

Nutritional advice for people with a new ileostomy

Information for patients, relatives and carers

Introduction

This leaflet advises you about what to eat after formation of a new ileostomy. We hope it will answer some of the questions that you or those who care for you may have at this time. This leaflet is not meant to replace the discussion between you and your medical team but helps you to understand more about what is discussed. For information about your ileostomy itself, please refer to the Coloplast pre-operative practice pack and the Coloplast booklet '*Things I need to know after my ileostomy*' provided by your stoma care nurse. Please ask for copies of these if you don't already have them.

Your ileostomy and bowel function

The small bowel, or small intestine, is where most nutrients are digested and absorbed. The large bowel (colon) acts as an absorption site for water, salt and sodium, transportation and storage.

After ileostomy formation you will notice changes in your bowel motions because digested food will not be passing through the large bowel. This causes a decrease in the absorption of water and electrolytes, such as sodium and salt.

Although your bowel will slowly adapt to the alteration, your ileostomy output will always be watery/sloppy. This is normal.

Eating after surgery

Following your surgery, your ileostomy may take a couple of days to start working. This does not mean that anything is wrong. It simply means that the operation and medication you've had will be affecting your bowel function, making it less active.

Six to eight weeks after surgery it is important to begin with a **low fibre diet** and gradually reintroduce higher fibre food to match your level of tolerance. It is important to eat well to help with healing. In the long-term, the goal is a healthy, balanced diet which includes foods from all the food groups. Some foods that disagree with one person may be fine for another.

Foods to choose and foods to avoid

Food group	Choose from these low fibre foods	Avoid these high fibre foods
Fruit	<ul style="list-style-type: none"> • bananas • peeled apples/pears • tinned/stewed fruit • melon (without pips) 	<ul style="list-style-type: none"> • berry fruits e.g. blackberries and strawberries • fruits with piths, e.g. oranges • dried fruit
Vegetables	<ul style="list-style-type: none"> • tinned tomatoes • vegetables which are well-cooked or pureed, e.g. carrots, parsnips and squash 	<ul style="list-style-type: none"> • salad vegetables • all unpeeled/raw vegetables • peas, beans, lentils, pulses, sweetcorn • stringy vegetables, e.g. runner beans and celery
Potatoes	<ul style="list-style-type: none"> • peeled and boiled potatoes • jacket potato without its skin 	<ul style="list-style-type: none"> • jacket/new potatoes with skin
Cereals	<ul style="list-style-type: none"> • white flour/bread • sago/tapioca 	<ul style="list-style-type: none"> • wholemeal/brown flour • wholemeal/granary/brown bread • pearl barley
Biscuits/cakes	<ul style="list-style-type: none"> • cream crackers, rich tea biscuits, custard creams, sweet/plain biscuits 	<ul style="list-style-type: none"> • Ryvita™, digestive biscuits, fruit cake, oat cakes
Breakfast cereals	<ul style="list-style-type: none"> • low fibre breakfast cereals, e.g. Cornflakes™, Rice Crispies™, Frosties™, Sugar Puffs™ • oats (27g) 	<ul style="list-style-type: none"> • high fibre breakfast cereals, e.g. muesli, bran, Weetabix™, Shredded Wheat®
Pasta/rice	<ul style="list-style-type: none"> • white rice/pasta 	<ul style="list-style-type: none"> • wholemeal/brown rice/pasta

Important tips after formation of a new ileostomy:

- eat regularly – do not leave long breaks in between meals as this will increase the ileostomy output after eating
- eat slowly – take small mouthfuls and chew your food well as this helps digestion and absorption
- chewing foods well can reduce the risk of your ileostomy becoming blocked
- drinking 3 - 4 pints or (1.5 – 2litres) of fluid per day is enough for most people
- you may need to drink more in hot weather or if exercising. If you have increased output from your ileostomy, you should take extra salt rather than water. If you feel dehydrated, consult your GP, stoma care nurse or dietitian

- do not drink immediately before or during a meal - instead drink half an hour or so before or after food (if you have a poor appetite then avoid soup before meals as this may fill you up too much)
- avoid pips, piths and skins of fruits and vegetables, as well as celery, sweetcorn, nuts, peas and coconut, as these are more likely to block your ileostomy
- avoid eating large amounts of fibre at any one time to avoid producing large volumes of poo
- avoid those foods known to cause you problems, since everyone tolerates foods differently

If you are underweight, losing weight and/or have a poor appetite see page 7.

Alcohol

You can drink alcohol in moderate amounts. Too much alcohol is not good for your health and can increase your urine and the output from your ileostomy.

Common problems with ileostomies

Some common problems with ileostomies have been linked to certain foods (see table below). This **does not** mean that you cannot have these foods. Try all foods and avoid those which repeatedly cause problems for you.

Problem	Potential dietary causes
Odour	<ul style="list-style-type: none"> • onions • brussel sprouts • cabbage • cauliflower • broccoli • beans • fish • eggs • spices • asparagus and other green vegetables • strong cheeses
Wind	<ul style="list-style-type: none"> • onions and garlic • brassica vegetables (brussel sprouts and cabbage) • baked beans, lentils and peas • fizzy drinks • beer and lager
Loose stools	<ul style="list-style-type: none"> • spicy foods • high fibre intake • alcohol • fried foods • fruit juices • excessive fluid intake • excessive fruit/fruit juice intake

Thickening your ileostomy output

If you find that your ileostomy output remains loose/liquidy, introducing the following foods may help to thicken it:

- low fibre starchy foods (e.g. white rice/pasta/noodles/ bread/chapattis/tapioca)
- marshmallows/jelly babies and other products containing gelatine
- peanut butter (smooth not crunchy)
- tapioca
- potatoes (no skins)

If you notice the volume of your ileostomy output has increased and you are emptying or changing your stoma bag more often, you may be at risk of dehydration.

Dehydration

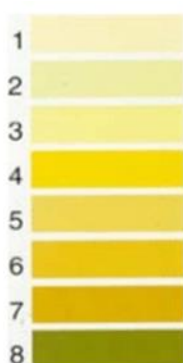
The average daily output for those with an ileostomy is 800 to 1,000 ml (approximately 4 to 5 half-full stoma bags). You should drink at least 1.5 litres of fluid to combat water loss (unless on fluid restriction).

Signs and symptoms of dehydration:

- dry mouth with an unquenchable thirst
- pins and needles in your fingers or toes
- blurred vision
- dizzy spells
- fainting
- listlessness (feeling tired)
- reduced volume of urine or absence of urine

Urine chart

You should aim for light coloured urine (numbers 1-3). If you notice your urine getting darker than this then try to drink more fluids. See 'Choosing the right fluid' section below.



Check your urine
against this chart

Avoiding dehydration

Every day salt is lost through the fluids produced by your ileostomy. The salt needs to be replaced to maintain a healthy body. If it is not replaced then you may be more at risk of dehydration, especially in **hot weather** or when **exercising**.

We recommend that you eat a small amount of salt every day. You can increase your salt intake slightly by:

- adding salt to your food whilst cooking
- adding salt to your food at the table
- choosing salt-rich foods such as crisps, Marmite™, cheese, pretzels, kippers, beef extracts such as Bovril™ and Oxo™

If you suffer from high blood pressure, heart failure or kidney disease, please speak with your stoma nurse or dietitian.

Choosing the right fluid

Choosing the right fluid is also an important part of staying hydrated and your dietitian/stoma nurse will discuss this with you. Fluids such as water, coffee, tea and juice are generally fine.

If the volume of your ileostomy is higher than usual and/or the colour of your urine is darker than usual, you may need to change the type of fluid you are drinking in order to stay well hydrated. Restrict fluids such as water, tea, coffee and juice and replace them with **isotonic fluids** which are easier for the body to absorb. Discuss with your stoma care nurse, GP or dietitian.

Use of loperamide (Imodium®)

Loperamide is a medication used to thicken the output and slow it down before it passes through the ileostomy. It comes as a 2mg capsule, a white pill or a liquid and is prescribed when, despite a good intake of food, the ileostomy output remains loose and watery and does not reach the desired thick, porridge-like consistency.

Loperamide is usually taken 15 minutes before main meals and once before bed time to reduce gut transit. Loperamide is taken with only enough water to swallow it. If you drink too much water then the pill will have no effect as it will be working with the fluid you have drunk and not with the food you are about to eat. Most people start with one tablet (2mg) two to four times a day and increase the dose as instructed (by their GP or surgeon) to reach the desired effect.

Dealing with an ileostomy blockage

Signs and symptoms of an ileostomy blockage include:

- absence of, or change in, consistency of output (very watery)
- a feeling of bloating or fullness
- loss of appetite
- nausea (feeling sick)
- abdominal (tummy) discomfort or cramping

If you have any of these symptoms then contact your stoma nurse. If you think you have a blockage then restrict food intake and only drink fluids for 24 hours. This may resolve the blockage. If the symptoms worsen or you develop new symptoms, contact your stoma nurse or attend your nearest A&E department.

If you are losing weight or you are underweight

Many people find they lose weight after surgery. If this applies to you, follow the general guidelines listed in the table on page 2.

How you can increase your calories

Milk

Milk can be fortified by adding milk powder. Mix four tablespoons of milk powder with a little milk to form a paste. Then stir in a pint of cold, full-fat milk. Keep the fortified milk in the fridge and use it as you would normal milk or water to make drinks, soups, custards, jellies and puddings.

Cream

Using cream is an easy way to add calories to soup and casseroles.

Dressings

These include mayonnaise, salad cream, vinaigrette – use freely and as often as possible.

Cheese

Cheese is versatile and can be added to many foods. Try putting cheese in sandwiches and omelettes as well as serving with meat. Melt cheese on potatoes and in pasta dishes or shepherds' pies. Have cheese and biscuits as a snack. Use cheese sauce on vegetables, pasta and potatoes.

Butter/margarine and oils

This includes olive, rapeseed and sunflower spreads. Add to your food whenever possible. Use oil as dressings on salads. Add at least a tablespoon of oil to pasta before serving. Spread butter and margarine thickly on bread. Serve vegetables with butter or margarine.

Sauces

All sauces add extra nutrition to meals. Use whenever possible and make both homemade and packet sauces using fortified milk (see above section on milk).

If you are worried about eating lots of fat please discuss your concerns with your dietitian.

Notes and questions

Please use the space below to write down any questions that you would like to ask, or to make notes.

Please do not hesitate to contact your stoma nurse or dietitian on the following numbers if you have any questions or concerns, between 09.00 and 17.00, Monday to Friday.

Your stoma nurse is:

Direct telephone number:

Your dietitian is:

Direct telephone number:

Stoma care department

Charing Cross Hospital

Fulham Palace Road, London, W6 8RF

Tel: 020 3313 0862

St Mary's Hospital

Praed Street, London, W2 1NY

Tel: 020 3312 1306

Nutrition and dietetics department

Charing Cross Hospital

Fulham Palace Road, London, W6 8RF

Tel: 020 3311 1445

Hammersmith Hospital

Du Cane Road, London, W12 0HS

Tel: 020 3313 3048

St Mary's Hospital

Praed Street, London, W2 1NY

Tel: 020 3312 6398

Other useful sources of support and information

The Ileostomy & Internal Pouch Support Group

Telephone: 028 9334 4043 or 0800 0184 724 (Freephone)

Website: www.the-ia.org.uk

Bowel Cancer UK

Telephone: 020 7940 1760

Website: www.bowelcanceruk.org.uk/

Macmillan Cancer Support

Telephone: 0808 808 0000

Website: www.macmillan.org.uk

Macmillan Cancer Information and Support Service at Charing Cross and Hammersmith hospitals

The information centre at Charing Cross Hospital and the infopod at Hammersmith Hospital provide support, practical and signposting advice to anyone affected by cancer. These drop-in services are set in friendly, non-clinical environments in which people affected by cancer can discuss private and emotional needs. The centre is located on the ground floor of Charing Cross Hospital and is open (except bank holidays):

- Monday and Friday 09.00-17.00
- Tuesday, Wednesday, Thursday 09.00-16.00

Telephone: 020 3313 0171

The infopod is located on the ground floor of the Garry Weston Centre at Hammersmith Hospital and is open (except bank holidays):

- Monday and Tuesday 09.00-17.00
- Wednesday, Thursday, Friday 09.00-16.00

Telephone: 020 3313 4248

How do I make a comment about my visit?

If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3313 0088** (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or **020 3312 7777** (St Mary's and Western Eye hospitals). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:
Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street
London W2 1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: **020 3312 1337 / 1349**

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:

imperial.communications@nhs.net