



Preparation for colonoscopy and other surgical procedures in abstinence

If you are living in recovery from food addiction, eating disorders, and other addictive substances, medical procedures can present unique challenges. The temporary dietary restrictions, medication requirements, and stress of the procedure can potentially trigger unhealthy behaviors. This guide aims to provide clear, structured guidance that aligns with abstinent principles while ensuring optimal medical outcomes.

Understanding Anesthesia and Your Recovery

1. Local Anesthesia Considerations

Local anesthesia involves numbing a specific area of the body while you remain conscious. For colonoscopies, this is rarely used as the primary method, but understanding its principles helps explain the overall approach to procedural sedation.

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Key Points for Recovery:

- Local anesthetics do not contain addictive substances
- They work by blocking nerve signals temporarily
- No risk of triggering substance use disorders
- Clear thinking and decision-making remain intact

2. Conscious Sedation (Most Common for Colonoscopy)

Most colonoscopies use conscious sedation, which involves medications that help you relax and may cause amnesia of the procedure while maintaining your ability to breathe independently and respond to verbal commands.

Medications Commonly Used:

- **Midazolam (Versed):** A benzodiazepine that provides anxiety relief and amnesia
- **Fentanyl or Propofol:** For pain relief and deeper sedation when needed

Key Points for Recovery:

- These medications are short-acting and eliminated from your system within hours
- They are administered in a controlled medical setting with continuous monitoring
- The risk of triggering addiction is minimal due to controlled administration and medical supervision
- Discuss your recovery history with your medical team beforehand

3. General Anesthesia (For Complex Procedures)

Some surgical procedures require general anesthesia, where you are completely unconscious.

Key Points for Recovery:

- Administered and monitored by anesthesiologists
- Medications are carefully calculated based on your medical history
- Recovery includes a supervised wake-up period

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- Side effects like nausea or grogginess are temporary and medically managed

Nutritional Preparation Guidelines

The following guidelines are based on established colonoscopy preparation protocols adapted for individuals maintaining abstinence from trigger foods and following structured meal plans.

General Rule (per American Society of Anesthesiologists & GI guidelines):

- Solid food:
 - **Stop eating at least 6 hours** before anesthesia.
 - This includes milk, juice with pulp, fatty foods, and solid meals.
 - A heavier or fatty meal may require up to 8 hours.
- Clear liquids:
 - **Allowed up to 2 hours** before anesthesia.
 - Examples: water, clear apple juice, black coffee/tea (without milk/cream), clear broth, sports drinks.
 - Avoid red or purple liquids (for colonoscopy, as they can look like blood in the colon).

For colonoscopy specifically: Bowel prep

1. Diet changes before the procedure

- **1–3 days before:** switch to a **low-fiber / low-residue diet** (avoid seeds, nuts, corn, raw vegetables, whole grains).
- **The day before:** switch to **clear liquids only** (broth, clear juice, tea, black coffee, gelatin, sports drinks—avoid red or purple).

2. Laxative solution

- You drink a large-volume solution that flushes stool out of the colon.
- Common options include:

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- **Polyethylene glycol (PEG) solutions** (e.g., GoLYTELY®, NuLYTELY®, MoviPrep®)
- **Sodium picosulfate with magnesium citrate** (e.g., Prepopik®, Pico-Salax®)
- **Sodium phosphate tablets** (less commonly used because of kidney risks)
 - Most modern instructions use a **split-dose regimen**:
 - Half the solution **the evening before**.
 - The other half **4–6 hours before the colonoscopy**.

3. Hydration: Your Primary Focus

- Drink plenty of water throughout the preparation period
- Proper hydration helps prevent complications and supports recovery

Abstinent & Approved Nutrition During Prep

Broths (Unlimited)

- Vegetable broth
- Chicken broth
- These provide electrolytes and some comfort during the fasting period
- Choose low-sodium varieties when possible
- *For accountability, you can commit them with your sponsor or food buddy (ie. lunch: 500 ml chicken broth)*

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Carbohydrate / Starch Management

The preparation requires clear liquids, which limits traditional abstinent food choices. Here's how to manage carbohydrates safely:

- **Apple juice (120 ml servings):** Use only colonoscopy-approved (no pulp), no-sugar-added varieties
- **Exchange system:** Every 120 ml juice equals 1 fruit or 1 starch serving in your regular meal plan
- **Dilution requirement:** Always dilute juice with at least equal parts water (120 ml juice + 120 ml water minimum)

Why Dilution Matters:

- Concentrated sweetness can trigger cravings or binge behaviors
- Dilution helps maintain blood sugar stability
- Reduces the intensity of sweet taste that might be problematic in recovery

Examples:

- 120 ml apple juice + 120 ml water = 1 fruit serving
- 240 ml apple juice + 240 ml water = 2 starch servings

What's Temporarily Eliminated

During Preparation Day:

- **Protein sources:** Will be absent during the clear liquid phase
- **Vegetables:** Will be absent during the clear liquid phase
- **Fiber:** Essential for normal digestion but must be eliminated for clear visualization

Artificial Sweeteners and Sugar-Free Options

Approved Options (Use Minimally):

- Colonoscopy-approved Jello (avoid red, purple, blue colors)
- Gatorade (clear varieties only)

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- Crystal Light (clear varieties only)

Caution: These should be kept to a minimum as they may trigger cravings or artificially sweet taste preferences that can be problematic in food addiction recovery.



Post-Procedure Recovery

Immediate Post-Procedure

What to Expect:

- Mild grogginess from sedation medications
- Possible temporary disorientation
- Gradual return to normal mental clarity over 2-4 hours

Nutrition Resume:

- When you feel ready to eat and have been cleared by medical staff
- Start with softer, low-fiber foods
- Return to your normal abstinent meal plan gradually
- If you're behind on scheduled meals, simply begin your regular plan from the point you feel ready

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First Foods After Procedure

Recommended Options:

- Soft proteins: eggs, soft-cooked fish, tender chicken
 - Well-cooked grains: white rice, oatmeal, soft bread
 - Cooked vegetables: well-steamed or soft-cooked varieties
 - Avoid raw vegetables and high-fiber foods for 24-48 hours
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Supporting Your Recovery During Medical Procedures

Before the Procedure

Communication with Medical Team:

- Inform your healthcare providers about your recovery status
- Discuss any concerns about medications or sedation
- Ask questions about what to expect during recovery

Recovery Support:

- Arrange for a trusted person to accompany you (or arrange phone calls around the procedure for support)
- Plan your post-procedure meals in advance
- Have your regular meal plan ready to resume (for example measured and packed in the fridge when you get home)
- Consider contacting your sponsor or support network if applicable

Managing Anxiety and Stress

Healthy Coping Strategies:

- Practice meditation or deep breathing exercises
- Use prayer or spiritual practices
- Maintain connection with your support network

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- Remember that medical procedures are temporary and necessary for health

When to Seek Additional Support

Contact your healthcare team if:

- You experience unusual reactions to medications
- You have concerns about resuming normal eating
- You feel triggered or at risk regarding your recovery

Contact your recovery support if:

- You feel anxious about the procedure affecting your abstinence
- You need emotional support during the preparation period
- You want to discuss the experience with someone who understands recovery

Final Notes

Remember that taking care of your physical health through necessary medical procedures is an important part of overall recovery. The temporary disruption to your normal eating pattern is medically required and, when approached with the structure outlined above, supports rather than threatens your abstinent lifestyle.

Your commitment to both physical health and recovery principles demonstrates the integration of healthy living practices that support long-term wellness and sobriety.