141 Keto Hacks for BARIATRIC PATIENTS

10 TIPS FOR BIO-HACKING YOUR METABOLISM FOR ACCELERATED FAT LOSS

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Hi Friend!

I’m so glad you’re here and have in your hands a copy of this ebook, because I’m about to tell you the things I learned the past couple years of daily researching keto and how bariatric patients can implement it to reap the benefits of accelerated fat loss.

Bariatric patients ask me all the time about the following ten things in this ebook.

The keto diet is a wonderful option for post bariatric patients, but the information out on the internet is so conflicting!!

Not to mention, we have very specific needs. Any macro calculator you use is going to give you extremely elevated numbers, and the amount of fat, dairy, and sugar substitutes recommended in the keto communities may not go well at all with our rearranged digestive system.

But one thing I know for sure: We need to learn how to treat the cause of being overweight and not just the symptom, and keto is a great plan for doing so.

“The biggest single input that you have every day in your health, by far, is what you eat. It’s not because food is just calories. Food is far more than calories, it’s information. It’s literally instructions that with every bite changes your biology. It alters your gene expression, 20,000 - 30,000 genes all transformed, good or bad depending on what you eat. You can turn on the fat genes or the skinny genes, the health genes or the disease genes.

“Calorie for calorie, is acting very differently in your body. If you eat foods high in sugar and starch, you’re going to slow your metabolism. If you eat calories higher in fat, you’re going to speed up your metabolism, independent of the calories.

“Food is not just calories, it’s information. It affect your hormones, insulin, thyroid, blood sugar, sex hormones, adrenal hormones... all of those things are regulated by what you eat.

“It doesn’t change over time, it changes literally minute-by-minute. By transforming food, you can upgrade your biological software literally within days.”

--Dr. Mark Hyman

Are you ready for the ten things I know from my research and own personal experience of losing 45 pounds of regain (in four months) with a keto lifestyle for bariatric patients?

Let’s dive in!!
Ten Keto Hacks for Post Bariatric Patients for Accelerated Weight Loss:

1. Counting Macros... and do you really need all that FAT?

I'm just going to start out with the number one question I have received over the past several months. Especially regarding that fat count!

If you use any calculators online to figure out your macros, you might be shocked to have them recommend something like 20g net carbs, 65g protein, 100g fat (just an example). And if the very thought of this much dietary fat causes flashbacks of violent dumping spells early on after your surgery, I'm here to tell you that those numbers are no longer applicable to you as a bariatric patient.

**Fat Macros:**
Keto expert Robb Wolf explains in his keto program that in the 20 years of coaching his clients in keto, eating TOO MUCH fat has kept many of his clients from losing weight.

Wolf also explains, the goal is to be in dietary ketosis (meaning that our body is making ketone bodies as a byproduct of our fat cells being accessed and releasing fat), but you do NOT need that much dietary fat to be in ketosis. *(Source)*

So for bariatric patients, you are going to want to just eat the amount of fat that will make you feel comfortable, never sick. If you butter your vegetables, or cook them in a healthy oil, eat the skin on your chicken, add avocado and sugar-free salad dressing to your salads... that is going to be plenty! It will satiate you between meals and it is all you need to get you into ketosis just fine.

Just normal fat. Don't go crazy.

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Protein Macros:
With protein, you want to follow your surgeon’s guidelines. They are probably in alignment with the ASMBS’ guidelines that state bariatric patients need to eat 0.8 - 1.0 grams of protein per pound of lean body weight. So for the majority of us, that’s typically around 60-80g protein per day. Maybe closer to 100g for a lot of men. (Source)

If you eat 3 meals per day, and at each meal you have the standard serving of meat (4 oz., the size of your palm, minus fingers), that is typically around 25-30g per meal! (Remember, your body cannot absorb any more than 30g of protein in one meal.)

So always go with your surgeon’s/dietician’s protein goal for your body for this one.

Carb Macros:
The dietitians I interviewed for this website all agreed on one thing: 100g of carbs per day is considered “low carb”, standard across the board for non-bariatric patients.

I was floored when I found that out, because I already know that I would for SURE gain weight on that amount of carbs per day!

But if you can carefully monitor your net carbs, anything under 20g net carbs will cause you to lose weight, quickly. This is how you get into high ketosis.

So until you are at your goal weight, it’s safe to say that avoiding fruit and whole grains will make it possible to easily make that goal of eating under 20g. THEN, down the road when you’ve hit your happy goal weight, and you want to experiment with adding fruit and whole grains in, if you keep it under 50g you may be able to keep maintaining. It’s going to take trial and error to find that happy balance for your body.

Still Want to Figure Out Your Macros??
Well, you’re in luck, because we are currently busy building an app to help you, a fellow bariatric patient, to calculate your macros based on your own personal stats. We have a release date of January 1st, 2019, though the beta version might be available to test before that time. Stay tuned for updates!
2. Fat Bombs, yea or nay?
Fat bombs are everywhere in the keto communities you see online, but you’re probably wondering if this is safe for a bariatric patient.

I will tell you, during the first week of switching to keto, you are going to feel awful. Truly awful. And your brain is going to BEG you for that hit of sugar so it can get its dopamine hit! Your mind is going to play tricks on you and it’s going to tell you, “You know what? Being overweight isn’t so bad. I should just eat whatever I want.”

…and then one week later, if you gave in, you’ll be so bummed, because you would have been over it by this time!

Fat bombs, when done right, are a sanity saver.

Just make sure you eat only a SMALL version of the fat bombs out there online, AND that your body is OK with eating sugar substitutes (sugar alcohols), because they are notorious for causing diarrhea in bariatric patients!

My favorite fat bombs are these Sanity Saving Freezer Cookies recipe on my blog. I wanted a fat bomb that doesn’t call for any sugar substitutes. But if you don’t mind artificial sugars such as Stevia, then I love adding Lily’s brand chocolate chips to get that bit of chocolate with the peanut butter.

It is just… Oh. So. Satisfying.

3. Bulletproof Coffee
Again, I refer you to the ASMBS guidelines for caffeine intake. They state, “Caffeine fluids have been shown to be as good as any others for keeping you hydrated.” However, you will need to avoid caffeine until your dietician gives you the go-ahead, typically 30 days post bariatric surgery. (Source)

Personally, I think coffee is a great appetite suppressant when you need it.

Now, traditional “bulletproof coffee” calls for adding a large amount of coconut oil, grass-fed butter, or MCT oils.

If you enjoy your coffee this way, and your intestines are not having a negative reaction, then by all means! (But maybe no more than one cup; see #1 why too much fat is not a good idea.)
But if you just can’t wrap your mind around drinking oily coffee, then one trick I found that has been working well among the keto communities is to add one serving (2 Tbsp) of heavy whipping cream per cup of coffee. It will not have a negative effect on your blood sugar or kick you out of ketosis, and is sweet enough that it might be all you need to sweeten your coffee. But most of all, it blends so much more easily with your coffee, so you don’t have that layer of oil floating on top. :)

Whether or not you add sugar substitutes is up to you!

4. “Keto Flu”/“Atkins Flu”/“low-carb flu”
As we discussed in #1, the first week of being on a keto diet is going to make you feel AWFUL. You may even have full-on flu-like symptoms for the first few days of this transition.

This is not unlike detoxing from recreational drugs. In both cases, our brains are coming off of a very concentrated form of pleasure-inducing chemicals that cause an intense hit of dopamine. Of course our body is going to rebel and try to get you to cave in and eat All. The. Carbs.

The best thing to do is to snack on foods that are on the keto-approved list (more on that below), keep a few of those fat bombs on hand for a little nibble when you need it, and most importantly of all, replenish those electrolytes by way of bone broth, dill pickle juice, “No Salt” (found in the spice aisle), and liberally salt your food, especially with Himalayan pink sea salt, which is super rich with minerals.

And then smile, because you will want to remember this feeling of ultimate crappiness to remind yourself how much your favorite sugar-laden foods are NOT WORTH IT.

5. Snack Until Fat Adapted!
If you go all in and try to do keto with no snacks between meals, you are going to drive yourself crazy trying to white knuckle it through your days!

It takes 3-7 days for your body to get into ketosis, but it takes 2-6 WEEKS to get into full fat adaptation.

Fat adaptation is when your body has used up all of its stores of glycogen hiding among the muscles, viscera, and interstitial areas of you body. It has
fully switched from preferring glycogen to using up your fat stores, and you have officially bio-hacked your metabolism for RAPID weight loss!

UNTIL YOU GET TO THAT POINT, I encourage you to snack on low-carb snacks until you no longer feel the need to do so anymore. If you are hungry between meals, please eat!

Some suggestions for keto snacks include: keto mini pizzas, string cheese, dill pickles, hard-boiled eggs, nuts, olives, sugar-free deli meat, pork rinds, veggies dipped in cream cheese, etc.

After you are fat adapted, or “keto adapted”, you will no longer want snacks.

Don’t force it. The desire to cut snacks will come naturally.

(But if you find yourself still snacking several months in, you may need some help with retraining ourselves to not be fooled by head hunger, which is something we work on in the Empowered Members Club.)

6. Artificial Sugars or Sugar Substitutes

This is something that I believe is personal preference.

Sugar substitutes are made to be 1000 Xs sweeter than real sugar, so if you’re trying to break a sugar addiction, this may not be the way to do it.

However, many people use and enjoy them in their daily keto lives and it has zero impact on their ability to lose weight.

Sugar substitutes are known to be bad for your gut health, but if you like them, if you don’t have digestive problems with them, if they keep you from breaking and binging on your favorite sugary foods, if you still lose weight while ingesting them, then please do enjoy!

7. Stalling on Keto

I hate that stalling happens on keto, but often times, people find it’s a sign that some carbs have been sneaking back in.

You really have to be SO CAREFUL reading your labels. They hide sugar in EVERYTHING, and it’s under a hundred different names, so it’s hard to know what is sugar and what isn’t.
If you know you’re only eating keto-approved foods, and still stalling, consider how many carbs are actually in those keto-approved foods. For example, blueberries are on the approved list, but not every day, and in a large quantity! I was so annoyed that my weight stalled for two solid weeks, only to find that when I cut my nightly treat of a cup of blueberries, the scale starting dropping like crazy.

The same thing happened to my husband when he realized his beloved cashews are super high in sugar! He now opts for lower-carb macadamia nuts, pecans, and sometimes pistachios.

### If you are stalling try these three things:

1. Try cutting sugar substitutes for a few days just to see if they are sabotaging you.
2. Check to make sure the products you buy do not have hidden added sugar.
3. Avoid foods that are higher in carbs (even though they are considered low-carb) such as fruit, nuts, and dairy.

### 8. Intermittent Fasting

I don’t know about you, but when I first heard about this concept, the words “intermittent fasting” sounded like a torture technique. (No freaking THANKS!)

That is, until I realized we are already fasting when we go to bed at night and wake up in the morning. Unless you’re a sleepwalker/eater, you are getting up from a 6-8 hour fast. The word breakfast literally is “Break” and “Fast”.

The longer you can extend this window of not eating (you can drink water, coffee, bone broth during your intermittent fast, so long as there is no sugar), the better chance you are giving your insulin levels to stay down and your body is burning stored fat like crazy during this window.

I’m not talking about days, just maybe start from 9 pm to 9 am.

Do not intentionally fast until you are fat adapted, which is 2-6 weeks into your keto way of life. It will make you hungry, and highly irritable. But if you are truly fat adapted, you will know it because you will NOT be hungry, and you will forget to eat.

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When I bring my kids home from school, it’s about 4 pm, and it’s only then that I realize I haven’t eaten yet, and I eat “breakfast” and then later on, I eat once or twice more later before I stop eating at 9 pm. And I’m NOT hungry between meals.

This is the difference being fat adapted makes! (SOURCE)

9. Do not exercise for the purpose of weight loss.

Do you have friends who say things like, “I’m going to eat this [insert sugary treat], then I’m going to go run it off tonight.”

Unfortunately, you cannot outrun a bad diet. Going to the gym will not negate the hundreds of calories eaten that day.

Doing so is exercising as a punishment, and it should NOT be a punishment.

If you are already doing an exercise routine you love, keep it up! That is AWESOME.

But if you are not yet exercising, I want you to know it is PERFECTLY OK. You’re not ready for it, and probably won’t be ready for it until you are truly fat adapted, 2-6 weeks into eating keto.

In fact, I can tell you that I LOVE working out, but because I’ve been so busy this year working on researching keto for bariatrics, I have exercised very MINIMALLY, and my husband has been the same way, and our weight just kept melting right off.

The reason to exercise should not be for weight loss, because if it is, you will get frustrated, because tangible results are going to be very slow-going, and you will want to give up working out AND eating keto.

But if you feel an excess of extreme energy, like I do while fat adapted, exercise is going to be FUN, and something you do because you make a commitment to yourself to do the things that help your mental health, reduce stress, and get back in touch with your body.
10. Common Sense Habits

I mentioned in #9 that exercise should be for the purpose of pleasure and making the commitment to put yourself first.

There are other common sense habits that you will want to incorporate as you go, because even though they seem so inconsequential to do one time, they compound over the years.

Each time you do these things, the add up. They matter.

If you run a fast flow of water over a rock for a day, nothing happens, right? It dries off and it the same rock.

What happens when water drip, drip, drips on the rock, one drip at a time, over the course of many years?

It cuts the stone.

Good habits compound, until eventually you get to a tipping point when it suddenly hits you how much your life has improved because of you see the sum of these tiny things, AND they cause a chain reaction to make other good things come into your life.

Even the slow drip of water that wears away the stone has a tipping point effect, causing that chain reaction that makes the stone to crack and split.

Some of those common sense habits include your sleep health, water intake, participating in meditation, taking your bariatric vitamins on schedule, exercising for stress relief, etc.

They don’t feel like they are making a difference each time we remember to do them, but these habits do add up!

**Bonus Tip!**


According to Dr. Mark Hyman, you are more likely to be overweight if your
friends are overweight than if your family’s overweight. You are 170% more likely to be overweight if your best friend is overweight, and only 40% more likely to be overweight if your parents are overweight. (Citing Harvard Studies)

We can’t choose our family, but thank goodness we can choose our friends.

Social connections and peer influence play far more into our behaviors than we realize. Peer pressure can work for bad, or it can work for good.

This is one of the biggest reasons so many post-bariatric patients are so surprised to find they lose several of their friends as they lose the weight. Relationships change as you begin creating your new lifestyle habits, and many relationships are unable to last when your ability to eat out and drink socially is greatly diminished.

Surround yourself with people who have the same goals you do.

And if you don’t, this is why the Barivangelist EXISTS!!

Come join our Free Facebook Group and be among other keto bariatric patients. Being with like-minded people is going to help you get those accelerated results!

“We need to use our social threads, connections, and networks to heal us by changing our behavior. This is the future of health care…. Friend power is so much more powerful than willpower.” — Dr. Mark Hyman (SOURCE)
About Laurie Cromie / Barivangelist

Hi there! My name is Laurie Cromie, aka The Barivangelist, from sunny Southern California!

In October 2013, I had a gastric bypass with hopes that someday soon I would be able to have a healthy pregnancy, after two scary pregnancies.

After a perfectly textbook pregnancy, with surgery having resolved all of my health issues, we brought our first daughter into the world. But her arrival brought with her post-op weight regain for both my husband and I!

I knew I didn’t want to go back to who I was before bariatric surgery, so I made it my mission to learn the root cause of obesity and regain after bariatric surgery.

After a year of researching everything I could about it, my husband and I decided to put my findings to the test!

On June 1, 2018, we stopped eating any sugar, grains or starches. In just a few short months, 40 pounds of regain just melted right off us. (That’s 40 pounds EACH.)

I knew we were on to something, so I started inviting others to join me, to do it WITH me, and when they too were finding success in my free group, I knew I had to bring it to anyone else who wanted to hear about how a ketogenic approach was causing us to drop body fat like crazy!

Thus, the Empowered Members Club was launched so we begin teaching others step-by-step how to implement keto into their own lives. But more than that, we are teaching our members to overcome sugar addiction, head hunger, and other sabotaging behaviors.

If you enjoyed this PDF of my favorite Keto Hacks for Bariatric Patients, please make sure you subscribe to my newsletter for my weekly keto meal plan, and join us in the free support group on Facebook.

If you need extra support, and a step-by-step guide to implementing a keto lifestyle, and you would like to be notified the next time Empowered Members Club is open again for enrollment, please join the waitlist here.

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