

# Taking Medications After Total Gastrectomy

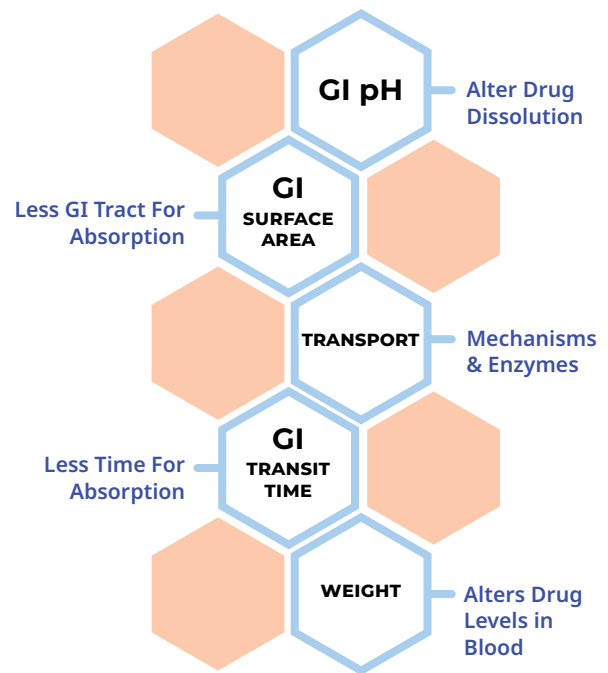
PATIENT RESOURCES  
**HDGC**

## Factors That Alter Drug Absorption

Total gastrectomy can significantly alter drug absorption. Remember to discuss any medications you may take with your pharmacist and your healthcare team.

### After gastrectomy you have:

- A higher gastrointestinal (GI) pH, which may alter how drugs dissolve
- A smaller GI surface area, which means less opportunity for medications to be absorbed into your body
- Fewer transport mechanisms and enzymes to digest medications
- Faster GI transit time, and therefore less time to absorb medications
- Likely weight loss, which alters drug concentration levels in your bloodstream



## General Recommendations to Follow After Total Gastrectomy

- Review your medication history with a clinical pharmacist and your healthcare team before surgery.
- You and your team may consider alternate forms of medications, such as transdermal (through the skin), sublingual (under the tongue), or intranasal (through the nose), when there are concerns with oral absorption.
- You may be able to crush some medications or open capsules to help them dissolve and help your body absorb them better.
  - > Always check with your pharmacist or healthcare team before crushing or opening any medications.

## Liquid medications may contain sugar, which may increase the risk of dumping syndrome

- > Discuss these medications with your pharmacist or dietitian first.



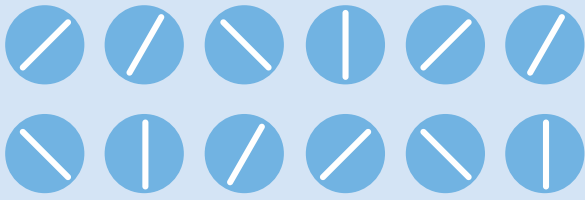
## Try to Avoid



- Timed or controlled-release medications, including those labeled ER, XR, or CR
- Medications that cause gastrointestinal irritation or require a highly acidic environment for optimal absorption

## Avoid Medications with these Labels





## Pain Medications After Your Gastrectomy

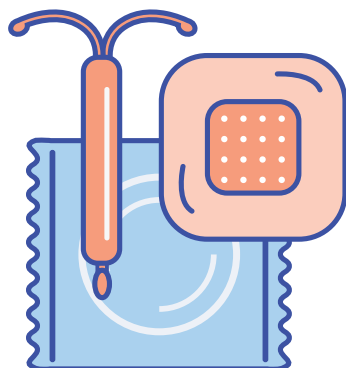
- Your pain management medications after surgery may come in multiple forms, including epidurals, intravenous and oral medications
- Short-term use of oral opioids may be used as prescribed by a doctor for pain as needed
- Immediate-release acetaminophen tablets may be used as needed
- Moderate amounts of Non-Steroidal Anti-Inflammatory Drugs (NSAIDs), such as, ibuprofen and naproxen, may be used if needed for short periods.



## Contraception

- After a total gastrectomy, you will want to **avoid oral contraceptives ("the pill")** containing estrogens or progesterone due to decreased absorption (and therefore decreased efficacy).
- Discuss alternative forms of contraception, such as intrauterine or implantable devices, with your healthcare team and/or OB-GYN **before** gastrectomy.

Discuss alternative forms of contraception



## Medications for Bile Reflux

Bile reflux occurs when digestive liquid produced in your liver backs up into the esophagus.

- Bile reflux is not the same as acid reflux
  - > Therefore, you should avoid typical drugs used to treat acid reflux, such as proton pump inhibitors (e.g., Omeprazole, pantoprazole) and Histamine2 blockers (e.g., Famotidine).
- Your treatment for bile reflux will include lifestyle and diet changes as well as medications such as sucralfate
  - > If diet and lifestyle changes do not help your bile reflux, talk to your pharmacist or healthcare team for more information about possible alternative medications.

## Chronic Medications

- Your weight is expected to rapidly drop after total gastrectomy and reach a new stable baseline between 6 and 12 months after surgery
  - > Some medications, such as those used to treat hypertension and diabetes, or medications that are dosed based on weight, will likely require dose adjustments based on your new baseline weight.

Close follow-up with a primary care physician is crucial during this period.

- You should review your medication list with your gastrectomy care team and clinical pharmacist prior to surgery and in any follow-up appointments.

