

Dietary Information for people with a Colostomy



Practical tips and support for patient and carers

Issued by: _____

Contact details: _____ Date: _____

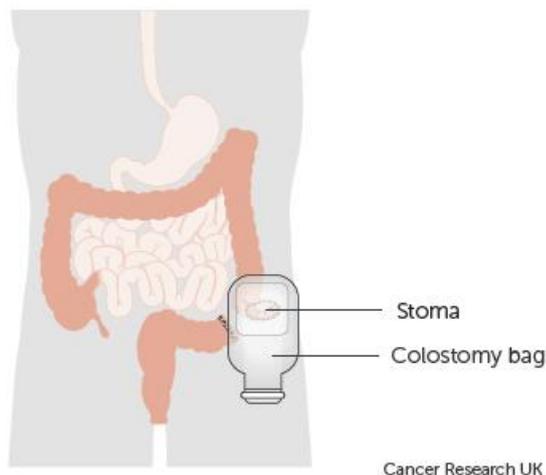
OUTSTANDING CARE

HEALTHY COMMUNITIES

AND A GREAT PLACE TO WORK

Introduction

What is a Colostomy?



A colostomy is formed when a part of the large bowel is surgically brought out of the abdominal wall, forming an opening on the surface of your skin.

Once in place, waste material will pass out of the stoma into an external pouch which will need to be changed regularly.

The formation of a colostomy has very little impact on the digestion and absorption of fluid and nutrition and most people will be able to resume a healthy diet and maintain a healthy weight once the stoma is established.

First Few Days

New stomas usually start working within 48 hours. However, this can differ from patient to patient. There may be a couple of days during which you are advised to build up from a liquid to a normal diet.

Your surgeon will suggest you start with fluids and move to a soft, moist, low fibre diet. It is a good idea to reintroduce food gradually.

- Include protein foods such as meat, fish, eggs, cheese and milk to help with wound healing
- Eat starchy carbohydrates such as white bread, low fibre cereals (Rice Krispies, cornflakes), potato (no skin), white rice/pasta, for energy and to thicken your stoma output
- If your appetite is low, try taking smaller meals and snacks in between such as a small bowl of cereal, sandwich, cheese and crackers, yogurts or milky drinks.
- Eat slowly and chew your food well to help with digestion.

If you are struggling to eat you can ask for the 'Easy to Chew' Menu on the ward or choose items on the regular menu coded as EC in Stoke Mandeville Hospital and coded with a black star at Wycombe Hospital (see the logos below).



EASY TO CHEW

Soft or moist foods that are easier to chew.



Easy to chew.

The stoma output within the first week can be expected to be watery. Therefore, it is advisable to sip fluids regularly throughout the day, aiming for approximately 1 glass every hour on the first day after surgery.

After 3-4 days

The stool you pass into your stoma bag will thicken and the bag will need to be changed less often. The aim is for a soft stool consistency.

It is important to maintain good hydration, so aim for 1.5-2 L or 8-10 glasses of fluid per day.

2-3 weeks

Your stoma output will start to settle within 2-3 weeks of a colostomy. Some people recover more quickly. You can now return to a normal diet and focus on healthy eating.

Dietary Information for people with a Colostomy

Healthy Eating with an Established Colostomy

There is no specific diet for a person with a colostomy. Healthy eating is important for your general well-being. You will be able to go back to enjoying food and have many of the foods you have eaten in the past. Try not to restrict your diet unnecessarily. However, if you are experiencing specific problems try the trouble shooting advice further on in this leaflet or contact your health professionals or stoma nurse if you are concerned.

Hydration

The best indicator of your hydration status is the colour of your urine. A light straw colour probably means you are drinking enough. Darker urine will indicate that you need to drink more fluids. Other signs of dehydration include:

- Headache or feeling light-headed from sitting to standing
- Feeling thirsty and having a dry mouth
- Cramps

If you are dehydrated, you will need to increase your fluid intake. Aim for 8-10 glasses of fluids a day. This includes tea, coffee, milk, squash, juice and water. You may need to increase this in warm weather or when exercising. **Do not** restrict your fluid intake in the hopes it will reduce your stoma output. It is vital to replace fluids lost to avoid dehydration and prevent kidney stone formation.

Low Appetite

It may take time for your appetite to return to normal after surgery. Until you can manage normal quantities of food again eat 'little and often'. Aim to eat small meals and snacks every 2-3 hours. These could be a bowl of cereal, sandwiches, yoghurts, cheese and crackers and nutritious drinks like milk, shop bought or homemade milkshakes. Aim for small portions of high energy foods.

If your appetite continues to be poor and/or you are losing weight please ask your healthcare professional for the information leaflet 'Food First: Advice for eating well if you have lost weight or are underweight'.

Nutritional Supplements and Medication

Iron tablets and beetroot/beetroot juice will alter the colour of the stools in your stoma bag. Iron tablets may also cause constipation.

There is no specific requirement for any vitamin or mineral supplements except for those you may already be taking.

Healthy Eating Advice

Everyone will tolerate food differently but as a **rule there are no diet restrictions for people with a colostomy**. If you have problems with certain foods or drinks re-try them a few months later when your bowel may have adapted and settled down. Make sure you experiment several times with a troublesome food before excluding it completely, to avoid over-restricting your diet. Perhaps try a new food, once a day, for 2-3 days before moving on to the next troublesome food.

Follow the guidance from the British Dietetic Association (BDA) on 'Healthy Eating', available online (see resources at the end of the leaflet) or ask your healthcare professional for a copy.

Foods with low and high fibre

What is fibre and why is it important?

Fibre is found in plant-based foods and it increases the natural action of the gut bacteria, helping to form stools and regulate bowel opening.

There are two main kinds of fibre: **soluble** and **insoluble**.

Aim to include both types of fibre in your diet and drink plenty of fluids alongside fibrous foods to avoid constipation.

Soluble - as the name suggests dissolves in water and can help your stool soften. This can help with constipation and also help thicken your stool if your output is loose. Soluble fibre helps to lower cholesterol and regulates sugar in the blood. Soluble fibre is found in foods such as the fleshy part of **fruits and vegetables, oats, beans, peas, lentils and pulses**.

Insoluble - adds bulk, but doesn't dissolve in water, so will not break down as it passes through your digestive system. This type of fibre acts like a sponge in the digestive system and soaks up the moisture to form soft stools which are easily passed. Insoluble fibre also helps prevent constipation and can help reduce 'pancaking'.

Insoluble fibre is found in **wholegrain and wholemeal flour, breads, pasta, rice, cereals, fruit and vegetable skins**.

For a detailed list of foods that contain high amounts of insoluble fibre and soluble fibre please see the leaflet 'Low irritant, high fibre'.

Troubleshooting

Constipation

If you notice your stoma output is firm or 'pellet like' and you have not passed a motion for 48 hours, this could indicate you are constipated.

The link below to the leaflet 'Low irritant, High fibre' is a good place to start if you would like to include more fibre in your diet. It is important to drink with fibrous foods to avoid constipation.

Once your stoma is well established you may require a diet higher in fibre and or may need a mild laxative to keep the colostomy functioning. Please discuss this with your stoma nurse. Medication can also be a cause of constipation and you may wish to discuss with your pharmacist if this applies to you to see if an alternative can be found.

If your stoma stops working for 2-3 days or you have abdominal pain contact your GP or stoma nurse.

SEEK MEDICAL ADVICE IF YOU ARE CONCERNED – see list of contacts in the further information section at the end of this booklet.

Diarrhoea

Diarrhoea can be caused by alcohol, stress, caffeine, laxatives and foods that are high in FODMAPs (Fermentable Oligo-, Di-, Monosaccharides and Polyols).

You can try to:

- Eat little and often. Drink plenty of fluids to prevent dehydration. Aim for 10-12 glasses of fluid per day - remember milk, milkshakes, fruit juice, soups, custard and jelly all count, as well as water. Limit alcohol, strong tea and coffee.
- Sometimes diarrhoea can cause temporary lactose intolerance. You may find it helpful to change to calcium-fortified soya, oat or nut milk or low lactose milk until diarrhoea is resolved.
- It may help to cut down your fibre intake by replacing wholemeal bread and cereals with white varieties; avoid fruit and vegetables with skins, pips and seeds while you have diarrhoea and build the fibre back up slowly into your diet once your symptoms have improved.

Alcohol

Excessive amounts of alcohol may contribute to loose stools. Moderate alcohol intake of up to 14 units/week or less is recommended for both men and women with at least two alcohol free days per week. One unit is equivalent to ½ a pint of beer, 25ml of spirits or a small glass of sherry or wine.

Wind

Wind or gas from the bowel is normal and part of the digestive process but you may find it more noticeable with a stoma. Some people naturally produce more wind than others.

These changes may help:

- Avoid fizzy drinks or allow them to go flat before drinking

- Try peppermint tea
- Reduce foods containing onions, garlic, cabbage, cauliflower, broccoli, Brussel sprouts, spicy foods and beer.
- Reduce foods that are high in insoluble fibre such as muesli, All Bran, lentils and pulses.
- Avoid talking while eating
- Avoid chewing gum
- Eat meals slowly, chew your food well and try not to swallow too much air
- Try to drink fluids before and after your meals

Unpleasant Smells

These can be caused by an ill-fitting stoma bag or certain foods such as eggs, fish, beans, peas, lentils, cabbage, onions, broccoli, Brussels sprouts, garlic, cauliflower and spicy foods. Ensure that stoma bags are stuck on correctly and always maintain good hygiene practice when changing bag.

Speak to your stoma nurse about sprays and drops to mask unpleasant smells.

Pancaking

This is a term used to describe a stool from your stoma that accumulates at the top of your stoma bag instead of dropping down into the bag. This can be a result of your diet and also arise if there is not enough air in the bag causing the sides to stick together. Consider the information in the other sections on healthy diet and hydration. In particular you may need to increase fibre and fluids.

You may find covering the filter which prevents gas escaping from the bag or lubricating the inside of the stoma bag with baby oil or a special gel may help. You can seek advice from your stoma nurse.

If you feel that your stoma is well established but that symptoms persist, please contact your GP or stoma nurse.

References

Source: <https://commons.wikimedia.org>, Author Cancer Research UK

Further Information

Stoke Mandeville Hospital Stoma Nurses - 01296 315121

Wycombe Hospital Stoma Nurses - 01494 426235

Securicare Community Nurses - 07970 090222

Community Dietitians - 01494 734825

Online resources	
NHS Choices	Colostomy https://www.nhs.uk/conditions/colostomy/ Healthy Eating https://www.nhs.uk/live-well/eat-well/ Fibre https://www.nhs.uk/live-well/eat-well/how-to-get-more-fibre-into-your-diet/?tabname=food-and-diet
British Dietetic Association	Fibre https://www.bda.uk.com/resource/fibre.html Hydration https://www.bda.uk.com/resource/fluid-water-drinks.html Healthy Eating https://www.bda.uk.com/resource/healthy-eating.html
Colostomy UK	http://www.colostomyuk.org/wp-content/uploads/2019/12/Healthy-Eating-2019.pdf 24 hour free helpline: 0800 328 4257
Low Irritant/High Fibre	https://www.royalsurrey.nhs.uk/download.cfm?doc=docm93jjm4n2923.pdf&ver=5704

www.buckshealthcare.nhs.uk

Follow us on Twitter @buckshealthcare

Please remember that this leaflet is intended as general information only. We aim to make the information as up to date and accurate as possible, but please note that it is subject to change. Please therefore always check specific advice on any concerns you may have with your doctor.

How can I help reduce healthcare associated infections?

Infection prevention & control is important to the well-being of our patients and for that reason we have infection prevention & control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. Please follow our infection prevention and control guidelines when visiting our healthcare sites. Further information is available on our website.

Patient Advice Sheet

If you would like a copy of this information on audiotape, in large print or translated, please call the Patient Advice Liaison Service on 01296 831120 or email bht.pals@nhs.net