



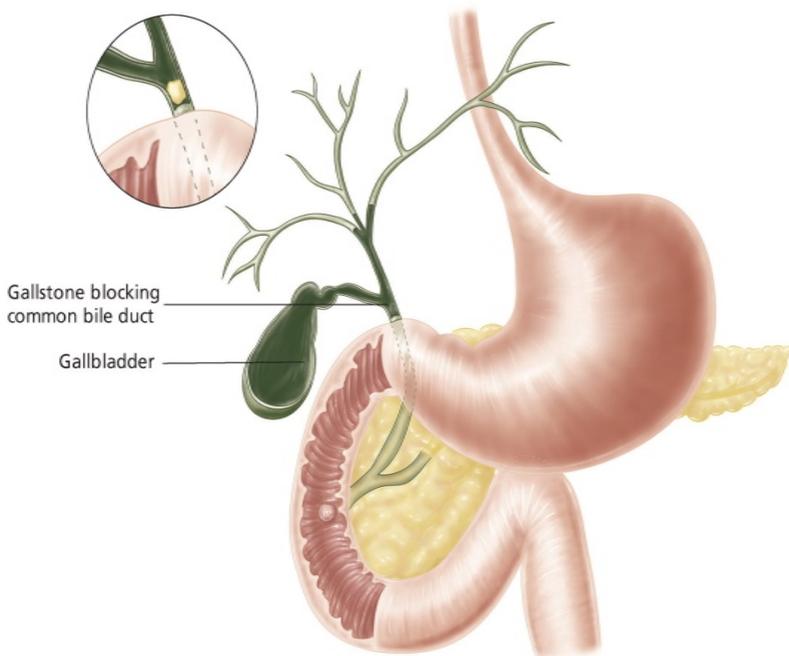
Information for  
patients and  
carers

**Gallstone Diet Advice**

## What are Gallstones?

Gallstones are small stones that can sometimes occur when bile pigments or calcium deposit in the gallbladder. They occur more commonly with increasing age. However, the risk of gallstones is also related to:

- Pregnancy
- Obesity
- Rapid weight loss
- Diabetes
- Smoking
- Family history of gallstones
- Medications, such as contraceptive pills
- Unhealthy diet



The gallbladder plays a relevant role in the digestive process, by collecting and storing bile, which will be successively released in the small intestine to help breaking down fat.

The bile duct connecting the gallbladder to the small intestine can sometimes be blocked by gallstones, which may cause pain, bloating, nausea and vomiting.

## Do I need a special diet?

We may have advised you to follow a low-fat diet because you have gallstones, but most people diagnosed with gallstones undergo surgery to remove their gallbladder (cholecystectomy). Evidence suggests that people who have gallstones should adopt a healthy diet, choosing lower fat options as part of a healthy diet.

Gallstones can cause pain and some people find that certain foods can be a trigger. These foods may be high in fat, but other foods may also cause a problem.

**It is important that you do not completely avoid fat in your diet, as a certain amount of fat is needed by the body to avoid deficiencies. It is also virtually impossible to achieve a diet that is completely fat free.**

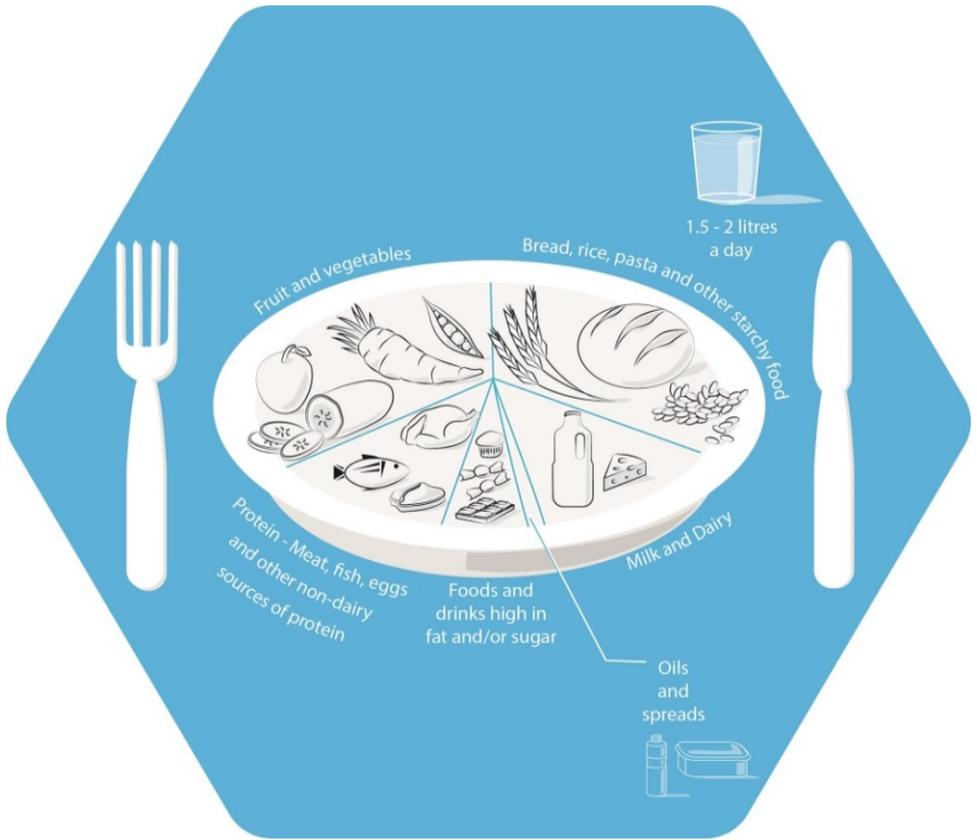
If you are overweight, losing weight will be beneficial. However, it is important to do this gradually, as rapid weight loss has been associated with the development of gallstones. A safe weight loss of 1 - 2 lbs (0.5 to 1 kg) per week is recommended.

**Please note:** After a cholecystectomy (removal of the gallbladder) you do not need to follow a low fat diet. Following a healthy diet is advisable for optimal health.

A healthy balanced diet consists of:

- At least five portions of fruit and vegetables per day: 1 portion = 80g or about 1 palm-full, and may be fresh, frozen or tinned
- A portion of starchy carbohydrates at each meal. Examples include bread, rice, cereals, pasta, potatoes, etc. Choose wholegrain varieties where possible
- Milk and dairy products (2 - 3 portions per day). Choose low-fat dairy products
- Protein foods 2 - 3 times per day, such as meat, fish, eggs and vegetarian alternatives such as beans and pulses
- Limit foods high in fats and sugars
- Make sure your diet is high in fibre: aim for 30g per day. This can be found in beans, pulses, fruit and vegetables, oats, and whole grain products, such as bread, pasta and rice
- Drink plenty of fluid; aim to have at least 6 - 8 glasses daily. All fluids count, avoid too many drinks with caffeine and choose no-added sugar drinks

It might be helpful to have smaller, frequent meals. Keep a food and symptom diary to identify trigger foods. Avoid these foods for a two-week trial period and note any improvements in symptoms. It is important to reintroduce foods if you do not think they are causing you problems.



## Ways to cut your fat intake

- Use a small amount of low fat spread instead of butter or margarine
- Only use spread if it is really necessary
- Eat less mayonnaise and salad cream including low fat varieties.
- Cooking oils are all full fat. Use in very small quantities or not at all
- Buy lean meat. Remove any visible fat. Take skin off poultry
- Try to have more fish based meals (not fried)
- Limit chips to once a week - use oven chips or thick cut home-made chips that have been well drained

- Grill, bake, steam or microwave rather than frying foods
- Try some of the low fat cheeses available. Use less - grating it makes cheese go further, or use a strong flavour cheese. Try skimmed or semi-skimmed milk, especially if you use more than ½ pint per day
- Eat fewer pies, sausage rolls and pasties
- Eat fewer crisps, chocolate, cakes and biscuits.
- Omega 3 fish oil capsules may help prevent the formation of gallstones

## Sources of further information

[www.lancsteachinghospitals.nhs.uk](http://www.lancsteachinghospitals.nhs.uk)

[www.nhs.uk](http://www.nhs.uk)

[www.patient.info](http://www.patient.info)

[www.accessable.co.uk](http://www.accessable.co.uk)

All our patient information leaflets are available on our website for patients to access and download:

[www.lancsteachinghospitals.nhs.uk/patient-information-leaflets](http://www.lancsteachinghospitals.nhs.uk/patient-information-leaflets)

**Lancashire Teaching Hospitals NHS Foundation Trust is not responsible for the content of external internet sites.**

Lancashire Teaching Hospitals is a smoke-free site. Smoking is not permitted anywhere on any of our premises, either inside or outside the buildings. Our staff will ask you about your smoking status when you come to hospital and will offer you support and advice about stopping smoking including Nicotine Replacement Therapy to help manage your symptoms of withdrawal. If you want to stop smoking you can also contact the Quit Squad Freephone 0800 328 6297.

Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

**Gujarati:**

આ માહિતીને સમજવામાં સહાયતા જોઈતી હોય તો કૃપા કરીને પૂછો. આ માહિતી મોટા છપાણામાં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે.

**Romanian:**

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi.”

**Polish:**

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostępnić dużym drukiem oraz w innych językach

**Punjabi:**

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵੱਲੋਂ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਯਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਿੰਟ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵੱਲੋਂ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

**Urdu:**

دو سرى زبانوں او ر بڑى اگى آپ كو هى معلومات سمجھنے كے يعل مدد كى ضرورت ہے تو  
يىچھيا حى يبه ابى دست بو يىسكت ہے برا ے مبر يىان پو ے يچھه يى- معلومات

**Arabic:**

مطبوعة بأحرف كبيرة و بلغات إذا كنت تريد مساعدة في فهم هذه المعلومات يُرجى أن تطلب  
أخرى يمكن تو فيبر هذه المعلومات

**Department:** Surgical Assessment Unit

**Division:** Surgery

**Production date:** July 2021

**Review date:** July 2024

**JR656 v1**