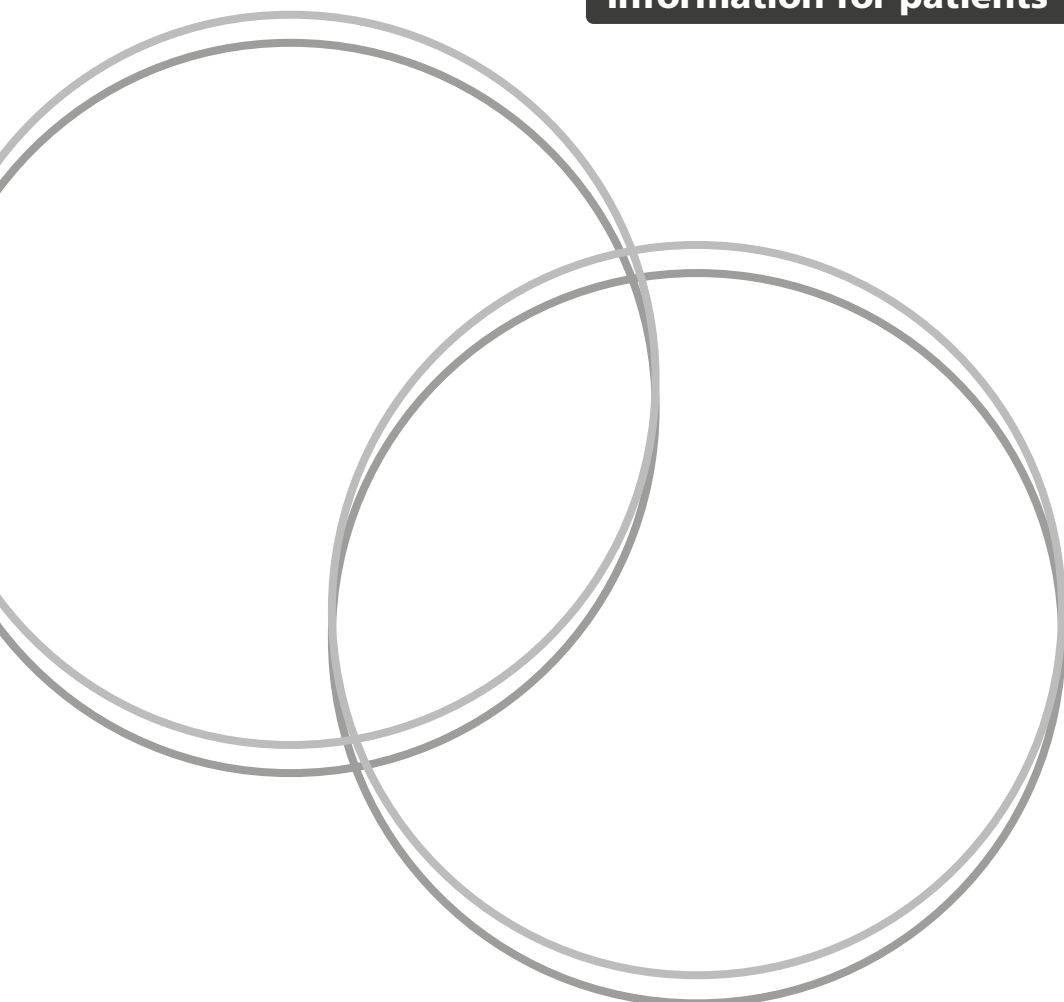




Oxford University Hospitals
NHS Foundation Trust

Help with managing high stoma output

Information for patients



This leaflet provides ways to reduce your stoma output by changing your diet. If you have any queries or concerns please ask your doctor, dietitian or stoma nurse for advice.

When your large bowel (colon) is removed, the small bowel is not as efficient at absorbing fluid and you may experience high output from your stoma. A high output from your stoma is defined as losing more than 1500ml fluid per day and puts you at greater risk of becoming dehydrated. However, over time your small bowel (ileum) is usually able to adapt to maintain your hydration.

A high stoma output may occur for any of the following reasons:

- A newly formed stoma
- If your bowel is shortened after formation of a stoma
- Your bowel is affected by disease or treatment (for example antibiotics, laxatives or medications that may cause diarrhoea as a side effect)
- Gastroenteritis (food poisoning)
- Stress

How would I recognise dehydration?

If you are dehydrated, you may experience:

- Dry, sticky mouth
- Increased thirst
- Light headedness or feeling dizzy especially when going from sitting to standing
- Tiredness
- Headache
- Dark, strong-smelling urine or passing less urine
- Muscle cramps

The colour of your urine is a good guide to see how well hydrated you are. A clear, pale yellow colour suggests good hydration whereas a more concentrated, dark yellow colour may indicate you are becoming dehydrated.

It is particularly important to monitor your hydration during warmer weather as we sweat and lose more salt and fluid from our body.

What should I do if I get dehydrated?

If you are experiencing any of the above symptoms, consider making the changes advised within this booklet. If symptoms of dehydration persist or worsen, please contact the Stoma Care department or your GP for further advice.

Guidance on how to reduce your stoma output

Your stoma output may be reduced by:

- Drinking less fluid and replacing it with an Oral Rehydration Solution
- Increasing your salt intake
- Including more foods that thicken stoma output
- Reducing the amount of fibre in your diet
- Taking medication to reduce your output

For most people, the following advice is only required temporarily and once your stoma output and hydration have improved, you should be able to gradually return to a healthy, balanced diet.

What should I drink to reduce my stoma output?

Drinking too much ordinary fluid and caffeine may increase your stoma output and make you more dehydrated.

You can reduce your stoma output by:

- Drinking 1000ml (6 cups) of an Oral Rehydration Solution per day
- Limiting the amount of ordinary fluids that you drink to 500ml (3 cups) per day. This includes water, squash, fruit juice, fizzy drinks, tea and coffee
- Replacing caffeinated beverages with decaffeinated alternatives, including herbal and fruit teas.

Oral Rehydration Solutions

These are specially formulated drinks which are high in salt to help your body absorb fluid and reduce losses from your stoma. It is recommended that you drink 1000ml of the electrolyte mix every day in addition to reducing your normal fluid intake to 500ml. These should be made up daily and are best served chilled. The recipes should be followed exactly to obtain the right solution.

St. Mark's Solution

- 20g (six level teaspoons) of glucose
- 2.5g (one heaped half teaspoon/2.5ml spoon) of bicarbonate of soda
- 3.5g (one level teaspoon) of salt (sodium chloride)
- Dissolve in 1000ml of cold tap water
- *Optional:* Small amount of squash, cordial, fresh lemon/lime to improve the taste.

Unfortunately, table sugar, glucose syrup or other sweeteners will not provide the correct type of carbohydrate. However, you can buy all the correct ingredients from any pharmacy and some supermarkets.

Isotonic Lucozade Sport

- 1000ml isotonic Lucozade Sport (non-fizzy version).
- 1 level teaspoon salt.

Lucozade Sport is often available in 500ml bottles. For these, ½ tsp of salt would be required per bottle.

Dioralyte™ (double strength)

- 10 sachets
- 1000ml of water

This option may not be suitable for everyone due to the high potassium content, so please consult your dietitian, stoma nurse or GP if considering this recipe.

If your stoma output reduces, you may be able to wean your use of Oral Rehydration Solutions whilst gradually reintroducing normal fluids. It is important to monitor your stoma output and hydration status whilst doing so.

How can I increase my salt intake?

People with stomas often require slightly more salt in their diet to make up for the loss from their stoma.

You can increase your salt intake by:

- Using salt in cooking or adding salt to your meals
- Eating high salt foods like salty crisps, pretzels, savoury biscuits, crackers, cheese, bacon, ham, smoked or tinned fish, tinned foods such as spaghetti and ravioli, yeast extracts (e.g. Marmite®) and sauces (e.g. tomato ketchup or brown sauce).

Which foods can thicken my stoma output?

The following foods could help to improve the consistency of your stoma output:

- Apple sauce
- Bananas
- Boiled white rice
- Cheese
- Marshmallows
- Mashed potatoes
- Smooth peanut butter
- Pasta
- Pretzels
- White toast

Please note that there is limited evidence showing the impact of these foods and their effect may vary from person to person. It may be helpful to try them one at a time whilst monitoring for any effect to your stoma output.

How can I reduce my fibre intake?

Fibrous foods are difficult to digest and may increase your stoma output especially if eaten in large quantities or if not properly chewed. Reducing your fibre intake may help decrease your stoma output. Use these tables to identify the fibre in your diet and lower fibre alternatives.

When your stoma output settles, you may want to re-introduce some of these foods as part of a healthy, balanced diet but start with small portions, cook them well and chew them carefully.

Bread and cereals

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
Wholemeal/granary bread Added fibre white bread Wholemeal/wholegrain flour, bran, chickpea flour, cornmeal Wholemeal, wholegrain and bran cereals such as Branflakes®, Weetbix®, All Bran®, Shredded Wheat®, Fruit 'n Fibre®, Sultana Bran®, granola, muesli Rye/wholemeal crackers Oatcakes Cereal bars Hot cross buns or teacakes or fruit scones	White bread White flour, cornflour, rice/potato flour Rice or corn-based cereals e.g. Rice Krispies®, Cornflakes®, Cocopops® Cream crackers, rice cakes, corn cakes Crispbreads without seeds and grains Croissants and brioche Plain bagels, crumpets, muffins and scones Pancakes Plain bread sticks Cheese straws Danish pastries

Potato, rice and pasta

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
<p>Wholegrain and wholemeal pasta</p> <p>Brown and wild rice</p> <p>Barley, pearl barley, spelt, bulgar wheat, farro, freekeh, amaranth</p> <p>Jacket potato skins</p>	<p>White rice</p> <p>White pasta</p> <p>Noodles e.g. egg, rice, vermicelli, udon, ramen, soba</p> <p>White couscous, millet, Tapioca, sago, semolina</p> <p>Boiled, mashed or roast white and sweet potatoes (no skin)</p> <p>Polenta</p> <p>Gnocchi</p>

Dairy foods

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
<p>Yoghurts containing nuts or cereals</p>	<p>Milk (all types e.g. cow's, goats's, sheep's, soya, rice, oat, almond)</p> <p>Plain or smooth yoghurts</p> <p>Cheese (no nuts, seeds, dried fruit, cereals), plain cottage cheese</p> <p>Butter, margarine</p> <p>Ice cream and sorbet (no nuts, seeds)</p> <p>Cream, sour cream, crème fraîche</p> <p>Custard</p>

Meat, fish and protein alternatives

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
<p>Convenience foods containing wholegrains & vegetables</p> <p>All varieties of beans e.g. baked beans, broad beans, borlotti, cannellini, kidney and soya beans</p> <p>All varieties of pulses e.g. lentils, chickpeas</p> <p>All nuts and seeds</p> <p>Crunchy nut butters</p>	<p>All types of fish, meat and meat products</p> <p>Smooth pate and liver sausage</p> <p>Smoked salmon or mackerel pate</p> <p>Soya mince Quorn Eggs</p> <p>Tofu, tempeh</p> <p>Smooth nut butters</p> <p>Smooth houmous</p>

Biscuits, cakes and sweet treats

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
<p>Wholemeal biscuits e.g. Digestives, Hobnobs</p> <p>Biscuits or cake made with dried fruit or nuts</p> <p>Flapjack, cakes and puddings made from oats</p> <p>Cakes made with wholemeal or wholegrain flour</p> <p>Chocolate with dried fruits and nuts</p>	<p>Plain biscuits e.g. Rich Tea, custard creams, malted milk, bourbon creams, ginger nuts</p> <p>Cakes, puddings and pastries made with white flour</p> <p>Plain jelly, milk puddings, mousse</p> <p>Smooth milk, white, dark and plain chocolate</p> <p>Boiled sweets</p> <p>Fudge</p>

Fruits

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
Blackberries Blackcurrants Cherries Clementines Coconut Cranberries (fresh & dried) Dates Dried apricots Figs Grapefruit Grapes Kiwi Mandarins Oranges Pineapple Plums Pomegranate Prunes Raisins Raspberries Redcurrants Rhubarb Strawberries Sultanas Fruit juice with pulp Smoothies made with the above	Fresh, tinned or stewed (without seeds, pips, skin & pith): Avocado Apples Apricots Bananas Mango Melon Nectarines Papaya Pears Peaches Watermelon Fruit sauces/coulis with pips/ seeds removed.

Vegetables

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
Asparagus Bean sprouts Beetroot Bok or Pak Choi Broadbeans Brussel sprouts Cabbage Celery Chicory Chilli (fresh) Coleslaw Edamame Fennel French beans Garlic (raw) Gherkins Ginger Globe and Jerusalem artichokes Kohlrabi Leeks Lemongrass Okra Olives Onion (raw or pickled) Peas Radishes	(avoid pips, seeds, skins and pith) Aubergine Avocado Broccoli Butternut squash Carrots Cauliflower Celeriac Chilli puree Courgette (peeled) Cucumber (peeled and deseeded) Daikon Garlic puree Gem Squash Ginger puree Horseradish puree Marrow (peeled) Parsnips (peeled) Peppers (deseeded) Pumpkin Shallots (well cooked) Spinach (well cooked) Swede Tomato passata Tomatoes (peeled & deseeded)

Vegetables continued

Runner beans Shallots (raw) Soya Beans Spinach Spring greens Spring onions Sugar snap peas Sweetcorn Tomatoes (with skins/pips) Watercress	Turnips
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Condiments

High fibre foods to <u>avoid</u>	Lower fibre foods to <u>include</u>
<p>Chutneys with whole pieces</p> <p>Pickles and relishes</p> <p>Wholegrain mustard</p> <p>Stalks and leaves of fresh herbs</p> <p>Jams with seeds</p> <p>Marmalade with peel</p>	<p>Tomato ketchup</p> <p>Barbecue and brown sauce</p> <p>Smooth mustard</p> <p>Worcester sauce</p> <p>Tabasco sauce</p> <p>Smooth chutneys</p> <p>Mayonnaise and salad cream</p> <p>Salt and pepper</p> <p>Dried herbs and powdered spices</p> <p>Gravy</p> <p>Seedless jam and curds</p> <p>Smooth marmalade</p> <p>Honey</p> <p>Golden syrup, maple syrup and treacle</p> <p>Hazelnut spread, Nutella®</p> <p>Smooth nut butters</p> <p>Marmite®, vegemite® and Bovril®</p>

Medications

You may be prescribed medications to help reduced your stoma output. These often include anti-diarrhoea medications or analgesia which are best taken 30-60 minutes before eating. For some people, an anti-secretory medication (often referred to as a PPI) may be recommended. For safe use of these medications, it is important to consult a doctor or pharmacist.

Meal suggestions

Breakfast

- Cereal e.g. cornflakes or Rice Krispies® soaked in whole milk
- Tinned pears, stewed fruit, fruit compote
- Full fat yoghurt, fromage frais, Petit filou®, Skyr® yoghurt, natural yoghurt
- Omelette, scrambled, poached or soft boiled eggs
- White bread toast, plain or cheese muffins or scones, potato cakes, croissant or pancakes

Meals

- Hotpots/stews/casseroles (make sure the meat is very tender and use vegetables from allowed list)
- Cottage pie/shepherd's pie
- Corned beef hash
- Fish pie
- Poached fish in sauce (i.e. Cod Mornay)
- Eggs, including scrambled, poached, omelettes, quiches and souffles (including cheese & salmon)
- Mashed potatoes/mashed sweet potatoes/peeled boiled potatoes /polenta/white couscous

- White pasta (dried or fresh), including with cheese sauce (i.e. macaroni cheese), smooth tomato sauce and with bolognese sauce (made with passata)
- Tinned spaghetti and ravioli
- Noodles, including: egg, vermicelli or udon noodles, served with soup or broth (including vegetables from allowed list) and wontons
- White rice (e.g. long drain, risotto or basmati), served with tender meat or fish
- Soups, including: chicken, oxtail, carrot and coriander, butternut squash (avoid soups with lots of vegetables or lentils/beans)
- Jacket potatoes (no skin) with:
 - » Cheese and butter
 - » Tuna and mayonnaise
 - » Egg mayonnaise
 - » Coronation chicken

Snacks

- Crackers or breadsticks with cottage cheese/spread cheese/soft cheese/smooth peanut butter/hazelnut spread or Nutella®
- Fruit fools, instant whips or crème caramel
- Milk puddings e.g. individual pots of custard, rice pudding
- Plain biscuits e.g. rich tea, malted milk, custard creams
- Yoghurt or fromage frais
- Crisps e.g. Skips®, Wotsits®, Quavers®, Pom Bears® or Pringles®

Cooking Tips

- Cook with large pieces of garlic, onions, shallots, lemon grass or ginger for flavour and remove prior to eating.
- Roast or boil tomatoes/peppers to remove skins.
- Use tomato passata in place of fresh tomatoes.

What if I have a small appetite or am losing weight?

- Aim for a regular meal pattern of breakfast, lunch and an evening meal with a source of protein at each sitting (e.g. meat, fish, eggs, quorn or tofu).
- Aim to consume 2-3 high calorie snacks or desserts in-between meals, such as: smooth yoghurt, cheese or pate with crackers, crisps, plain or cheese scones with butter, ice cream.
- Avoid 'diet' or 'light' products.
- Choose full fat dairy products.

Fortify your meals by:

- Adding 4 tablespoons of skimmed milk powder to 1 pint of whole milk to use on cereals, with puddings and in beverages.
- Adding butter, cream or grated cheese to vegetables, potatoes and soups.
- Adding custard, double cream or ice cream to desserts.

If you continue to lose weight then contact your dietitian or GP regarding the need for Oral Nutritional Supplements.

Contacts

My Dietitian:

Telephone:

Email:

My Stoma Nurse:

Telephone:

Email:

If you have any queries concerning the information in this leaflet, please contact OUH Dietetic Department: **01865 221 702**

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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