



LIVER SHRINKAGE DIET FOR UPPER GI AND BARIATRIC SURGERY

Why Do I Need This Diet?

Before your surgery, your surgeon may ask you to follow a special diet for 1 to 4 weeks. The aim is to **reduce the size of your liver**, which often becomes enlarged in people living with obesity due to fat and sugar (glycogen) stored in the liver.

A smaller, softer liver allows the surgical team better access during your operation, making the procedure safer, more efficient, and with better outcomes.

Evidence shows that following a **very low-calorie diet (VLCD)** for just two weeks can significantly reduce liver size and improve surgical outcomes.

🔗 [\[Source: PMC4857069 | PMC10898636\]](#)

! This diet should only be followed if you're preparing for surgery and have been advised to do so by your clinical team. Do not continue the diet after your operation unless advised by your bariatric team.

How It Works

You must follow this diet **exactly as prescribed**, starting on the date advised by your team. Even a single rich or high-fat meal before surgery can undo your progress and may cause your operation to be delayed or cancelled.

You Have 3 Daily Diet Options — Choose One Per Day

You may switch between these options each day but **don't mix and match meals from different plans**.

Option 1: Soup and Yoghurt-Based Liquid Diet

- 4 x tins of low-calorie soup (e.g., Weight Watchers, 295g each) – avoid homemade soups
- 4 x low-fat, low-sugar yoghurts (150–200g each)
 - Look for yoghurts with:
 - Fat ≤ 5g / 100g
 - Sugar ≤ 9g / 100g
- 200ml semi-skimmed milk or soy milk (semi-skimmed equivalent)

Option 2: Milk-Based Liquid Diet

- 5x 325ml meal replacement drinks, e.g. Slim-Fast, Weight Watchers, Tesco – Ultralim made with semi-skimmed milk or soy milk (semi-skimmed equivalent)
- 1–2 hot drinks made with Bovril or stock cubes (vegetable, chicken, or beef) in hot water

Option 3: A low-fat, low-sugar and low-carbohydrate Food-Based Diet (Only solid food option)

Breakfast

- 1 medium slice of toast with a scraping of low-fat spread, one or two eggs and one tomato.
OR
- 45g low-sugar cereal (under 10g sugar/100g) with semi-skimmed milk or alternative

Lunch (carbohydrate 50g cooked portion)

- 1 slice of bread or 2 crispbreads (no spread)
- 1 small portion of lean meat or fish (50g), or 2 eggs (not fried), or 30g low-fat cheese
- Green salad (e.g., lettuce, cucumber, spring onions) + 80g tomatoes



- Dressing: lemon/lime juice and herbs only

Dinner

- 1 small portion (50g) of lean meat, tofu, Quorn, or fish
- 1 small potato (50g), or 2 tbsp cooked rice or pasta, or 1 slice of bread
- Free vegetables (see table below)

Snacks/Extras for Option 3

- 200ml semi-skimmed milk (in drinks or on cereal)
- 2 portions of fruit (e.g., apple, banana, orange) – ~80g each
- 1 low-fat, low-sugar yoghurt

Vegetables: What's In and Out (Option 3 only)

Free to eat (non-starchy)

Lettuce, cucumber, mushrooms, broccoli*, cauliflower*, kale*, courgette, bean sprouts, asparagus, spring onions, celery, radish, tomatoes (max. 80g/day), etc.

(*Watch if on Warfarin – keep intake consistent)

Avoid (starchy/high sugar)

Carrots, peas, parsnips, sweet corn, beetroot, chickpeas, lentils, baked beans, yams, pulses, swede, red and yellow peppers, yam and sweet potatoes.

Extras Allowed on All Diet Options

- Tea and coffee (no sugar – use sweetener)
- Sugar-free jelly (up to 3 small pots or 1 sachet/day)
- At least 2 litres of fluids daily (water, tea, milk, sugar-free squash or diet drinks — no alcohol)

Daily Essentials

- 1 A–Z chewable multivitamin and mineral (available at pharmacies or supermarkets)

Common Side Effects & What to Do

Issue	What You Can Do
Constipation	Use Fybogel or Senna (available OTC) and increase fluids
Dehydration	Ensure minimum 2L fluids daily. Include teas, water, sugar-free squash
Fatigue or Emotional Changes	Normal in first few days — stay hydrated and remember the short-term challenge brings long-term benefit

Important Medical Notes

- **If you take Warfarin**, monitor INR every 3 days and keep your intake of vitamin K–rich foods (e.g., broccoli, kale) consistent
- **If you have diabetes**, speak to your GP or specialist — you may need to adjust your medication and monitor blood sugar more frequently

In Summary

This liver shrinkage diet is a **temporary but essential** part of preparing your body for a safe and successful surgery. Follow the plan carefully, stay in touch with your team, and don't hesitate to ask for help or clarification. If you have any concerns or are unsure about what you can eat, please contact your dietitian or bariatric team directly.