

NUTRITIONAL ADVICE AND DIET TIPS

Food is just one of the many things that can affect stoma output.

There are no set dietary rules for people with stomas. Having a stoma should not stand in the way of enjoying good food. It may just take a bit of time to find out what works for you.



Here are some general guidelines you may find useful:

- Eat regularly
- Drink plenty of fluids
- Chew your food well
- Enjoy your food and try not to be anxious about it
- Talk to your ostomy nurse or a dietitian about vitamin supplements
- Try new foods one at a time, in small quantities, so that if there is a problem, you will have an idea what caused it

Below are more specific guidelines, based on your ostomy type.*

Constipation/Diarrhea:

Just like before your surgery, at times you may experience constipation or diarrhea. Increasing your fluid and fiber intake should help prevent constipation.

Drink more water and fruit juices—six to eight glasses (48-64 ounces) per day. Include more fresh fruits and vegetables in your diet.

Try to eat foods that are high in fiber, such as whole-grain bread and cereals. Diarrhea can be caused by many things including viruses, antibiotics, and some medicines. It can also be a sign of trouble digesting certain foods. If food is the problem, you can try to remove fiber and bulk from your diet and eat foods that thicken your stool.

Odor/Gas:

Try to avoid foods that cause odor, such as:

- Eggs
- Fish
- Certain spices
- Asparagus

You may also wish to avoid foods that cause gas, which include:

- Beer
- Carbonated beverages
- Dairy products
- Onions
- Cucumbers
- Mushrooms
- Beans
- Cabbage

Gas-producing foods take about six hours to produce gas in a person with a colostomy.

Medicine:

After ostomy surgery, the way your body digests and absorbs medicines may be affected. Make sure to review all of your medicines—both over-the-counter and prescription—with your ostomy nurse, healthcare professional, and pharmacist.

These medicines can include:

- Antacids
- Antidiarrheals
- Anti-inflammatory agents, such as ibuprofen
- Aspirin
- Laxatives
- Salt substitutes
- Sugar substitutes, such as saccharin
- Vitamins



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After your recovery from surgery, you can gradually resume eating a balanced diet, unless your physician requires you to follow a special diet.†

Below are more specific guidelines, based on your ostomy type.*

After surgery, high-fiber foods can cause blockages in the ileum, which is narrow. Chew your food well to help break it down into smaller pieces. And be sure to drink plenty of fluids.

Many healthcare professionals ask you to avoid high-fiber foods the first six to eight weeks after surgery.

Some high-fiber foods that may cause blockages include:

- Celery
- Popcorn
- Chinese vegetables
- Coconut
- Raw pineapple
- Coleslaw
- Raisins (and other dried fruit)
- Mushrooms
- Nuts and seeds
- Salad greens
- Peas
- Vegetable skins
- Relishes

There is no special diet required for people with a urostomy. To avoid infections and keep urinary function normal, you should try to drink at least six to eight glasses of fluid (48-64 ounces) each day, unless your healthcare professional gives you different instructions.

Some foods cause urine odors, including:

- Asparagus
- Fish
- Eggs
- Alcohol
- Cauliflower
- Brussels sprouts
- Cheese (certain types)
- Baked beans
- Broccoli
- Onions
- Cabbage

Foods that help fight urinary odors include:

- Buttermilk
- Parsley
- Yogurt



Get the nutrition advice you need to live a healthy life.

Call 1-800-422-8811 or visit www.convatec.com/ostomy

Diet Reference: Ostomy Nutrition Guide. University of Pittsburgh Medical Center website. <http://www.upmc.com/patients-visitors/education/nutrition/pages/ostomy-nutrition-guide.aspx> Accessed November 17, 2015.

*You should always ask your healthcare professional about any dietary restrictions you may have or need to follow.

†Check with your healthcare professional to find out if you have dietary restrictions. If you experience cramping, diarrhea, nausea, or vomiting, call your healthcare professional immediately.