

Healthy eating with an ileostomy/colostomy and output management

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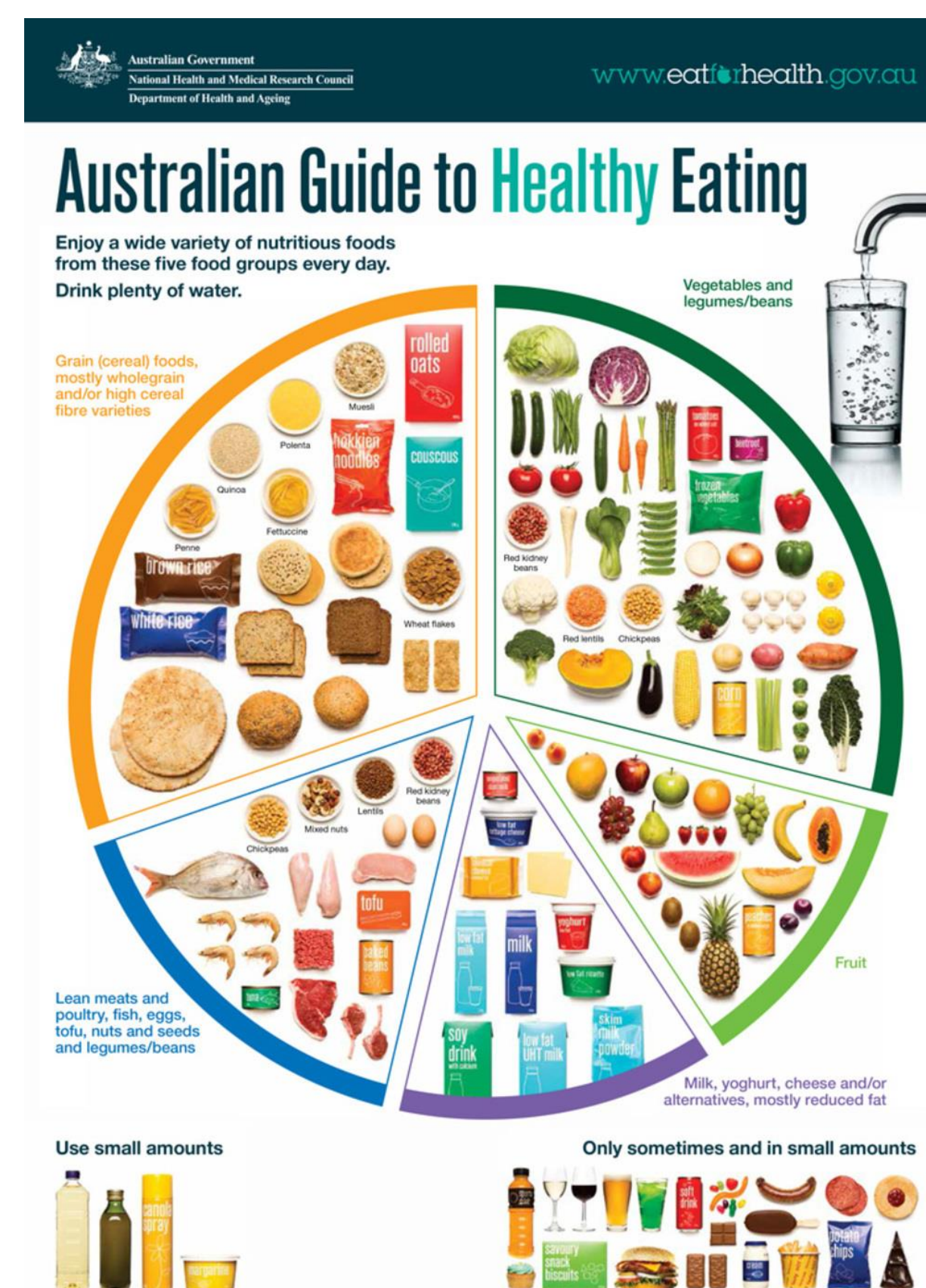
Introduction

People who have an ileostomy or colostomy are encouraged to eat a healthy diet, the same as most people.

Certain modifications need to be considered to help prevent blockages, manage hydration levels and modify output if required.

A healthy diet includes foods from five food groups: bread and cereals, vegetables, fruit, meat and dairy.

Variety is the key!



Chew your foods well to aid in digestion.

Output post surgery

The main job of the colon is to reabsorb fluid and salts back into our body to keep us hydrated.

Colostomy

After surgery, your output may be loose or more liquid for a short while. With time, your bowel will begin to absorb more fluid so that your colostomy output will thicken and become more formed.

Factors that affect output: Diet, how regular your bowels were before your surgery and how much of your large bowel was removed or bypassed during surgery.

If a large section of your colon was removed, your stoma is likely to work more often and have a liquid or toothpaste consistency. If most of the colon is intact, the output will be more formed and less frequent.

Ileostomy

After an ileostomy, the whole colon is bypassed which results in the loss of fluid. Output may be increased and a fluid consistency. This will thicken to become a thick paste (toothpaste/ porridge consistency) in the following weeks post surgery as the rest of the bowel/intestines starts to take up more fluid than it used to.

NORMAL OUTPUT ILEOSTOMY - 24 hour period is between 500mls – 1 litre.

NOTE: You lose an extra ~700ml of fluid/day with an ileostomy, more if output is high.

Managing your output through diet

WATERY OR HIGH OUTPUT

- Psyllium husk or Metamucil
- Try to have your fluids at least 15-20 minutes before and after your meals to avoid 'flushing' food through.
- Avoid foods that increase transit e.g. Caffeinated beverages, sugary drinks, artificial sweeteners, alcohol and spicy foods
- A diet too high in insoluble fibre can also increase transit e.g. reducing "roughage" (fruits/vegetables) and high fibre foods (wholegrains)

Include thickening foods

Pasta, white rice, pumpkin, white bread, mashed potatoes, marshmallows, banana, porridge/oats and smooth peanut butter, cheese

NOTE: If high output, ensure you drink plenty of fluids and replace electrolytes:

- Gastrolyte or Hydralyte – from chemist/pharmacy.
- Home made rehydration solution called 'St. Mark's solution' including salt, glucose powder, sodium bicarbonate powder
- Speak to your dietitian/doctor regarding adding salt to your diet



SIGNS OF DEHYDRATION

- Feeling thirsty/dry mouth
- Feeling faint
- Feeling tired or lethargic
- Muscle weakness/cramps
- Headaches
- Dark urine (deep yellow or amber colour), with a strong smell.

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AVOIDING BLOCKAGES

Avoid very fibrous, stringy foods for six to eight weeks after your surgery while the swelling of the bowel resolves. This is to reduce the risk of a blockage. You can then gradually reintroduce these foods back into your diet.

When reintroducing it is advisable to eat these foods in moderation, chop and chew them well.

- Mango • Rhubarb • Nuts • Figs • Mushroom • Celery • Corn • Apple skin • Peas • Coconut • Coleslaw • Bran • Pineapple • Popcorn • Dried fruits



REDUCING WIND/GAS

The delay between eating a gas forming food and gas production is 2-4 hours.

- Brussels sprouts • Peas • Green beans • Eggs • Onions • Broccoli • Green beans • Mushroom • Cabbage • Baked beans • Garlic • Cauliflower • Fizzy drinks/carbonated beverages including beer • Lactose if intolerant

- Avoid drinking through a straw, talking while eating, chewing gum, smoking or snoring as this can lead to swallowing air and gas production.
- Eat regular meals, as skipping meals is more likely to increase gas production



Managing your output through diet

FOODS THAT CAN PRODUCE ODOUR

- Cheese • Green beans • Onions • Lentils • Cabbage • Fish • Asparagus • Eggs • Garlic • Some vitamins and medications Tip: Yoghurt and parsley may help reduce odour.



FOODS THAT MAY COLOUR OUTPUT

- This is normal -
- Beetroot • Red cordial • Some medications



SUMMARY

- Chew food well and avoid stringy, fibrous foods for 6-8 weeks post-operatively.
- Ensure you drink enough fluid (at least 2 litres a day). Oral rehydration drinks can be useful.
- Have regular meals and eat a normal balanced diet.
- Separate your food and fluids at each main meal if you have a high or watery stoma output.
- Only add additional salt if advised or if you have high stoma output.
- Only avoid foods that cause unacceptable symptoms. Try to reintroduce these foods at a later stage.
- Ensure you monitor your output amount. If higher than recommended and you have tried the strategies above consult a health care professional.

Acknowledgements

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