

Lifestyle Series

Good Eating Habits and
Good Health with an Ostomy



Hollister

Attention to Detail. Attention to Life.



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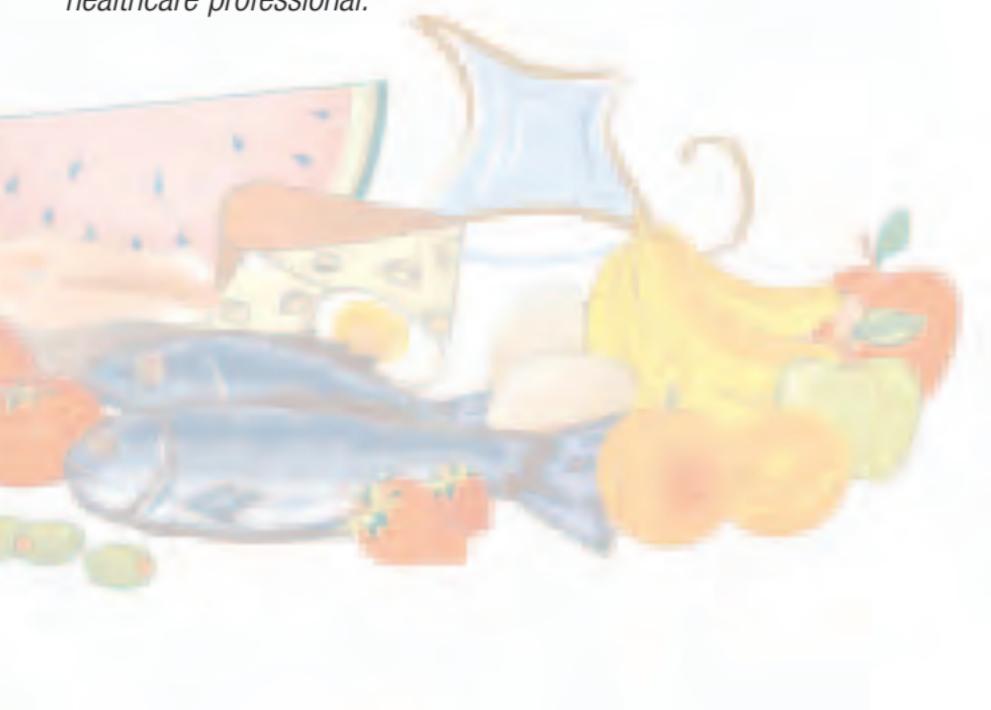
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Please note that this booklet is a supplement to and not a replacement for the advice from your healthcare professional.



Good Eating Habits and Good Health

If your stoma is newly created or one of long standing, this booklet should give you helpful information about foods that are best suited for your situation.

In the past, people with stomas were given a strict diet to follow. Thankfully, the current thinking on that subject has changed for the better. Imagine the delight some people have enjoyed when they are able to rediscover favorite foods that they had once been told were forbidden because they had a stoma.

Each person is unique, and everyone reacts differently to certain foods, regardless of whether or not they have a stoma. All in all, the golden rule is a varied diet where all things are taken in moderation. Along with exercise, this is the best way to achieve and maintain good health. **Happy eating!**

A glossary at the end of this booklet briefly explains terms used that you may not have recognized.

The Early Stages

If your surgery has been recent, it is vital to re-establish a healthy diet. This will promote optimal healing and help you regain any weight you may have lost either before or after your operation. If you are reading this booklet before your surgery



or you are having surgery in various stages, healthy eating and exercise before such operations can really help in getting the best possible recovery.

Immediately after your surgery, while you are still in the hospital, your doctor may advise a period of time with no food or water. Usually, you would have an intravenous drip for fluids.

Next, you may take in just water, then a fluid diet. This would be followed by a reintroduction of softer, more bland foods to help your system readjust to your “new plumbing.”

While you are recovering, your appetite may not be where it used to be. That is quite normal. Smaller, more frequent meals (five or six a day) and possibly supplements between your regular meals that are full of protein and energy will help you keep on the right track. Even when you go home, it may take some time to fully regain your appetite.

It is a good idea to re-introduce your favorite foods slowly. Your stoma may not react positively to the first hot and spicy dish it has to deal with! So, when possible start with plain foods. Avoid those that are stringy or fibrous. This topic is addressed later in this booklet.

At this time, some post-operative swelling may exist in the bowel. This swelling may narrow the bowel, so some foods may be difficult to digest. This happens most often in the first four to six weeks.

Perhaps you were on a special diet prior to your surgery, such as low salt for a heart condition, sugar-free for diabetes or other food restrictions. If so, it would be advisable to stick to this or speak to a qualified dietician or nutritionist to see if there are changes you need to make. Vegetarians and vegans may need greater assistance from a nutritionist after surgery, depending on the amount of intestine and location affected. If in any doubt, ask to speak to a qualified dietician or nutritionist.

Settling into a Routine

In the initial stages after formation of a colostomy or ileostomy (not urinary) stoma, the output into your pouch will frequently be very loose and fluid-like. This generally settles down with time. There are many foods that help thicken your output of stool. This is covered in more detail later in this booklet.

The Early Stages *(Cont'd.)*

Aim to drink six to eight glasses of fluid each day to make sure you are not dehydrating. If you pass regular amounts of clear or pale straw-colored urine, you most likely have enough fluid in your system. If your urine becomes more brown or dark yellow in color, it's wise to drink more fluid to keep properly hydrated.

After a while, usually in about six to eight weeks, your stoma and its output will settle to a consistency that remains fairly constant. However, you should always aim to have the right amount of fluid, salt and calorie intake.

Once you are feeling better, and you and your stoma have settled into more of a routine, you can start experimenting with your favorite foods. Generally most people can return to their usual diet with few if any limitations.

It is important to remind yourself that your body will respond differently from someone else's, and that your lifestyle is also unique. For example, meal times vary from person to person and may be affected by social circumstances. That is the same for people without stomas; not everyone's system agrees with things the same way.

So start to enjoy yourself again with your diet, and don't forget – everything in moderation!



The Food Pyramid Basics

The United States Department of Agriculture, or USDA, introduced an updated version of the traditional five-layer pyramid in April 2005. For more detailed information, you can log onto the website www.mypyramid.gov and even tailor a diet specific to your age and weight.

The six food groups now are:

Grains

Vegetables

Fruits

Oils

Milk Products

Meat, Fish, Nuts and Beans



Grains

Any food made from wheat, rice, oats, cornmeal, barley or any other cereal grain is a grain product. This includes breads, breakfast cereal and pasta.

These are divided into whole grains and refined grains.



Whole grains contain the entire kernel. For example, oatmeal, brown rice and whole meal flour are whole grains.

Refined grains have been milled to remove husks or fiber. These provide finer texture and include white flour, white rice, white bread and pasta.

A typical adult profile calls for three servings per day. One serving equals a slice of bread, a half cup of cooked cereal, a half cup of rice or pasta or a cup of cold cereal.

Vegetables

Any vegetable or 100% vegetable juice counts as a member of this group. Vegetables may be eaten raw or cooked, fresh, frozen, canned, dried, whole, cut up or mashed.



Vegetables are made up of five subgroups:

- *Dark green vegetables such as lettuce, kale, mesclun, spinach, cress and bok choy*
- *Orange vegetables, including squash, carrots, pumpkin, sweet potatoes*
- *Dry beans and peas: for example, kidney and lima beans, lentils, chickpeas, tofu, navy, pinto, soy and white beans*
- *Starchy vegetables, including corn, green peas, potatoes*
- *Other vegetables such as artichoke, asparagus, beets, sprouts, mushrooms, onions, tomatoes, celery, etc.*

For vegetables, one serving equals about one cup. Depending on age and sex, guidelines call for one to three cups of vegetables a day. Typically, men require more servings than women and children.

Fruits

Any fruit or 100% fruit juice counts as part of this food group.



Fruit may be fresh, canned, frozen, dried, whole, cut up or puréed. A serving of fruit equals one cup, and three or four servings per day are recommended.

Fruit juice contains more sugars than just fruit; keep this in mind if you are watching your caloric intake. Overall, fresh whole fruit is a better choice.

Some fruits can cause an increase in pouch output. This includes fruits with stones, such as mangoes, plums, apricots, etc. Bananas are known to slow down and thicken output.

Coconut flesh has been known to cause blockages in ileostomies. So if you have doubts, take a very small amount or exclude altogether.

Oils

Oils come from many different plants and fish. Examples are canola, corn, cottonseed, olive, safflower, soybean and sunflower oils.

Moderation - the key to healthy eating - is especially important with the oil group.



Fats should be kept to a minimum. There are good fats and bad fats. Some fats contain high amounts of cholesterol, which can cause heart disease. Oils from plant sources do not contain any cholesterol. Fish oils are naturally good at reducing bad fats.

Oils include both solid fats and oils. Solid fats are those that are solid at room temperature. These come mainly from animal foods with some from vegetable oils. Examples are butter, tallow, lard, margarine and shortening.

Fats that are oils remain liquid at room temperature. Those that are mainly oils include mayonnaise, and salad dressings. A number of foods with naturally occurring oils are nuts, olives, fish and avocados.

Daily servings of fats and oils often come from the cooking processes, such as pan frying. A constant diet of deep fried food can be bad for you, but for most people there is no harm if it is done infrequently.

Milk Products

One of the primary benefits of dairy products is the calcium they contain. All fluid milk products and many foods made from milk that retain their calcium content are considered part of this group. Other milk products such as cream cheese, cream and butter do not retain the calcium, and they are not considered part of the dairy group.



Besides fluid milk products, you can get the benefits of dairy through cheese, cottage cheese, yogurt, pudding made with milk, ice cream and ice milk.

If you have a lactose intolerance, there are liquid milk products available that are lactose free. Some cheeses and yogurts are lactose free as well. It's always worth reading the packaging contents label to make sure.

You might consider soy milk and other soy products as dairy alternatives, but they may not contain the full array of nutrients that dairy products have.

Recommendations for dairy vary, but about three servings per day is optimal to maintain healthy bones and provide other essential nutrients. One serving equals a cup of milk, a small container of yogurt or a piece of cheese. With this many options, it is easy to get your daily intake!

Meat, Fish, Nuts and Beans

All meat, poultry, fish, dried beans or peas, eggs, nuts and seeds are considered part of this group. Protein is one of the most important nutrients supplied by this group.



Meat and poultry choices should be low-fat.

Fish, nuts and seeds contain healthy oils, so be sure to include them in your diet frequently.

If you have an ileostomy, be cautious as there have been occasions where a blockage occurs when nuts are eaten. Some people have been known to get a small blockage after only one nut. Be slow to introduce these into your diet. If you love eating nuts, make sure you chew them very well before swallowing. Another possibility is to choose nut spreads, such as peanut butter or hazelnut spreads.

General recommendations for this food group would be five or six servings a day. A serving is approximately one egg, one tablespoon of peanut butter, a small handful of nuts or seeds, or one ounce of meat.

Frequently Asked Questions

Q. *I have a colostomy/ileostomy. Will some foods give me more gas/wind in the pouch?*

A. The answer is yes and no. Gas is normal for everyone, and some people produce more than others.

If you found that a particular food gave you gas before your operation, it more than likely will now as well. However, if you have an ileostomy, it is not necessarily the gas you make or even swallow naturally. Instead, it may be the contents of the pouch “fermenting” in the bag that causes excess gas. Many pouches these days have filters that can vent the bag and thus deodorize it. You may wish to select this option.

Another possibility is a two-piece pouch that you can “burp” when it is convenient. This is done by simply detaching the top part of the pouch and expressing the excess wind out. Be aware that burping the pouch can lead to unwanted odor.

Here is a list of common foods and beverages that have been known to increase gas. Again, these may affect some people differently.

Beans

Beer and alcohol

Broccoli

*Cabbage, cauliflower, cucumber,
brussel sprouts*

Carbonated beverages

Chewing gum

Eggs

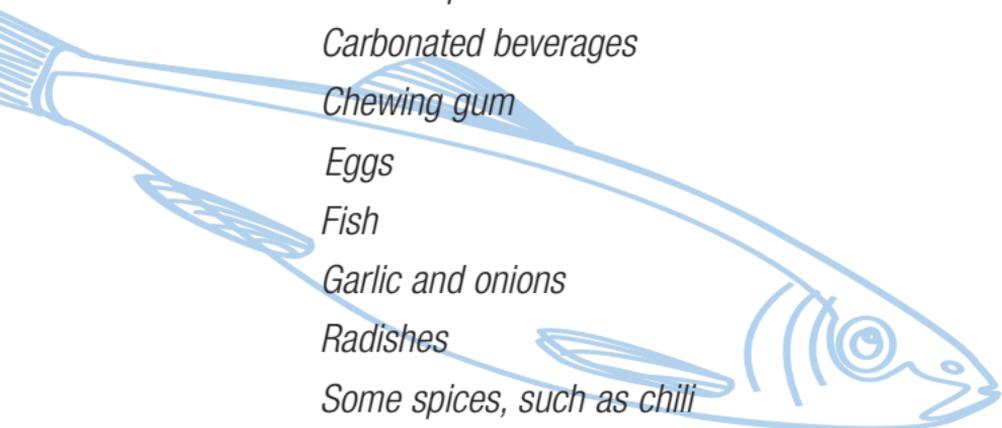
Fish

Garlic and onions

Radishes

Some spices, such as chili

Soy products



Q. *I am worried about foods giving me odor when emptying my pouch. How do I avoid this?*

A. First, you should never notice odor while your pouch is intact. If you do, check your pouch seal for unwanted leakages. There are a variety of pouch additives that destroy odors in the pouch so odor is less of a problem when emptying. You may find some foods do increase odor; again, this will depend on the individual.

Below are some foods that people frequently associate with odor.

Asparagus - can affect urine odor

Broccoli - can affect stool odor

Brussels sprouts - can affect stool odor

Cabbage - can affect stool odor

Eggs - can affect stool odor

Fish or fish oils - can affect urine and stool odor

Garlic - can affect stool odor

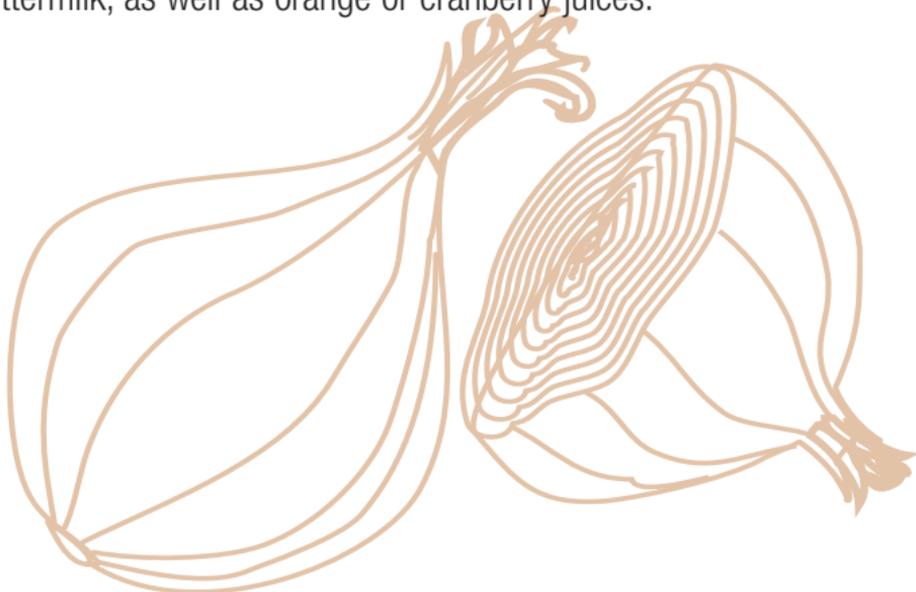
Onions - can affect stool odor

Some cheeses, especially aged varieties - can affect stool odor

Some spices - can affect stool odor

Some vitamins - can affect urine and stool odor

Foods that may help reduce odor are parsley, yogurt, and buttermilk, as well as orange or cranberry juices.



Q. *I have a colostomy/ileostomy, and I sometimes get diarrhea. How do I manage this?*

A. First, be sure that you are not sick. If your stoma is too active, that is, if you need to empty your pouch once or twice every hour, you may be losing far too much fluid. If this suddenly occurs and it lasts 24 hours or more, you should seek medical attention.

If diarrhea is infrequent, a simple change to your diet may fix or help the situation. Some foods are known to reduce stool output and others increase stool output.

Foods known to increase stoma output are fibrous foods such as stone fruits (plums, peaches, cherries, mangoes, etc.), raw fruit and vegetables, spicy foods, high fat foods, caffeine, nuts and corn.

Foods known to decrease or thicken stoma output are bananas, rice, apples and pasta. Some people go on the BRAT diet for a short period if they have diarrhea. This stands for Bananas, Rice, Apples and Tea. Some other foods to help thicken loose output are:

Applesauce

Boiled rice and pasta

Cheese

Marshmallows

Peanut butter

Potatoes

Tapioca or sago

Toast



Q. *I have a colostomy and sometimes get constipated. Are there foods that can help me?*

A. Yes. Just like a person without a stoma, constipation can be a common problem. A person with a colostomy, not ileostomy, is most likely to suffer from constipation. Increase the amount of water you drink if not on a fluid restriction diet. Foods that help naturally with constipation include:

Bran

Fresh fruits and vegetables

Some spices

Stone fruits - fresh and dried

Whole grains

Q. *Sometimes my stoma drainage is a funny color. Is this normal?*

A. It can be normal, depending on what you have been eating. Some foods and medicines can cause change in urine and stool color, but if you have doubts, contact a healthcare professional. Here is a brief list of the most common culprits:

Beets - can make urine and stool reddish purple

Food colorings - like in jellies, can color stool

Iron tablets - can make stool black

Licorice - can make stool black

Some medicines, for example, Rifampicin - can make urine reddish brown

Tomato sauces - can make stool red



Q. *I have a colostomy/ileostomy and heard that I can get blockages from certain foods. I am scared to eat some things. I have been told that this is very serious.*

A. Yes, a blockage is serious, but fortunately it is not very common.

If you have an ileostomy and it stops working from its usual routine for several hours or so, and you have any swelling or pain in the stomach, chances are you have a blockage. If this happens, seek advice from a healthcare professional.

If you have a colostomy, it might be constipation. This is of less concern but still should be monitored. There have been some foods in the past associated more frequently with blockages, but this does not necessarily mean it will always happen.

Remember to always chew your food thoroughly and have an adequate fluid intake.

Below is a list of foods most commonly associated with this problem. Not everyone with an ileostomy who eats these foods gets a blockage!

Apple peel

Citrus fruit (whole, not just juice)

Coconut

Corn

Dried fruit

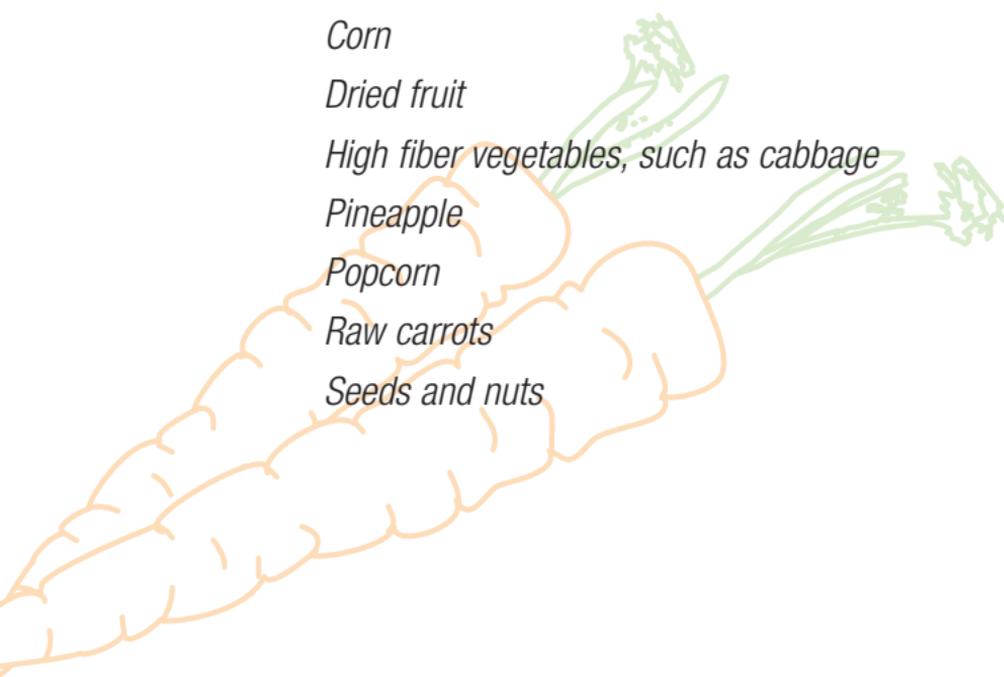
High fiber vegetables, such as cabbage

Pineapple

Popcorn

Raw carrots

Seeds and nuts



Q. *Will I always have to avoid the foods I love so much?*

A. Not necessarily. If it is the early days following surgery, you might find that some things don't agree with you. However, in time, as your body readjusts, you may be able to go back to these foods.

Trial and error can help you determine what you can and cannot eat. First, test to see if the food will work for you. Always reintroduce slowly.

General Guidelines

- Try to develop a regular eating pattern that you can follow easily and does not restrict your lifestyle or the lives of those around you.
- Take time to chew food thoroughly. Not only does slow eating help your stoma deal with what will eventually go through it, meal times will be more enjoyable and relaxing.
- Try not to obsess about what could be good and bad for you. Moderation is the key.
- Avoid eating a large meal later in the evening. This can make your pouch fill up more quickly overnight, and your sleep will be interrupted as you need to empty it.
- Avoid excessive amounts of alcohol. Not only can this give you a hangover the next day, it can make you dehydrated and, depending on the type of stoma you have, make you empty your pouch more frequently. Beer can contribute to larger amounts of gas as well.
- If you have an ileostomy or urostomy, make sure you watch your fluid intake and urine output as mentioned earlier.
- Above all, enjoy life to the fullest. Food is an essential part of life, and it is an extremely pleasurable part of living. With family or friends, it provides a social and relaxed part of everyone's life. A stoma should not limit the fun and joy of a happy mealtime and social life.

Happy eating!

Additional Information: *Please visit the Hollister website www.hollister.com*

Glossary

Colon

The large bowel (intestine).

Colostomy

A stoma opening into the large bowel.

Dehydration

The loss of too much water from the body.

Diarrhea

Loose water output from the stoma that is more so than usual.

Ileostomy

A stoma opening into the small bowel (intestine).

Intravenous

Via a vein.

Ostomy/Stoma Association

An association or club for people with stomas.

Pouch

A specialized bag used to collect bodily wastes from the stoma.

Stoma

An artificial opening into the body, in this case the digestive tract. From the Greek word meaning *mouth* or *opening*. Also known as an “ostomy.”

Stoma Care Nurse

Also known as SCN, or ET (Enterostomal Therapy nurse), STN (Stomal Therapy Nurse), or WOCN/WOC (Wound Ostomy & Continence Nurse). This is a specially trained nurse with broad expertise in the care of stoma patients.

Stone Fruits

Fruits with large pits. These include apricots, peaches, nectarines, plums, cherries, mangoes, etc.

Urostomy

A urinary stoma. Also known as urinary diversion and often (ileal) conduit.

Vegan

A person who does not eat anything derived from animal origin.

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