

Abdominal pain after gastric sleeve surgery

A patient guide from Southern Weight Loss

Introduction

Abdominal pain after gastric sleeve surgery can feel worrying.

Most discomfort after surgery is **normal and temporary**. However, some types of pain require assessment.

This guide explains:

- What pain is expected
- What is not expected
- Common causes
- Red flag symptoms
- When to contact us or attend hospital

At Southern Weight Loss, we would always rather you call than sit at home worrying.

Understanding your surgery

A sleeve gastrectomy reduces the stomach to a narrow tube by removing approximately 70–80% of the stomach. The intestines are not bypassed.

Sleeve gastrectomy is performed laparoscopically (keyhole surgery), which means:

- Small incisions
- Internal staple line along the stomach
- Reduced tissue trauma compared with open surgery

Pain can arise from the abdominal wall, the staple line, the oesophagus, or unrelated conditions.

Normal pain after surgery

In the first 1–3 weeks, the following are common:

1. Incision site discomfort

- Localised tenderness
- Bruising
- Sharp pain with movement
- Improving steadily over 2–3 weeks

2. Shoulder tip pain

Referred pain from diaphragm irritation due to surgical gas.
Typically settles within a few days.

3. Tightness or pressure when drinking

Common early while swelling resolves.
Usually improves over 4–6 weeks.

4. Mild cramping

Often related to adjusting portion sizes or drinking too quickly.

If pain is gradually improving, you are eating small portions, and you feel otherwise well — this is reassuring.

Common causes of abdominal pain after sleeve surgery

1. Overeating or eating too quickly

The sleeve has limited capacity. Eating too fast can cause:

- Sharp upper abdominal pain
- Nausea
- Pressure or “stuck” feeling

Solution: Slow down. Small bites. Chew thoroughly. Stop at the first sign of fullness.

2. Reflux or oesophageal irritation

The sleeve increases intragastric pressure and can worsen reflux in some patients.

Symptoms:

- Burning chest discomfort
- Regurgitation
- Night symptoms

This may require acid suppression therapy.

3. Constipation

Very common in the early post-operative phase.

Symptoms:

- Lower abdominal cramping
- Bloating
- Infrequent bowel movements

Hydration, fibre progression (as advised), and stool softeners may help.

4. Gallstones

Rapid weight loss increases gallstone formation.

Gallstones can cause:

- Right upper abdominal pain
- Pain radiating to the back or right shoulder
- Nausea after fatty meals

This may occur months after surgery. An ultrasound confirms diagnosis.

5. Gastritis or ulceration

Inflammation of the stomach lining can occur, particularly if:

- NSAIDs are used
- Smoking continues
- Acid suppression is stopped prematurely

Symptoms:

- Persistent upper abdominal pain
- Nausea
- Occasionally vomiting

6. Staple line complications (rare)

Serious complications are uncommon but important:

- Leak
- Abscess
- Bleeding

These usually present early (within first few weeks), but vigilance matters.

Red flag symptoms: seek urgent assessment

Attend hospital or contact us urgently if you develop:

- Severe, worsening abdominal pain
- Fever
- Persistent vomiting
- Rapid heart rate
- Shortness of breath
- Left shoulder pain with feeling unwell
- Inability to tolerate fluids
- Black or bloody stools

A gastric leak is rare, but early recognition is critical.

Timeline matters

First 2 weeks

Pain usually relates to healing, swelling, or intake adjustments.

1–3 months

Think reflux, gallstones, dietary triggers.

6+ months

Gallstones or unrelated abdominal conditions become more likely.

Not every abdominal pain is caused by your sleeve.

Appendicitis, kidney stones, ovarian pathology, and bowel conditions still occur in bariatric patients.

When to contact Southern Weight Loss

Please reach out if:

- Pain persists beyond a few days
- You are unable to meet fluid goals
- You cannot tolerate protein
- Pain interrupts sleep
- You feel something is “not right”

Clinical instinct matters.

What we may arrange

Depending on symptoms:

- Blood tests
- CT scan
- Abdominal ultrasound
- Gastroscopy
- Medication review

Our role is to differentiate normal adaptation from pathology.

Reassurance

Gastric sleeve surgery is a safe and well-established procedure.

Serious complications are uncommon.

Most abdominal pain after surgery relates to:

- Healing
- Eating behaviour
- Reflux
- Constipation
- Gallstones

The key is early communication.

You are not expected to diagnose yourself.

Practical tips to reduce abdominal discomfort

- ✓ Eat slowly
- ✓ Prioritise protein
- ✓ Stop at early fullness
- ✓ Avoid carbonated drinks
- ✓ Maintain hydration
- ✓ Take prescribed acid suppression
- ✓ Avoid NSAIDs unless discussed

The bigger picture

Abdominal pain can feel alarming, particularly when you have undergone major surgery.

However, the majority of post-sleeve discomfort is manageable and temporary.

At Southern Weight Loss, follow-up is not optional, it is part of safe care.

If you are unsure, contact us.

We would always rather review a normal scan than miss an evolving problem.

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This guide is for educational purposes. Individual advice may vary. If you are acutely unwell, seek urgent medical care.