Comfort is important when your loved one returns home. Some ideas include: fresh sheets, pillow spray (to get rid of hospital smell), and an extra set of clean sheets, a foot stool and some extra pillows. Also, make sure protein powder, liquids and clear soups are on hand.

Make family wide changes by creating a new eating plan together Of course, this concept should not feel that new for your family and loved one. Some preliminary lifestyle changes should have been implemented before surgery. Food has been probably your loved one's best friend and worst enemy. Eating habits and their perception of food has been engrained into your loved one's life. Changing this thought process takes times even with the surgery. Your loved one may experience head hunger for a while. This is the concept of physically feeling full but wanting more to satisfy an emotional need or habit. One important thing you can do is to eliminate trigger or binge foods in the house. Making changes together in the house can encourage a household reduction in weight and increase everyone's overall health. Show your loved one that you support them during this time of life changes and transitions. Some ideas are, give them a card, flowers, plan a special night out or buy an encouraging book.

***Some Small Stuff you may have to accept** Some changes may include new relationships, activities and improved self esteem/ body image for your loved one. It is important to be open minded and accepting of these changes. Part of really adopting this new life is to bring in new people and experiences. The goal is trying to participate together in some of the newness. This will enhance both of your lives.

Behavior Modification Tips

- Eat protein first
- Chew well
- Eat slow
- Bite sizes of food should resemble a cough drop size amount
- Keep a baby spoon or sample spoon on hand to assist with bite sizes
- Use a salad plate
- Weigh and measure out your foods
- Eat a meal or snack 3-4 hours
- Meals need to look like meals and snacks need to look like snacks
- Sip water throughout the day
- Introduce one new food at a time
- Avoid grazing patterns
- Avoid skipping meals/you may need to eat when you are not hungry
- Schedule time to exercise
- Ask for help if you are struggling post-surgery
- Keep a record of everything you eat (food diary)
- Use smaller plates/bowls to make a meal appear larger and take smaller portions
- Slow down. Allow at least 20 minutes to eat
- Concentrate on taste and texture of foods
- Do not eat standing up
- Do not watch television or do any other activity while eating. Make eating an event in itself
- Eat at the table with a special place setting even if you're alone. Never eat "all over the house"
- Ask yourself: Are you really going to be able to get your monies worth at a buffet?
- Brush your teeth after meals/snacks
- Plan an activity to do after dinner instead of eating if this is your usual snack time
- If possible, take a walk after dinner
- Keep leftovers in an opaque labeled container so you won't see it when opening the refrigerator
- Develop a hobby instead of eating while watching television
- Plan menus one day in advance
- Never shop for food on an empty stomach. Always take a list from a pre-planned menu
- Treat yourself to a non-food related reward for not over-eating
- Try not to think of your eating plan as a diet. You are developing new eating behaviors which will assist in weight loss as well as improved health

Ways to Nurture Ourselves without Food

- Go for a walk
- Listen to music
- Sing
- Write a letter
- Read a good book
- Visit or call a close friend
- Paint or draw
- Play with clay
- Look at a map of the world and imagine yourself in an exotic place
- Fantasize
- Light candles in the dark and play Mozart
- Schedule a massage
- Put your favorite lotion on
- Take a bath with or without a book
- Massage your feet
- Call a special friend to talk, ask them over for tea or to do something special
- Practice gratitude
- Doodle, write, paint, just be creative in general
- Meditate
- Put music on and dance around your room
- Dress up for yourself and stay home or go to the movies
- Light lots of candles around your room and drink tea
- Burn incense
- Start a book you want to read for pleasure or read a chapter in one you've started
- Take a walk with someone's borrowed pet dog or go alone
- Organize your room, your belongings, clean out junk, decorate, refurbish it with new
- Take a long drive in the car listening to some of your favorite music
- Dress up in front of the mirror, try out some new makeup or hair styles
- Go out on the porch
- Curl up in bed with a good book
- Give yourself a good facial
- Sit in a Jacuzzi
- Take some pictures
- Go for a bike ride
- Go swimming
- Go to sleep
- Take a walk in the woods or somewhere peaceful
- Make a list of affirmations or read one made before
- Do yoga
- Focus on trusting life.

Tips for Dining Out after Weight Loss Surgery

- Plan, plan, plan. Be familiar with the menu before you get to the restaurant. If you plan what you'll eat before going to the restaurant you won't even need to look at the menu; thus avoiding a lot of temptation.
- Choose a dish from the "healthy" menu. Many chain restaurants offer a Weight Watchers menu, which often includes entrees with a lean protein and vegetable side dish.
- Split the meal with a dining companion. You won't be able to eat a full serving anyway.
- Order a half size meal if available.
- Ask for a to-go box when you order. Once your food comes, put the portion you know you can't eat away immediately. You'll have another meal or two later.
- Order a side dish instead of an entrée.
- At buffets, use a salad plate instead of a regular plate.
- Fast food restaurants are now offering "healthier" options like salads and wraps. Buyers beware: healthier does not mean that it's not loaded with calories.
- Ask that your meal not be prepared with added butter or sugar.
- Skip the breading on sandwiches and focus on the protein and vegetables.

