

# Healthy Eating

Nutritional guidelines  
for people who have  
a colostomy

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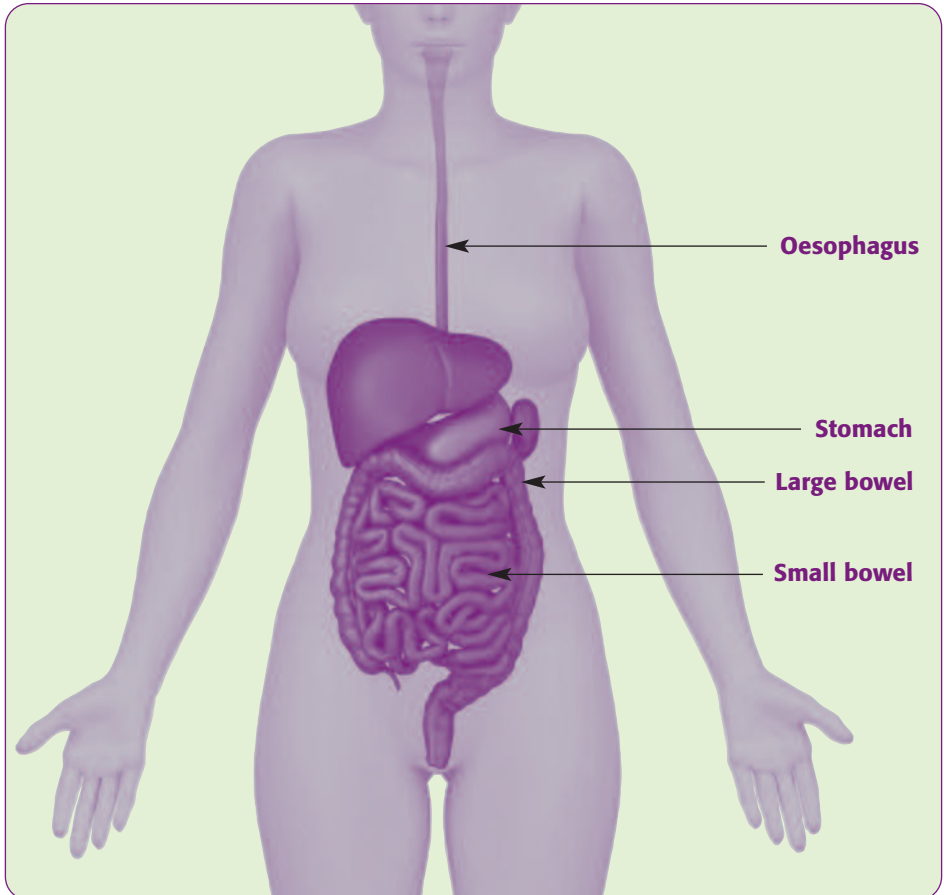
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## What happens to food after we've eaten it?

Each mouthful of food takes about six seconds to reach the stomach, where it can stay for varying lengths of time from a few minutes to a few hours. Once the food has been thoroughly mixed with gastric juices and churned by the stomach it is squirted in small amounts into the small bowel. This is a long coiled tube about six metres in length and many chemicals and enzymes are added to digest the food as it passes along it. By the time the food reaches the end of the small bowel (the ileum) it has been almost entirely digested and what remains is largely waste matter, salt and water.

The waste matter then continues its journey into the large bowel (the colon) which measures around one and a half metres. In the colon billions of bacteria work to ferment the residue of food. The colon also has an important role in absorbing salt and water to produce a firmer, more formed output.



As food has been almost completely digested by the time it reaches the colon, having a colostomy does not mean you will have to change what you eat. It is not necessary to follow a special diet (unless you have been advised to do so by your doctor for another specific medical condition).

### After the operation

In the majority of cases, people with stomas can return to their usual eating and drinking habits very quickly after the operation. The introduction of solid food helps the gut to begin to work as normal and allows the stool to thicken and become less watery. It is important to eat as well as possible as soon as your surgeon allows, as this will help to establish a normal stoma output.

In many hospitals, the reintroduction of food after your operation will be as follows:

- **Stage one:** Clear fluids – black tea/coffee, jelly, clear soup, water, cordial.
- **Stage two:** Free fluids – any liquids including nutritional supplements and ice cream.
- **Stage three:** Light diet – this is very subjective but would usually include soft, moist foods which are easy to digest and avoiding fried, spicy and high fibre foods.
- **Stage four:** Normal diet – no restrictions.

The time it takes to progress through these stages will depend on the hospital and your individual recovery.

In hospitals where they run an enhanced recovery programme, patients are encouraged to eat a light or soft diet as soon as possible after their stoma operation. In most cases this is appropriate as the problem in the bowel is usually downstream of the stoma and is no longer affecting digestion.

After your discharge from hospital, you should feel confident to progress to your usual diet. Many patients will be given dietary advice to avoid certain foods as they can cause watery stools or wind for example. This is very personal, however, and it is recommended that you avoid restricting your diet unless you find you have a specific problem for which you should seek individualised advice from your dietitian or specialist nurse. Trying to eat little and often is usually the best way to build up your confidence with food and your new stoma.

## What should I Eat?

Getting the balance right with your diet is as important for you as it is for the rest of the population. Following your surgery, and if you have been ill, it is even more important that you eat well to allow for a full recovery.

The eatwell plate shows the different food groups and the proportions in which you should try to include them in your diet. This 'plate' shows the overall proportions of your diet as opposed to each individual meal.

**Carbohydrate foods** such as **bread, rice, potatoes and pasta** should make up a third of your diet. They provide energy and are also good for improving the consistency of a loose stool. Many patients will be advised to eat only white bread or pasta following surgery. This is not necessary for most people and you should be able to enjoy the bread you would usually have without a problem.

**Fruit and vegetables** should make up another third of your diet.

**Protein foods** such as **meat, fish, eggs and beans** are essential for healing and maintaining strength and immune function. These should make up a smaller proportion of your diet and you should aim for two to three portions per day.

**Milk and dairy foods** are good sources of protein and calcium as well as other essential vitamins and minerals. You should include two portions of these per day. A portion of milk is a third of a pint.

If you are struggling to regain lost weight after an operation you may find that it helps to include more milk and add more cheese to your meals until your appetite is back to normal.

**Fats and sugary foods** do make up a part of everyone's diet and some fat is essential for cell function. Unless you are underweight, these foods should make up the smallest proportion of your diet. They include spread/butter on bread or toast and oil used in cooking.

## The eatwell plate

Use the eatwell plate to help you get the balance right. It shows how much of what you eat should come from each food group.



### How can I make sure I get my 5-a-day?

Many patients with stomas find getting their recommended 5-a-day difficult, due to the high fibre content of fruit and vegetables. If you have this problem, below are some tips for increasing your fruit and vegetable intake whilst avoiding undesirable side effects:

- Try peeling your fruit and vegetables to reduce the fibre content.
- Try fruit smoothies such as blended strawberry and banana with a little milk or yogurt.
- Cook your vegetables well and try steaming which helps vegetables to retain their water soluble vitamins.
- Choose fruit which is soft and ripe: nectarines, peaches, melons and mangoes, for example, are well tolerated by most people.
- Try vegetable juice for a nutritious vitamin boost.
- Root vegetables such as carrots, swedes, squash and parsnips are usually well tolerated and are delicious roasted, mashed or made into soups.
- Vegetable soups which have been blended and sieved are a low fibre option for people with stomas.

If you feel that you cannot eat as many fruit and vegetables as you need, it is worth speaking to a health care professional about taking a good quality vitamin and mineral supplement.

## Are there any foods colostomates should avoid?

We are all different. Some colostomates can eat anything, while others have found by experience it is best to avoid certain foods.

If you suspect a food causes problems, try it at least three times, separated by an interval of a couple of weeks, before eliminating it altogether. Keeping a food and symptom diary and looking for a trend can sometimes help to identify a food which may be causing a problem.

## The questions most frequently asked by colostomates are about wind, loose motions and constipation.

### Wind

Beans, peas, onions, leeks, unripe banana and potato which is cooked and then cooled (e.g. in potato salad and Shepherd's pie) contain a type of sugar and starch that can escape digestion and enter the colon where they are fermented to produce gas. It may also help to avoid foods which are high in fibre or contain unmilled grains and seeds.

Beer and fizzy drinks may also increase the amount of wind.

Artificial sweeteners taken in tea or coffee, on cereal or as sweets or mints can cause problems with wind. If you are diabetic and rely on sweeteners but suffer with wind ask to be referred to a dietitian for advice.

### Loose motions

Very spicy foods and large amounts of lager and beer can irritate the lining of the digestive system and cause frequent loose motions.

However, their effects can be reduced by eating spicy dishes in small quantities with plenty of rice, pasta or potatoes and never drinking on an empty stomach.

Pure fruit juices and some fruit and vegetables may cause diarrhoea in some people.

Artificial sweeteners can also cause loose motions (see above).

## Constipation

Eating more fibre-containing foods can help to prevent constipation.

Try to increase the amount of fibre by choosing:

- wholemeal (rather than white) bread or pasta;
- whole grain cereals e.g. Weetabix, porridge; and
- more fruit and vegetables.

It is best to make these changes gradually to avoid problems with wind.

Fibre acts by absorbing water to make the stools softer, so it is very important to drink plenty of fluids: at least six to eight cups a day.

**Don't forget that medications can also cause gastrointestinal problems. If you think this may be the case discuss an alternative with your GP.**

The consistency of your stoma output doesn't only depend on the type of food you eat. Water is absorbed from undigested food as it passes along the colon. If a large section of the colon has been removed, then your stoma is likely to work more often and the output is usually fairly liquid or of a toothpaste consistency. If most of the colon is still intact then motions will be more formed and less frequent.

**Don't assume that food is to blame for the way your stoma behaves. There may be some other reason:**

**Wind** may be due to:

- eating in a hurry;
- meals at irregular times; or
- going for long periods without food.

**Loose motions or diarrhoea** may be the result of:

- a stomach bug;
- stress or an emotional upset; or
- antibiotics.

**Constipation** may be due to:

- not drinking enough fluid;
- not getting enough exercise; or
- some medicines e.g. certain painkillers or antidepressants (check with your doctor or pharmacist).

This leaflet is intended as a general guide. If you have been advised differently by your nurse, doctor or dietitian, their individualised advice should always be followed. You are advised to seek medical advice if you experience persistent alteration in your stoma functioning or if you develop new digestive symptoms.

This booklet is intended for general information and guidance only. The Colostomy Association would like to take this opportunity to thank:

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