

# Dietary advice following your ileostomy

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## What is an ileostomy?

The creation of an ostomy is a surgical procedure performed when a person has lost function of the bladder or the bowel and waste must be removed from the body through another route. A surgeon creates an opening in the skin and then brings a portion of the intestine to the surface, creating a stoma. The stoma allows stool or urine to be diverted outside of the body.

In the case of an ileostomy, a section of the small intestine called the ileum is brought to the surface, and a stoma is formed from that part of the intestine.

There are basically two types:

- An end ileostomy has one stoma (opening) and is usually round
- A loop ileostomy has two openings (proximal limb and distal limb) and is often oval

A stoma looks like a red bud on the skin. Your stoma will be swollen right after surgery but it will shrink down to its final size about 6 weeks 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.

## What happens during healthy digestion?

During healthy digestion, food is mixed with digestive juices and broken down as it moves through the digestive system. The digestive system includes the mouth, oesophagus (gullet), stomach, small bowel (ileum), large bowel (colon), rectum, and anus.

Digestion begins with chewing and swallowing food. It passes into the stomach where it is mixed with digestive acids that aid help food being broken down. The stomach contents travel into the small bowel where nutrients are absorbed. Waste products are pushed into the large bowel (the colon), water is removed to form a stool which leaves the body via the rectum then anus.

Now that you have an ileostomy, your body absorbs nutrients differently. After nutrients from your food have been absorbed in the small bowel, the waste products are passed out through your ileostomy into your 'stoma bag'. The digested food does not go through your large bowel so your stools may be looser than before.

## Why am I producing so much fluid through my stoma?

The large bowels job is to remove excess water. When you have an ileostomy, your stool will therefore be very wet because it won't have had excess water removed. Because your body won't absorb this excess water through your large bowel, it is vital that you drink plenty of fluids.

## How should my stoma output look?

It can take time for your stoma to function and when it starts, there may be a high fluid output at first. Gradually your bowel should adapt and your fluid loss should reduce – monitor this progress and report any concerns to your stoma nurse who will provide personalised advice. The consistency is normally similar to porridge, although this may change throughout the day depending on how much food you have taken. Everyone's output is different so it is important to know what is 'normal' for you.

## Healthy eating with an ileostomy

Healthy eating is important for us all and you should continue to follow a balanced diet for good health. It is important to begin with a low fibre diet and gradually reintroduce higher fibre food to match your level of tolerance. Everyone's tolerance to different foods varies, so monitor your reactions to foods to understand your tolerance. Remember it is important to eat well to help with healing and recovery.

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.

Follow the advice below to help you enjoy the foods you eat.

- Eat at regular times, avoid long gaps between meals
- Enjoy your meals in a relaxed atmosphere
- Sit down, preferably at a table
- If you wear dentures, make sure they fit properly
- To help digestion and prevent wind (flatulence):
  - chew food thoroughly
  - drink after you have eaten, not with your food

## Ileostomy and blockages

Your ileostomy may occasionally become blocked with undigested food. Some people can experience this in the first 6-8 weeks following stoma formation. The best way to avoid blockages is to chew your food well, take time to eat slowly and drink plenty of fluid after you have eaten. Keeping a diary of the food you eat and any symptoms you experience can help you to identify any foods that cause you problems so you can avoid them if/as needed.

The list below contains foods that more commonly cause blockages.

- Sweetcorn and peas
- Beans and lentils
- Orange/grapefruit pith
- Mushrooms
- Pineapple (fresh or canned)
- Beansprouts
- Celery
- Tomato skins and pips
- Fruit peel (peel fruit initially and introduce as tolerated)
- Raw or desiccated coconut (coconut milk is ok)
- Thick stalks of broccoli/cauliflower
- Nuts, larger seeds and popcorn

### Some foods may cause wind (flatulence)

There are some foods that may cause wind through your stoma, this is more likely with foods that caused wind from before you had an ileostomy. You will experience some wind initially, but if it persists the following tips should help.

- Chew your food well
- Try to avoid swallowing a lot of air while you eat
- Try to avoid talking while you are chewing
- Eat regularly/avoid long gaps between meals.

Eat the following foods/fluids in small quantities or avoid them completely if they continue to cause problems.

- Pulses such as lentils, peas and beans
- Brussels sprouts and cabbage
- Chewing gum
- Beer and fizzy drinks (stir these drinks then allow them to stand for about 10 minutes to reduce the fizz before drinking)

## Odours/smells

If your stoma bag is correctly applied you should not experience any smells. However, there are some foods that may increase the smell from your output, so you may want to avoid the following if they affect you. Again, remember everyone is individual.

- Onions, particularly raw
- Garlic
- Cauliflower, cabbage, sprouts
- Spicy foods
- Eggs

A few drops of vanilla essence, deodorant powders or sprays in your stoma bag may help with odour. Discuss this with your stoma nurse who can recommend where you can buy these.

## Foods that may cause your output to be loose

If you have noticed an increase in your stoma output and it has become loose, your body will lose more water and salt. This increases your risk of dehydration. If this happens, it is important to replace lost fluids by drinking water, tea and still (non-fizzy) isotonic sports drinks. Rehydration sachets are useful – ask your pharmacist for more advice. Adding salt to your meals will also help to replace any lost salts.

To avoid diarrhea:

- Have no more than five portions of fruit and vegetables a day
- Have no more than 150mls of fruit juice a day
- Limit your alcohol intake (a guide of 1-2 units/day)
- Limit your caffeine intake – have no more than three to four cups of tea/coffee per day
- Limit your intake of sweeteners such as those found in diet fizzy drinks, no added sugar squash, sugar free sweets/chewing gum (e.g. acesulfame K, aspartame, saccharin, sorbitol, sucralose, stevia and xylitol)
- Reduce high-fibre foods such as wholegrain foods like cereals or bread

If you think the high output is due to an illness, stomach upset or food poisoning, or if it continues for more than 24 hours contact your doctor, stoma care nurse or local chemotherapy unit (if applicable).

## **Foods that may help to thicken your output**

If you think the increase in your output is due to a change in your food/fluids or daily routine, the following foods may help:

- Under-ripe bananas
- White rice, pasta, noodles and bread
- Low-fibre breakfast cereal such as cornflakes and Rice Krispies
- Porridge
- Foods that contain gelatin, for example marshmallows or jelly babies

## **Poor appetite**

If you are struggling with eating or have lost weight, a few simple changes to your meals and snacks can make a difference.

- Eat small, frequent meals with snacks in between
- Take drinks after your meals, not before to avoid feeling full
- Use full fat milk. Try to use a pint of full fat milk every day in cereals, drinks, puddings etc.

You can make this more nourishing by mixing one pint with 2-3 tablespoons of dried skimmed milk powder. Your dietitian can explain this further to you if you wish.

- Try full fat, or thick and creamy yoghurts – avoid diet/low fat varieties
- Add margarine or butter to mashed potatoes, and generously spread it on bread/crackers/scones/pancakes
- Mix grated cheese or cream into soups, scrambled eggs and sauces
- Use mayonnaise, salad cream and dressings generously

If you continue to have problems with eating please contact your stoma nurse, district nurse, practice nurse, GP or dietitian.

## Suggested meal plan 1

This meal plan is for guidance during the **first few weeks** after having your ileostomy.

### Breakfast

- Breakfast cereal such as cornflakes or Rice Krispies with milk
- White bread/toast with spread, seedless jam or seedless marmalade

### Lunch

- White bread sandwich/bread roll with cold meat/cheese/eggs/tuna
- Baked potato (do not eat the skin) with tuna and/or cheese
- Omelette (plain or cheese) and white bread
- Scrambled/poached egg on white toast

### Evening meal

- Meat, chicken or fish – these could be in any form including cold sliced meats, casseroles, stews or cooked in a sauce, minced or convenience foods such as sausages, burgers, fishcakes or fish fingers
- Vegetarian dishes made with eggs or cheese – an omelette, scrambled, poached or boiled, macaroni cheese, grated cheese with baked potato

Include some starchy foods such as potatoes (boiled, mashed, baked, roast, chips, croquettes) but do not eat the potato skin (as high in fibre) boiled white rice or white pasta.

### Puddings

- Milk pudding such as rice pudding, semolina or custard
- Ice-cream or yogurts
- Mousse or jelly
- Plain sponge with custard or cream

### Snacks

- Crackers and cheese
- Crisps, scones, biscuits, pancakes, yogurts
- Milky drinks, for example Horlicks or hot chocolate
- Sponge cake

Once your output is established, you can gradually increase the amount of fibre in your diet to your tolerance point.

Meal plan 2 offers suggestions on how to do this.

## Suggested meal plan 2

### Breakfast

- 150mls of fruit juice or a piece of fruit
- Breakfast cereal with milk
- Bread/toast (white or whole meal bread) with spread, jam or marmalade

### Lunch

- Sandwich/bread roll with cold meat/cheese/eggs/tuna
- Baked potato with tuna and/or cheese
- Omelette and bread
- Scrambled/poached egg on toast
- Spaghetti on toast

### Evening meal

- Meat, chicken or fish – these could be in any form including cold sliced meats, casseroles, stews or cooked in a sauce, minced or convenience foods such as sausages, burgers, fishcakes or fish fingers
- Vegetarian dishes made with eggs or cheese – an omelette, scrambled, poached or boiled, macaroni cheese, grated cheese with a baked potato

Always include vegetables such as carrots, turnip, peppers, parsnips, butternut squash or salad. It is always advised to add 'new' foods one at a time so that you can identify a potential trigger food but this may not be needed either. It is different for everyone.

Include some starchy foods such as potatoes (boiled, mashed, baked, roast, chips, croquettes), boiled rice or pasta.

### Puddings

- Milk pudding such as rice pudding, semolina or custard
- Ice-cream or yoghurts
- Mousse, canned fruit or jelly
- Plain sponge, apple crumble, apple pie with custard or cream

### Snacks

- Crackers and cheese
- Crisps, scones, biscuits, pancakes and yoghurts
- Milky drinks, for example Horlicks or hot chocolate
- Sponge cake

## Further information

If you have any queries, please do not hesitate to contact the dietetic team.

Nutrition and Dietetic Department  
North Devon District Hospital  
Barnstable  
Telephone: 01271 322306 (Monday – Friday, 8am – 4pm)  
Email: [rduh.dietetics-northern@nhs.net](mailto:rduh.dietetics-northern@nhs.net)

If you have any stoma specific queries, please contact your stoma nurse.

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## PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email [rduh.pals-northern@nhs.net](mailto:rduh.pals-northern@nhs.net). You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

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