



A guide to eating if you have an Ileostomy

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What is a Ileostomy?

An Ileostomy is surgical procedure to divert the small intestine through an opening in the abdomen. This opening is also called a stoma.

Post-Surgery

After surgery it will take some time for your stoma to function normally and therefore it is wise to reintroduce diet slowly. Initially you will be given only fluids, then as these increase you will be advised to build up your dietary intake. During this time it is best to avoid very fibrous foods such as tough fruits and vegetables (including raw vegetables in salads) or high fibre cereals and breads.

Example of meal options whilst in hospital or first 4 weeks after surgery.

Breakfast	Lunch/ Dinner/Tea	Snacks
<ul style="list-style-type: none">• Porridge• Cornflakes and Rice krispies–well softened with milk or hot water• Toasted white bread–with butter or seedless jam• Scrambled eggs and plain omelettes	<ul style="list-style-type: none">• White bread sandwiches (ham/ egg/tuna)• Mashed potatoes with gravy• Boiled rice• Meats, chicken, fish– no bones, soft (can be broken with a fork) or pureed• Soup root vegetables–small portion, well cooked, soft, mashed or pureed (no skin, pips, seeds and stalks)• Jacket potato without skin	<ul style="list-style-type: none">• Rice pudding• Smooth and creamy yogurt• Custard• Mousse• Jelly• Ice cream• Stewed or tinned fruit• Glass of milk, milky drinks, fruit juice

Foods that should be limited

- Crackers, hard biscuits, pastry
- Wholemeal or wholegrain products (including bran based breakfast cereals)
- Dry/tough/hard meats
- Cheese and fried foods
- Beans, pulses, seeds and nuts
- Raw fruit and vegetables
- Highly spicy and peppery food

Eating at home

Note: Although you can eat a normal diet, you should be aware that certain foods may cause problems.

Four to six weeks after surgery you should start to build up intake of your diet. Some foods may affect your stoma function so a certain amount of experimentation will be needed. In general however, most people can eat most foods so try to resume your normal diet wherever possible to establish a regular pattern. The best way to ensure we get enough of the nutrients we need is to have regular meals and include foods from the four main food groups.

Bread, rice cereals and potatoes

You should have these as the main part of your meal. In addition to energy, these foods provide us with vitamins, minerals, and fibre. Avoid heavily seeded breads and cereals.

Fruit and vegetables

Try to eat some fruit and vegetables at every meal or have them as snacks between meals. Fruits and vegetables provide us with a variety of essential vitamins, minerals, and fibre. Avoid pips and seeds.

Meat and alternatives

Meat, fish, eggs and meat alternatives such as beans and lentils provide us with protein, vitamins, and minerals– such as iron. These should be eaten at least twice per day. Bean and lentils can cause wind, therefore ensure that you have a variety of foods.

Dairy products

Dairy products such as milk, yoghurts, and cheese are rich in calcium and are vital to keep our bones strong. We should eat 2-3 portions of these foods per day (1 portion = 1/3 pint of milk, pot of yoghurt or 50g cheese).

Medications

If you are prescribed tablets by your doctor you may see them come out with your bowel content. If this happens you need to inform your doctor so that a different preparation can be given as some tablets are coated to dissolve lower down in the gut. This also applies to some contraceptive pills.

Changes in stoma output

The output from the stoma can change in consistency due to various things and not just from the foods you eat. For example any kind of emotional upset, stress or strain can have an adverse effect. High fibre food such as wholegrain breads and cereals, beans and other pulses, and vegetables may increase the stoma output. Cherries, plums, prunes, apricots and peaches may increase the stoma output and make it more watery. It is not necessary to avoid these fruits but to eat them in small amounts.

Constipation

Constipation is abnormal in an ileostomy and you should not take laxatives or use enemas. If your stoma is inactive for six hours or more it can be a sign of a blockage or bowel obstruction. Seek medical advice if your stoma stops working and you feel unwell with cramping pain, abdominal swelling, nausea or vomiting.

Diarrhoea

The causes of high outputs vary but can include infections, inflammation or a shortened bowel through surgery. If your stoma output is regularly over one litre in 24 hours you may become dehydrated and should contact your GP or Specialist Nurse for advice.

The symptoms of dehydration include thirst, dry mouth, loss of appetite, nausea, vomiting, general fatigue and headaches. Simple ways to replace fluids include:

- Isotonic sports drinks help to replace essential salts and sugars. Soup and Bovril are also a useful way of replacing salt losses
- Oral rehydration solutions are available from chemists and supermarkets. These can be used to replace fluid and electrolyte losses
- For periods of high stoma output avoid non-isotonic drinks such as water, coffee, tea and alcohol as these can increase fluid and salt losses

You may be given anti-diarrhoeal medication to slow down fluid losses and in some cases a rehydration solution may be necessary. You may also need to have your stoma equipment reviewed.

Wind

Call it what you will, wind consists of the gasses that are produced by the digestive process. These are responsible for all those wind noises that everyone makes at some time or another. Some people with, or without a stoma, produce a lot of wind and others do not.

The following tips may help reduce wind

- Try not to swallow a lot of air while eating. Chew your food thoroughly instead of gulping. Do not talk whilst eating
- Avoid fizzy drinks. Pour drinks into a glass and let it stand—this will help to get rid of some of the bubbles before drinking
- Foods such as cabbage, cauliflower, sprouts, peas, beans, onions, sweet-corn and beer may cause you to produce more wind

Blockages

Nuts, sweet-corn, celery, mixed peel, coconut, popcorn and stringy processed cheese, or any food swallowed whole can block the stoma. If you do have these foods, make sure you chew them very well.

Odour

With a well-fitting pouch there should be no odour except when changing the pouch. However, there are many different sprays and filters than can be used very effectively. Your stoma nurse will have more information on these products. Foods that can cause odour problems include: Fish, eggs, onions, green vegetables, cheese, baked beans and cucumber.

Undigested Foods

Always chew your food well, especially high fibre foods as this will help digestion and passage through the stoma. If foods appear to pass into the stoma bag undigested but does not cause any other problems they do not necessarily need to be avoided.

Colour

Some foods may not be digested well and will alter the colour of your stoma bag contents. These do not necessarily need to be avoided. Be aware that red foods such as beetroot and tomato juice can cause your stoma output to run red. Many people often confuse this with blood. Do not be alarmed if this happens after such foods, however, if it occurs at other times it would be advisable to seek medical advice. Medications such as iron can cause your stoma output to turn black.

Alcohol

Excessive amounts of alcohol are not good for your health. Some types, such as beer may increase ileostomy output. If you drink alcohol, take it in moderation.

Guidelines for men and woman who drink regularly are the same – no more than 14 units per week and to spread the amount of alcohol consumed over 3 days or more. Guidelines also advise to have several

alcohol-free days a week (NICE, 2020). One unit is equal to ½ pint of beer, a single pub measure of spirits, a small glass of sherry or a small glass of wine.

Stoma Output Summary

Green Zone: normal
<ul style="list-style-type: none">• Porridge/toothpaste consistency• Empty pouch between 4–6 times per day
Yellow Zone: caution
<ul style="list-style-type: none">• Watery output for over 12 hours• Consider diet: increase starchy foods such as white bread, white rice, couscous, white pasta, potatoes and root veg.• Reduce fruit and green leafy veg. including fruit juice.• Speak to your GP or stoma nurse about loperamide.• Stagger eating and drinking—fluids half hour before or after meals.• Observe the colour of your urine – should be pale yellow.
Red Zone: danger
<ul style="list-style-type: none">• Watery output for more than 24 hours• Please contact your stoma nurse for advice or GP/A&E if out of hours.• Be aware of the signs and symptoms of dehydration: Headache, dizziness, thirst, reduced urine output, dark coloured urine, cramps and tingling.• Monitor fluid intake: use rehydration solution and drink the solution over the day. Please do not drink plain water even if you feel thirsty as this will reduce your body's essential electrolytes further. Reduce intake of tea/coffee. No fizzy drinks.

Losses through the Stoma

Salt and Water

The colon's function is to absorb salt and water. As the colon is no longer being used it is important to replace the salts that are lost in the ileostomy by adding table salt during and after cooking and by eating salty snacks. Examples of salty snacks include crisps, packet soup, crackers, cereals, Marmite or Bovril, cheeses.

Most of the material that passes into the ileostomy bag is water and can be made up by drinking 1–2 litres of fluid per day. Although fluid intake is important, it is advisable to avoid drinking fluids at mealtimes as this can speed up the movement of food along the gut.

Magnesium

Magnesium is lost through the material passing into the ileostomy bag. Loss of magnesium in large amounts can lead to the following symptoms:

- Tiredness
- Tingling
- Spasms of the hands

If you have these symptoms then you should have a test to measure the level of magnesium in your blood. Magnesium tablets may be prescribed if your levels are low.

Foods high in magnesium:

- Bread and cereal products
- Vegetables and potatoes
- Milk and milk products
- Meat and meat products

Vitamin B12

Vitamin B12 is an essential vitamin for the formation of blood cells and nerve fibres. It is only absorbed in the end part of the small intestines.

Depending on the location of the ileum where the ileostomy was made it may be necessary for you to have Vitamin B12 injections approximately every 3 months. You can discuss this further with your doctor or dietitian.

Ways To Replace Fluids

- Avoid non-isotonic drinks such as water, squash and tea as these can increase fluid and salt losses
- Isotonic drinks such as Lucozade or Isotar are better absorbed and they replace the essential salts and sugars
- Soup and Bovril are also an useful way of replacing salt losses
- Dioralyte is a commercial oral rehydration solution that can be used to replace fluid and electrolyte losses

You can make your own rehydration solution, which will replace both fluid and salt losses.

The recipe for oral rehydration solution is as follows:

- 4 heaped teaspoons of sugar
- 1/2 teaspoon of salt
- 3/4 pint water
- 1/4 pint of fruit juice or squash (adjust to taste)

Loperamide is useful for treating diarrhoea and should be taken 30 mins before meals. Discuss with your doctor if needed.

Additional Resources

Find us on Twitter **@uhbcolorectal**

Ileostomy association: **www.iasupport.org**

IA is a network of local groups offering support to its memberships, their families and carers. More information and contact details can be found on their website.

NHS – Ileostomy
www.nhs.uk/conditions/ileostomy/

Contact us

Colorectal CNS:

Telephone:
0121 424 2730 (Birmingham Heartlands Hospital / Solihull Hospital)
0121 424 7429 (Good Hope Hospital)

Dietitian:

Telephone:
0121 424 2673 (Birmingham Heartlands, Solihull or Good Hope Hospitals)
0121 627 2000 (Queen Elizabeth Hospital Birmingham)

Please use the space below to write down any questions you may have and bring this with you to your next appointment.

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Dietetics and Nutrition
University Hospitals Birmingham NHS Foundation Trust
