

THE PRACTICAL FIRST-WEEKS GUIDE

GLP-1

The First 30 Days

**What to Eat When You Can
Barely Eat**



What to eat when you can barely eat: nausea-safe foods by symptom, no-cook protein for a tiny appetite, and a 7-day menu.

THE PRACTICAL KITCHEN GUIDES

GLP-1

The First 30 Days

What to Eat When You Can Barely Eat

A food-and-protein survival guide for your first weeks on a GLP-1 medication — nausea-safe foods indexed by symptom, no-cook protein that fits a tiny appetite, and a 7-day small-portion menu with one grocery list.

The Practical Kitchen Guides

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Important — Please Read First

Educational only — not medical advice

This guide is general educational information about food and portion sizes. It is not medical, nutritional, or pharmacy advice, and it is not a substitute for care from a qualified professional. It does not diagnose, treat, cure, or prevent any condition.

GLP-1 medications are prescription drugs. Decisions about **whether** to take one, **which** one, the **dose**, the **injection schedule**, and how the drug interacts with your other medications or health conditions belong to **you and your prescriber and pharmacist** — not to a food guide. **This book deliberately says nothing about any of those things.**

What this book does do is answer one practical, everyday question that a prescription label does not: when your appetite is suppressed and eating feels hard, what do you actually put in your mouth? Everything here is about ordinary food and how to portion it.

- **Talk to your clinician or a registered dietitian** before you change your eating, especially about your **personal protein and calorie targets**. The general numbers in this book are common rules of thumb, not a prescription for you.
- If you have **diabetes, kidney disease, a swallowing disorder, a history of an eating disorder, food allergies, or you are pregnant or breastfeeding**, some of the general suggestions here may not fit you. Your clinician's guidance always wins.

- Nutrition numbers are **approximate**. Brands and products vary a lot — always read the label in front of you.

Get medical help — don't wait

Contact your prescriber or seek medical care promptly if you cannot keep fluids down, have signs of dehydration, severe or lasting belly pain, ongoing vomiting or diarrhea, or any symptom that frightens you. This is about your safety, not your menu — when in doubt, call a professional.

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Welcome to Week One

If you just started a GLP-1 medication and food suddenly feels like a foreign language — you're not hungry, a few bites fill you up, some smells turn your stomach, and you have no idea how you're supposed to get “enough protein” on almost no food — this short guide is for you.

Most “GLP-1 cookbooks” hand you 150 recipes. That is exactly the wrong tool for your first weeks. When you can barely finish half a yogurt, you do not need another chicken traybake. You need to know **which foods sit well when you feel queasy, how to get protein without eating a whole meal, and a simple plan you can follow on autopilot** while your body adjusts.

That is all this book is. It is deliberately short. You should be able to read the part you need in ten minutes and start using it today.

How this guide is organized

- 1. Why eating feels different now** — the two things that matter most in month one.
- 2. Eating through the side effects** — foods indexed by symptom (nausea, reflux, constipation, “everything tastes wrong,” and more).
- 3. The no-cook, low-volume protein playbook** — concrete foods and gram counts to reach roughly 60-100 g of protein a day without a full meal.
- 4. The 7-day small-portion menu** — a gentle rotating week you can eat by the clock.

5. **The one-page grocery list** — about 25 staples that build the whole week.
6. **Fast troubleshooting** — look up your exact problem and get an answer.

Read this much, at least

If you only read two things, read **Part 3 (protein without a meal)** and **Part 4 (the 7-day menu)**. Between them they cover the two questions that trip up almost everyone in the first month.

Part 1 • Why Eating Feels Different Now

You don't need the biochemistry. What matters for your plate is the experience: on a GLP-1 medication most people feel full much faster, stay full much longer, and notice that constant “food noise” has gone quiet. That is the point of the drug. But it has a side effect that nobody warns you about clearly: **you can forget to eat, and then eat too little of the wrong things.**

The month-one mindset: eat on purpose

Before the medication, hunger reminded you to eat. Now it often won't. So the single biggest shift is this: **you now eat on purpose, by the clock, in small amounts — not because you feel like it.** A few planned bites, several times a day, beats one “I guess I should eat something” event at 4 p.m.

- **Small and often.** Three tiny “meals” plus one or two protein sips usually go down far easier than three normal plates.
- **Protein first.** When only a few bites will fit, spend them on protein before bread, rice, or salad. More on why below.
- **Sip fluids between meals, not during.** Filling a tiny stomach with liquid while you eat leaves no room for food. Drink steadily throughout the day instead.
- **Stop at the first sign of full.** “Comfortably not-hungry” is the target. Pushing past it is what turns into nausea and that awful “stuck” feeling.

Why protein gets its own obsession

When you lose weight quickly on very little food, some of what

you lose can come from muscle, not just fat. That is the thing most people are rightly worried about — and it is why nearly every clinician and dietitian working with GLP-1 patients repeats the same two words: **protein** and **fluids**. Getting enough protein, along with staying active, is the everyday, food-level lever most people can actually pull to protect muscle while the scale moves.

What's my protein number?

A very common general rule of thumb is somewhere around **0.6-0.8 grams of protein per pound of a healthy body weight per day** — which lands many adults in the **60-100 g/day** range this book aims at. But the right number for you depends on your body, your kidneys, and your goals. **Ask your clinician or dietitian for your personal target** and treat the numbers here as a starting frame.

Hitting 60-100 g of protein is easy when you can eat three full meals. It is genuinely hard when a half-cup of food feels like Thanksgiving. That specific problem — **a real protein target meeting a tiny appetite** — is what Part 3 is built to solve.

The other quiet essential: fluids

Because you're eating and drinking less overall, dehydration sneaks up on people in the first weeks, and it makes nausea, fatigue, headaches, and constipation worse. You don't need anything fancy — water, unsweetened drinks, broths, and watery foods all count. A practical habit: keep a bottle in sight and sip through the day rather than gulping at mealtimes.