

- Surgery

HEALTH

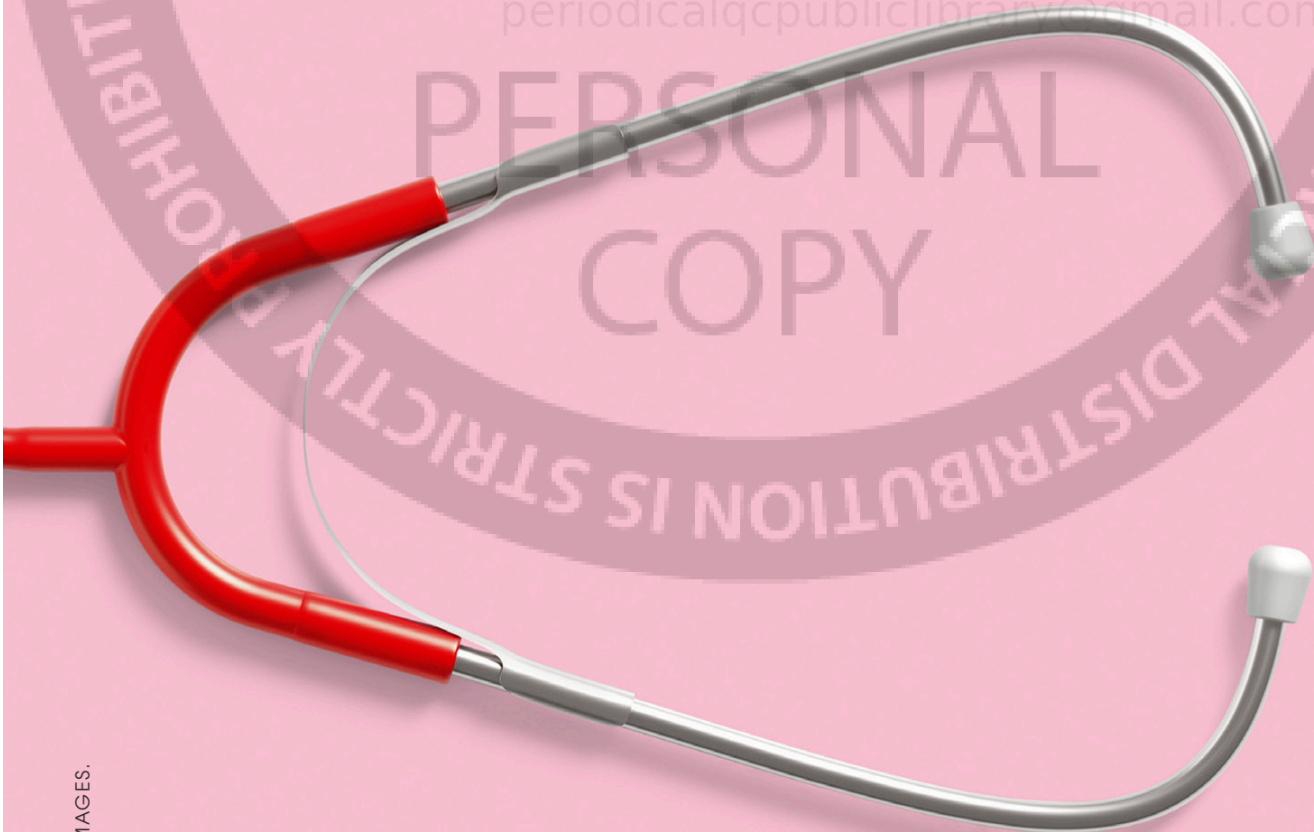
Getting



surgery

BEFORE YOU GO IN,
TRY THESE FIVE THINGS
FOR A SMOOTHER RECOVERY.

BY RENÉE BACHER



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HEALTH

Any operation is a big shock to the body, and depending on your health status before you go in for your procedure—and how invasive it is—it often takes longer than your doctor predicts to recover.

Set yourself up to be back in action ASAP with these best practices.

Prioritize “Prehab”

■ **Before any surgical procedure, the American College of Surgeons recommends** that patients who have advance notice should take steps to get themselves to a better place physically—that will help them better withstand any mandated postoperative inactivity, which can lead to increased risk of complications like blood clots and infections. There’s even a term for it: “prehabilitation,” or “prehab.” Regular cardiovascular exercise and strength training will help, says Jenna Bourgeois, M.D., a board-certified plastic surgeon in Baton Rouge,

LA. Since you will likely need to utilize different muscles to get moving after surgery, ask your surgeon about the best prehabilitation program for the surgery you will be having, she adds; that may look like targeted physical therapy or simply taking a daily walk to improve your cardiovascular health and lower any pre-op stress. In fact, patients who walked more than 7,500 steps per day before a scheduled surgery cut their risk of post-op complications by half, according to one recent study in the *Journal of the American College of Surgeons*.

Review Your Diet

■ **You know eating healthy is a good idea in the best of**

times, but it can be especially prudent before surgery, when you may be stressed and tempted to seek comfort in the arms of processed foods.

“I recommend a balanced, nutrient-rich diet that is high in protein to give your body the best ability to heal,” Dr. Bourgeois says.

Protein in whole foods such as nuts, eggs, lean meats, fish, and dairy products can help minimize muscle atrophy, often a result of inactivity after surgery. According to one scientific review, people begin to lose muscle as little as 48 hours after inactivity post-surgery. This can be particularly alarming for older adults, who lose muscle at a faster rate.



THE VOORHES/GALLERY STOCK.

HEALTH



Review Your Meds

■ **Go over your current medications with your surgeon and your care team**—including prescriptions, supplements, and OTC meds you take regularly—to see if you should stop any before surgery. For example, you may be asked to stop taking blood thinners because they can prevent blood from clotting and make healing of incisions more difficult. Similarly, some OTC medicines, such as ibuprofen, can cause bleeding after surgery when your body needs to stop bleeding and heal. As for other regular medications, keep taking them if your surgical team approves them. If you have diabetes or high blood pressure, for example, you certainly want to keep taking your medications so you won't inadvertently complicate your recovery by creating other issues, says Patricia L. Turner, M.D., F.A.C.S., executive director and CEO of the American College of Surgeons and a minimally invasive and laparoscopic general surgeon.

Keep Your Bowels Moving

■ **Opioid pain medications, which are often prescribed after surgery,** can be constipating, as can anesthesia and prolonged inactivity. Discomfort from

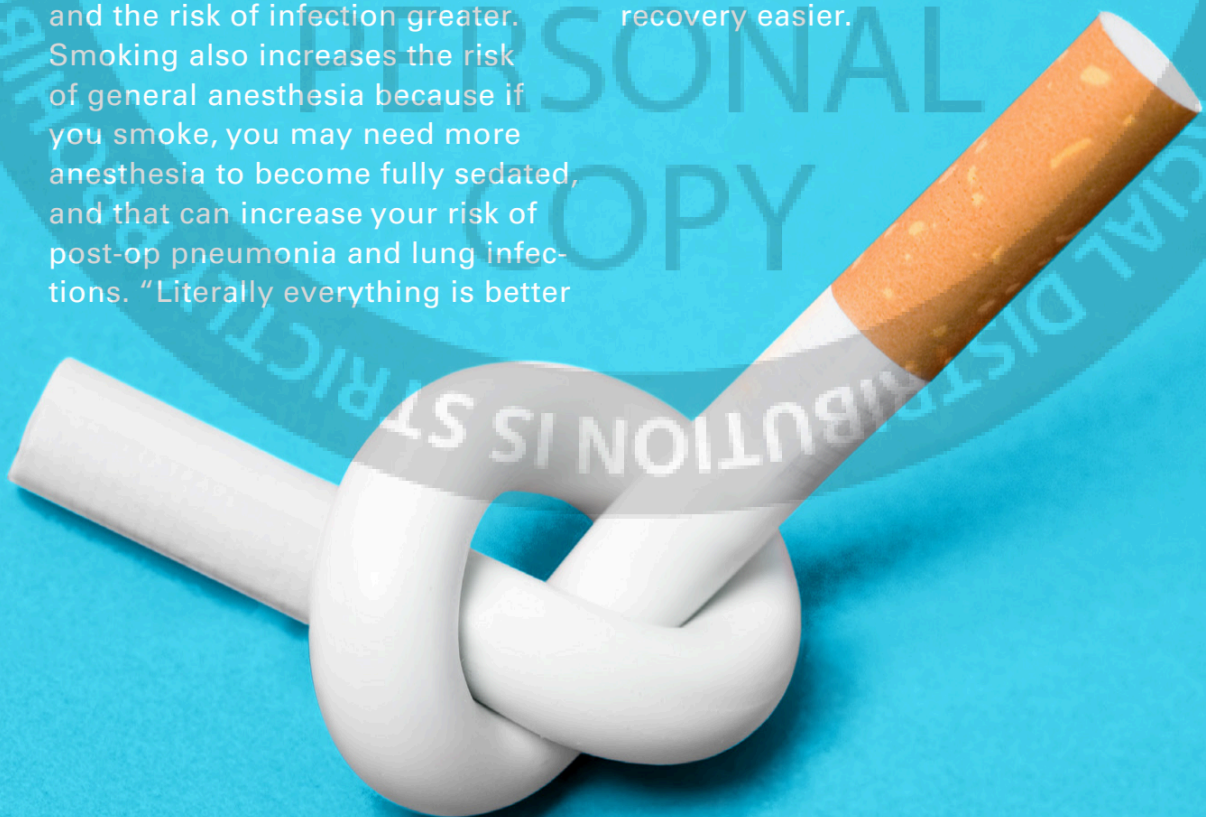
constipation is the last thing you want to deal with when you're already trying to manage pain from surgery. Dr. Bourgeois suggests that her patients start taking stool softeners a few days prior to surgery and continue taking them until they have finished these medications and have normal bowel movements. She also recommends alternating OTC pain meds with any opioids after surgery so as to wean yourself off the latter as quickly as you can.

STOCKSY.

Take a Break From Smoking (or Better Yet, Quit)

■ **The sooner you can quit smoking tobacco or inhaling other foreign substances, like marijuana, the better.** Yes, smoking damages the lungs, but it can also damage other bodily functions, including by increasing inflammation, reducing circulation, and impairing immune function. It constricts blood vessels, making wound healing more difficult and the risk of infection greater. Smoking also increases the risk of general anesthesia because if you smoke, you may need more anesthesia to become fully sedated, and that can increase your risk of post-op pneumonia and lung infections. "Literally everything is better

if you stop smoking prior to surgery," says Dr. Turner. Quitting can be challenging, so ask your surgeon about tips and tools for quitting at least two weeks in advance of your procedure. According to the American Heart Association, within two weeks of quitting smoking, your heart rate and blood pressure drop, the levels of carbon monoxide in your blood revert to normal, and in some cases circulation improves and lung function increases—all of which can make surgery safer and recovery easier.



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