



DISCHARGE INSTRUCTIONS AFTER LINX PROCEDURE

FOLLOW-UP:

Kate will email or call about 2 weeks and 6 weeks after surgery. If you have questions/concerns before then, please feel free to email kate@sofisite.com or call the office at 303-788-7700.

Since you have an implant, we will continue to follow you on a regular basis. At 6 months and yearly, we will send you a link to complete the quality of life questionnaire. Taking the time to complete the questionnaire is very much appreciated by us. It helps us inform future patients about the results of this surgical procedure.

DIET: BELOW ARE THE KEY POINTS – A MORE DETAILED EXPLANATION IS ON THE FOLLOWING PAGE

- ***Small bites of soft food eaten slowly and regularly is the key to a good outcome. Do this for 2 months.*** Start with yogurt/mushy consistency and increase the consistency as your swallowing allows. Chew food very well and eat very slowly. Stay away from bread and meats until you know you are swallowing well (generally ~ 4weeks but may be up to 10 weeks). It is important that you continue to eat regular food during this time, even if the food feels as though it is getting stuck.
- ***Swallow a few bites of soft food every hour while awake.***
- ***Slow Down: One bite every 30 seconds if things aren't going down easily.***
- Swallowing may be temporarily worse around 2-4 weeks – keep up the small bites every hour!
- ******** Please contact us if you are unable to tolerate a bite of yogurt every hour, cannot stay hydrated, or have continuous vomiting*****.***
- If you become constipated it is okay to use a laxative as needed

ACTIVITY:

In general, you may resume normal non-strenuous activity as soon as you are up to it. Aerobic activity as tolerated as long as you can speak in full sentences. If you cannot complete a full sentence without taking a breath, you are working too hard.

You should not lift anything heavy (anything you have to strain to lift) for 1 month after surgery.

CHEST & SHOULDER PAIN:

Sometimes patients will experience shoulder pain or deep pain in the chest after surgery. This is due in part to the gas used at laparoscopy, but more so to the sutures placed in the diaphragm muscle; and should gradually resolve. Heat applied to the shoulders tends to help this pain the best. It may be difficult/uncomfortable to take a deep breath or lie flat immediately after surgery as breathing uses the diaphragm muscle. This will slowly improve as you heal from surgery. Doing slow deep meditation type breathing will help with recovery.

PAIN MEDICATION & MEDICATION RECONCILIATION:

- You will have been given a prescription for a narcotic pain reliever such as hydromorphone (Dilaudid). You may take Acetaminophen (Tylenol) and/or anti-inflammatories (such as ibuprofen or naprosyn) as directed on the package in addition to the pain medication if needed.
- You may resume other medications you were on prior to surgery.
- You may discontinue any heartburn medication: Prilosec, Prevacid, Pepcid, Zantac, etc.
- You have a prescription for an anti-nausea medication such as prochlorperazine (Compazine). Use this as directed if you are nauseated, it helps lessen vomiting/retching. You may wish to keep this on hand if in the future you get very nauseated. If you don't have an anti-nausea medication please call the office for a prescription.



INCISIONS:

You will have typically 5 small incisions between your belly button and your rib cage. The incisions are sealed with a surgical skin glue. You may shower or bathe; avoid placing oil lotions on the glue. The glue will peel off over time. Some swelling and a lump under the incision will develop and is part of the natural healing process; you needn't be alarmed unless there is drainage more than a Band-Aid will handle. Bruising may occur here too.

CALL FOR:

Fever over 101.5; Continuous vomiting, significant inability to swallow yogurt-consistency foods (see section under swallowing), unusual chest or leg pain; increasingly red or hot incisions.

QUESTIONS AND CONCERNS:

For non-urgent questions, you may email Kate at kate@iersurgery.com. Please allow 24-48 hours for response. If you have an *urgent* issue that cannot wait until normal office hours, please call the office 303-788-7700 and Dr. Bell will be paged.

SWALLOWING AFTER THE LINX PROCEDURE

DIET PROGRESSION AFTER LINX

There is not a specific list of foods to eat during recovery from LINX surgery. You should be swallowing at least mushy, soft food as soon as possible (applesauce, yogurt, saltine crackers with sips of water, cottage cheese are examples). Each patient tolerates different consistencies at different times of their recovery, and some patients have no difficulty swallowing after surgery. Gradually increase the consistency of your diet over the next weeks as your body permits.

PHYSICAL THERAPY FOR THE ESOPHAGUS: "SWALLOW SOMETHING EVERY HOUR" –

It is a normal healing process for the body to form scar tissue around the esophagus and LINX. It is essential that the scar tissue remain flexible for the LINX to function properly – so it needs regular stretching. To stretch the scar tissue - ***swallow a few tablespoons of yogurt consistency or thicker food every hour while you are awake for the first 4-6 weeks after surgery.*** This can be uncomfortable at times, but is the most important part of your recovery, so keep doing it even if uncomfortable. You may also have 3-4 small meals per day.

EAT SLOWLY: "WAIT ONE MINUTE IN BETWEEN EACH BITE"

It takes 30 seconds for the esophagus to regain its strength after a swallow. If food seems to be hanging up, slow down and wait at least 1 minute between bites. Large bites are likely to have a harder time going down, and are more likely to lead to spasms or hiccups. Tablespoon size bites of soft, mushy foods are better. During regular meals still follow the 1 bite every minute principle (you'll be the last one at the dinner table, learn to enjoy each bite!).

IF WATER OR OTHER LIQUIDS AREN'T GOING DOWN WELL, ADD SOME FOOD:

The esophagus generates better pressures with semi-solid foods and exercise the LINX better than liquids. If liquids aren't going down well, the first thing we recommend is taking a few saltine crackers or soft mushy foods; the higher pressures from more solid foods will often help clear the liquids as well. Warm or room temperature liquids tend to be more comfortable than cold. Cold liquids lead to the weakest pressures (meaning more difficult for things to go down). Small sips frequently is helpful to prevent dehydration. Sometimes a ***sip*** of carbonated beverage helps to pressurize and push food through. Not more than a sip.



SWALLOWING MAY GET WORSE A FEW WEEKS AFTER SURGERY.

A few weeks after surgery (generally 2-4 weeks), scar tissue temporarily thickens. Swallowing may become much more difficult during this time. Be sure to swallow small bites every hour while you are awake. Please let us know if you are not able to swallow yogurt consistency most (over 50%) of the time. After a few weeks this should improve.

SWALLOWING AND MEDICATIONS:

You may take your normal prescription medications. It is sometimes helpful to take them with yogurt or applesauce instead of water. If you are still having problems swallowing them, you can check with your pharmacist and see if you can crush or break them. Hold off on large vitamins or supplements until you are swallowing without difficulty.

HICCUPS

Hiccups are most often due to fluid and/or food that has not passed out of the esophagus. Typically, they will stop in a few minutes. Wait until the hiccups have passed before resuming oral intake.

SALIVA

If you find that you are regurgitating saliva or liquids, this is usually due to their building up in the esophagus. Especially saliva (foamy stuff) has a hard time being cleared by the esophagus. Saliva and liquids tend to build up between meals and before going to bed. Taking 1-2 saltine crackers between meals and before bed will help absorb the fluid so the esophagus can push it through the LINX.

SPASM

Some patients experience spasm (chest tightness that can take your breath away) during the recovery period. Typically, this will last a minute or so. Spasm is most often due to food getting stuck in the lower esophagus though sometimes will occur spontaneously. Although it can be very uncomfortable, it is not serious, and the frequency and severity will decrease as time goes by. If after 4 weeks you are having spasms every time you eat please make an appointment to see us, or at least contact our office by phone or email.

HEARTBURN OR REGURGITATION AFTER SURGERY

Some patients will feel 'heartburn' after surgery. It is very unlikely this is due to reflux. Heartburn can occur with esophageal irritation of any type including surgery – not just acid reflux. Heartburn can also occur after drinking acidic liquids (e.g. lemonade) that don't clear immediately after swallowing.

Regurgitation during the recovery phase is *reflux of fluid within the esophagus*, and not from the stomach. Don't be alarmed if this happens, it should resolve as the swelling goes down and swallowing improves.

It is very unlikely you should need acid-suppressive reflux medications after surgery. If in the future, if someone wants to prescribe reflux medications for you, or you are concerned your reflux is back, please let us know. We strongly recommend a pH test to document reflux prior to starting on reflux medications, especially after surgery.

FINAL THOUGHTS.....

-Most of the healing process occurs in the first 4 weeks after surgery, that is when the swallowing can be the most difficult. Swallowing should slowly improve after that. It can take some patients a few months to be "normal."

-Eat very slowly. Take small bites, chew very well, and have smaller but more frequent meals.

-Eat a bite of yogurt consistency or thicker every hour while you are awake for the first 4-6 weeks (some patients may need to do this for a few months or more). If you are on the go, there are a lot of choices: string cheese, powerbar, dried fruit, trail mix, crackers..... anything that is yogurt consistency or thicker (liquids do not count).