Vitamin Recommendation List

Take this with you when shopping for a vitamin

Vit B1 (thiamine)	50-100mg/d
Vit B12	350-500ug/d Lap Band
VitB12	1000mcg/month sleeve, bypass, switch
Folate	400-800 mcg
Folate (child bearing)	800-1000mcg/d
Calcium	1200-1500mg/d
Vit A	5000 IU/d
Vit A	5000-10,000 IU/d bypass
Vit A	10,000 IU/d switch
Vit E	15mg/d
Vit K	90-120 ug/d
Vit K	300 ug/d switch
Vit D3	3,000 IU/d
Iron	18mg/d males
Iron	45-60 mg/d females
Zinc	8-11 mg/d
Zinc	16-22 mg/d bypass or switch
Copper	1mg/d
Copper	1-2mg/d bypass
Copper	2 mg/d switch

6

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J. Parrott et al. / Surgery for Obesity and Related Diseases 1 (2017) 00-00

Table 3

Supplement Recommendations to Prevent Post-WLS Micronutrient Deficiency

Vitamin B1 (Thiamin)

Thiamin supplementation above the RDA is suggested to prevent thiamin deficiency.

All post-WLS patients should take at *least* 12 mg thiamin daily (Grade C, BEL 3) and preferably a 50 mg dose of thiamin from a B-complex supplement or multivitamin once or twice daily (Grade D, BEL 4) to maintain blood levels of thiamin and prevent TD. \square

Vitamin B12 (Cobalamin)

All post-WLS patients should take vitamin B12 supplementation. (Grade B, BEL 2)

Supplement dose for vitamin B12 in post-WLS patients varies based on route of administration (Grade B, BEL 2):

Orally by disintegrating tablet, sublingual, or liquid: 350–500 µg daily

Nasal spray as directed by manufacturer

Parenteral (IM or SQ): 1000 µg monthly

Folate (Folic Acid)

Post-WLS patients should take 400–800 μ g oral folate daily from their multivitamin. (Grade B, BEL 2) \square Women of childbearing age should take 800–1000 μ g oral folate daily. (Grade B, BEL 2) \square

Iron

Post-WLS patients at low risk (males and patients without history of anemia) for post-WLS iron deficiency should receive at least 18 mg of iron from their multivitamin. (Grade C, BEL 3) 🛛

Menstruating females and patients who have undergone RYGB, SG, or BPD/DS should take at least 45–60 mg of elemental iron daily (cumulatively, including iron from all vitamin and mineral supplements). (Grade C, BEL 3) 🗵

Oral supplementation should be taken in divided doses separately from calcium supplements, acid-reducing medications, and foods high in phytates or polyphenols. (Grade D, BEL 3) 🛛 Recommendation is downgraded to D, since majority of evidence is from non-WLS patients.

Vitamin D and Calcium

All post-WLS patients should take calcium supplementation. (Grade C, BEL 3) Z

The appropriate dose of daily calcium from all sources varies by surgical procedure:

BPD/DS: 1800-2400 mg/d

LAGB, SG, RYGB: 1200-1500 mg/d

The recommended preventative dose of vitamin D in post-WLS patients should be based on serum vitamin D levels: Recommended vitamin D3 dose is 3000 IU daily, until blood levels of 25(OH)D are greater than sufficient (30 ng/mL) (Grade D, BEL 4) 🗵

A 70–90% lower vitamin D3 bolus dose is needed (compared to vitamin D2) to achieve the same effects as those produced in healthy non-bariatric surgical patients. (Grade A, BEL 1) 🛛

To enhance calcium absorption in post-WLS patients (Grade C, BEL 3):

Calcium should be given in divided doses.

Calcium carbonate should be taken with meals.

Calcium citrate may be taken with or without meals.

Vitamins A, E, and K

Post-WLS patients should take vitamins A, E, and K, with dosage based on type of procedure:

LAGB: Vitamin A 5000 IU/d and vitamin K 90–120 ug/d (Grade C, BEL 3)

RYGB and SG: Vitamin A 5000-10,000 IU/d and vitamin K 90-120 ug/d (Grade D, BEL 4) Z

LAGB, SG, RYGB, BPD/DS: Vitamin E 15 mg/d (Grade D, BEL 4)

DS: Vitamin A (10,000 IU/d) and vitamin K (300 µg/d) (Grade B, BEL 2)

Higher maintenance doses of fat-soluble vitamins may be required for post-WLS patients with a previous history of deficiency in vitamin A, E, or K. (Grade D, BEL 4)

Water-miscible forms of fat soluble vitamins are also available to improve absorption (Grade D, BEL 4)

Special attention should be paid to post-WLS supplementation of vitamin A and K in pregnant women. (Grade D, BEL 3) 🗵

Zinc

All post-WLS patients should take > RDA zinc, with dosage based on type of procedure (Grade C, BEL 3): ☑

BPD/DS: Multivitamin with minerals containing 200% of the RDA (16–22 mg/d)

RYGB: Multivitamin with minerals containing 100-200% of the RDA (8-22 mg/d)

SG/LAGB: Multivitamin with minerals containing 100% of the RDA (8-11 mg/d)

To minimize the risk of copper deficiency in post-WLS patients, it is recommended that the supplementation protocol contain a ratio of 8–15 mg of supplemental zinc per 1 mg of copper. (Grade C, BEL 3) 🗵

Formulation and composition of zinc supplements should be considered in post-WLS patients to calculate accurate levels of elemental zinc provided by the supplement. (Grade D, BEL 4) 🛛

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ASMBS Guidelines 2016 Update / Surgery for Obesity and Related Diseases ■ (2017) 00–00

Table 3 Continued.

Copper

All post-WLS patients should take > RDA copper as part of routine multivitamin and mineral supplementation, with dosage based on type of procedure (Grade C, BEL 3): 🗵

BPD/DS or RYGB: 200% of the RDA (2 mg/d)

SG or LAGB: 100% of the RDA (1 mg/d)

In post-WLS patients, supplementation with 1 mg copper is recommended for every 8–15 mg of elemental zinc to prevent copper deficiency. (Grade C, BEL 3) \square

In post-WLS patients, copper gluconate or sulfate is the recommended source of copper for supplementation. (Grade C, BEL 3) 🗵

WLS = weight loss surgery; RDA = recommended dietary allowance; BEL = best evidence level; TD = thiamin deficiency; IM = intramuscular; SQ = subcutaneous; RYGB = Roux-en Y gastric bypass; SG = sleeve gastrectomy; BPD/DS = biliopancreatic diversion/duodenal switch; LAGB = laparoscopic adjust gastric band.

Z New recommendation since 2008 [1] is noted by Z, otherwise there is no change in the current recommendation.

Table 6Nutrient Supplementation for Patients with WLS and Without WLS.

Nutrients	Non-WLS		WLS Preventative Supplements			
	Dietary Reference Intake (DRI)	Tolerable Upper Intake Level (UL) Daily Value (DV)	AGB	LSG	RYGB	BPD/DS
Vit B 1	1.2 mg/d 14 yrs+ M 1.1 mg/d 19 yrs+ F	UL: none set; no reports of adverse effects from > 50 mg B1/d from food or supplementsDV: 1.5 mg	At least 12 mg/d At risk patients: at leas	t 50 -100mg/d		
Vit B 12	2.4 ug/d 14 yrs+ M,F	UL: none set; due to its low potential for toxicity DV: 6 ug	350–500 ug/d oral, disi	ntegrating tablet, SI	or liquid or nasal – as directed	or 1000 mcg/mo IM
Folate	400 ug/d 19 yrs+ M,F	UL: 1000 mcg all ages & pregnancy DV: 400 ug	400–800 mcg oral 800–1000 mcg F child	pearing ages		
Calcium	1000 mg/d 19–70 yrs M, 19–50 yrs F 1200 mg 51–70 + yrs F	UL: 2000–3000 mg /d	1200–1500 mg/d			1800–2400 mg/d
Vit A	900 ug/d 14 yrs+ M; 700 ug/d 14 yrs+ F	UL: 10,000 IU/d (3000 mcg RAE/d)* retinol DV: 5000 IU	5000 IU/d		5000–10,000 IU/d	10,000 IU/d
Vit E	15 mg/d 14 yrs+ M,F	UL: 1000 mg/d (1500 IU/d) DV: 30 mg	15 mg/d			
Vit K	120 ug/d 19 yrs+ M 90 ug/d 19 yrs+ F	UL: none set; due to its low potential for toxicity DV: 80 ug	90–120 ug/d			300 ug/d
Vit D	600 IU/d (15 ug/d) 14 yrs+ M,F	UL: 4000 IU/d (100 ug/d) DV: 400 IU	At least 3000 IU/d to maintain D,25(OH) levels > 30 ng/mL			
Iron	8 mg/d 19 yrs+ M 8 mg/d 51 yrs+ F 18 mg/d 19–50 yrs F	UL: 45 mg/d DV: 18 mg	At least 18 mg/d from multivitamin	At least 45–60 n	ng/d in F with menses and/ patie	nts with history of anemia
Zinc	11 mg/d 19 yrs+ M 8 mg/d 19 yrs+ F	UL: 40 mg/d DV: 15mg	8–11 mg/d		8–11 mg/d to 16–22 mg/d	16-22 mg/d
Copper	900 ug/d 19 yrs+ M,F	UL: 10,000 mcg/d DV: 2 mg	1 mg/d		1-2 mg/d	2 mg/d

WLS =weight loss surgery; UL = upper intake level; DV = daily value; AGB = adjustable gastric band; LSG = laparoscopic sleeve gastrectomy; RYGB = Roux-en-Y gastric bypass; BPD/DS = biliopancreatic diversion/duodenal switch; SL = sublingual; IM = intramuscular; RAE = retinol activity equivalents; SQ = subcutaneous

Supplementation for non-WLS patients: Dietary Reference Intake (DRI), Daily Value (DV), Tolerable Upper Intake Level (UL) Supplementation for WLS patients: Actual dose for nutrients by type of WLS.

 $https://www.nal.usda.gov/sites/default/files/fnic_uploads//RDA_AI_vitamins_elements.pdf\ accessed\ 02/27/2017;$

https://www.nal.usda.gov/sites/default/files/fnic_uploads//DRI_Elements.pdf accessed 02/27/2017

ASMBS Guidelines 2016 Update / Surgery for Obesity and Related Diseases ■ (2017) 00–00

NUTRIENT	POTENTIAL	WHAT IT DOES	WHERE IT'S FOUND	SYMPTOMS AND PROBLEMS
Vitamin B1 shiemin	COMMON	converts-carbs to sugar, breaks down fats and protein, healthy digentian, nervisus system, skin, hait, eyes, inclust, low, immute system	pork, organ means, wholegrain/inniched comain, prown rice, wheat germ, bran, brewen's years, blackonap molesees	decreased heart function, age-related cognitive decline. Alpheimer's, fatigue
Vitamin 82 riboflavin	LOW	enstabolism, conversi-carbs to sugar, breaks down for & protein, healthy digenitor, natrices system, skin, holi, eyes, mouth, liver, antioxidant properties	brewen's poast, almonds, organ moats, whole grains, initial perm, muchtoorns, say, dainy, eggs, green wegetables	poor ion absorption, anemia, decreased free softwal protection, catanets, poor styraid function, DC-deficiency, fallque, elevated function, DC-deficiency, fallque,
Vitamin 83 nixcin	VERY COMMON	energy, digention, nervous system, skit, heir, ayer, mouch, law, eliminates toxins, sevintees homone production, improvet-choulation and cholesoard	beets, brewer's years, most, positiy, organ meats, flab, weeds, rach	csacking, scaling-skin, dispessive problems, confusion, ensisty, fatigue, reduced enderance
Vitamin B6 pyroxidine	COMMON	used in 100 engranes for protein metabolism, REC production, reduces homocystaine, healthy nerve & mancis cells, DNA/804A, 812 absorption, immune function	positity, turne, seitron, shrimp, beef liker, lentiti, soybeans, sonds, ruris, avocados, benanes, carrots, brown rice, boan, wheat garm, whole-grain ficur	depression, sleep and sile problems, elevated homocystetre, increase heart disease risk
Vitamin 812 cobalamin	COMIMON	healthy name calls, DNA-NNA, red blood call production, iron-function	fah, meat, pouling, eggs, dairy products	premia, finique, weakness, constipation, loss of apports, weight iou, numbers and tingling in the hands and fiver, depression, confusion, dementia, poor memory, mouth or tangue sommers
Biotin	RARE	carbothyticane, for, annino acid metabolism (the building blocks of protoins	means, vegetablier, unprocessed grains, brewer's jecet; com, caulificerer, kale, broccel, tomation, avocada, legumes, lentis, egg polis, mil, event potatore, sonde, nucl, wheat germ, salmon	depression, tervous system abnormalities, peenature-projing, hairioss, dois problems
Folate	COMMON	brain function, mental health, CNA, RNA during inforce, addressmon and preprints, with B12 to-regulate IBC production, iron function, reduce homosysteme	fortified ovvels, grains, tomato juice, preen vepetablo, black-ejed pros, lentils, beers	anarria, impaired immune function, folgae, incorreis, premature fait loss, high homocystoles, heart disease risk
Pavtothenate	COMMON	NDC production, sex and stress-related Normones, immune function, healthy depositon, helps use other vitamine	meat, vegetablet, whole gasito, brever's prant, avecado, legarnes, lentis, egy polito, mili, assent potatoan, sauds, ruits, sihaat germ, salman	reduced even tolerance, poor wound tasking, skin problems, forspor
Vitamin A retino/	COMMON	eyes, immune function, don, exential to cell grawth and development	rells, eggs, liver, fartified careals, arange or green vegetables, fruits	night blindness, poor invesse function, disc deficiency, fat malabaception

NUTRIENT	POTENTIAL	WHAT IT DOES	WHERE IT'S FOUND	SYMPTOMS AND PROBLEMS
Vitamin D ergacalc/feral	COMMON	calcium and phosphorus levels, calcium alsongeton, bone retranalization	sunlight, milk, egg yolk, lives, fish	estangenesis, decreased caldium absorption, thyraid problems
Vitamin E a tocopheral	COMMON	antizeidant, regulatos oeidetion reactions, stabilizes cell membrane, immune function, posterche ageinet conforeaccular disease, cotorects, macular degeneration	wheat perm, hor, eggs, nets, seech, cold- preservergetable ofs. dark leafy greens, revert potatoes, avocade, asperages	dry skin and heir, supturing of red blood cells, amenia, easy braking, PMS, hot Saeleas, ecterne, provinsis, cottenects, peor wound healing, musice weakness, sterility
Calcium	COMMON	benes: and fasctly, heips: hoart, norves, muscles, other body systems work property, needs other nutrients to function	dainy, wheat flow, soy flow, molecues, brewer's years, Brazil nuts, braccoli, cabbage, dark leafy greens, hapeinuts, ayeiers, sandmes, canned selmon	-stroporosi, orteorolacis, siteorrelacis, musice comps, initiability, acute anxiety, colonication tak
Magnesium	COMMON	used in 360 bischemicalnear/tions, muscle/ warver function, loops haat shyther stradg, hintraare genters, strang borne, regulates caldum, copper, zinc, potessium, stranin D	green regetables, beans, peas, nuts, seeds, whole, unprocessed grams	loss of apperite, nauseo, veniting, fatigue, weakness, numbross, tingling, cramps, setaures, personality-thanges, abronnal heart diptions, heart spectra.
Selenium	COMMON	antizoldani, usofa vidi vitarrin E, invrsara Farction, prostaglandri production	Interven's passi, what game, liver, instan, cald water fab, shatflish, garlis, whate grains, sumforwer seech, bisati nuts	destructive changes to heart, pancreas, sare muscles, increased hugging of red blood cells, weak invinue system
Zinc	COMMON	supports 100 endymes, immute system, wound healing, sense of taxon well, DMA synthesis, normal gaswith, directopment, during programsy, childhood, adolescence	oymen, ned meat, poultry, beam, num, seafood, whole grains, fortified broaktan comain, dairy	prowth retardation, hair loss, danifies, delayed renaal maturation, impotence, eyo and skin knioes, loss of appentic/taste, weight know, delayed record/healing, mettal lefturgy
Co-Q10	COMMON	powerful antioxidant, stops oxidation of LO. chokestoral, energy production, important to heart, liver, Rebray function	ollyfich, organ maats, whole grains	congentive heart failure, high blood pressure, angina, mitral volve prolepoe, littipue, ginghotts, weak immune system, stroke, cardiac antryferrian
Carnitine	LOW	energy, heart Arosten, oxidiar arrino axish for energy, metaboliar letones	ned maas, dairy, fuh, poolity, turnpah. (Immented asylowing, wheel, equivages, association, period builtier	elevated cholestand, abnormal liver function, muscle seathers, induced energy, impaired gluccor-control
N-Acetyl Cysteine (NAC) & Glutathione	COMMON	glutzthione production, lowen homocysteine, lipopranin (z), heallungs of hex radical damage, inferenziöte, deceneer mache fatigue, liver decoeffication, immune function	mosts, ricotta, cottago chonos, yogust, wheat porre, gravelle, nat faikes	free-radical overliped, elevated homocysteine, increased carear visk, outerects, macular degeneration, impained inmeane function, impained toxin elevitation
Alpha Upoix Acid	COMIMON	onergy, blood flow to nerven, glutothione levels in brain, insulin-sensibility, effectiveness of vitamins C, B, other anticeleterts	supplementation, spinach, broccusi, boet, Brower's years, some organ means	claisetic neuropathy, induced muscle mass, risk of athenisclerosis, Abheimer's, failure to thrine, brain atrophy, increased facts; add production