

*The following is an extract from an article in IA Journal 186 (written by a dietitian) which gives dietary guidelines for both ileostomists and internal pouch patients:*

"We all differ in our tolerance to different foods. What works for you may not work for someone else and vice versa. Good nutrition and healthy eating do make a difference. Remember that small changes can often result in big improvements or results. There are 10 general tips that I would encourage, as outlined below":

### **1. Avoid Fad Diets**

Fad diets often recommend cutting out whole food groups and / or following very restrictive eating patterns. These are not sustainable and often cause problems in the long term. Healthy eating is not a quick fix.

### **2. Regular Meals and Snacks**

With the busy lifestyles we lead in the 2000's we often see people who are skipping meals regularly and relying on ready meals. Erratic eating often means erratic bowel habit so try and ensure you include meals or snacks at regular intervals during your day and don't over-rely on ready meals or processed foods.

### **3. Aim for Variety**

We know from research trials that diversity in the diet provides a greater variety of nutrients to the body. Try new foods that you would not normally eat to tantalise the taste buds.

### **4. Strive for Five Fruit and Vegetables Daily**

Post-operatively, and if people have strictures, we may advise them to reduce the fibre in their diet to try and prevent obstructions or other problems. We do encourage people with stomas and pouches to aim for their 5 or more serves of fruit and vegetables daily where possible. Stewed, pureed, mashed fruit and vegetables, juices and soups are useful and sometimes tolerated on a low fibre diet. We normally encourage people to resume a normal fibre intake 4-8 weeks after internal pouch or stoma formation - it depends very much on the individual. Again, be brave, and try fruits or vegetables or salad items that you might not normally try. Winter is the perfect time for warming soups – most combinations of vegetables will work well together – add potato, rice, pasta or pulses to make them into a more substantial meal.

### **5. Starchy Foods are Staple**

Starchy foods (pasta, bread, breakfast cereals, rice, potatoes, sweet potatoes, crackers etc.) provide energy and various B vitamins. They are cheap, easy to prepare, and should form the basis of meals adding some protein to fruit and vegetables.

### **6. Protein Power**

We should aim for at least 1-2 serves of protein foods daily - lean meat, poultry, fish, eggs, soya products, pulses, and nuts. Protein is essential for growth and repair (requirements

increase in the days and weeks following major surgery or illness), and provide nutrients such as iron, zinc and B vitamins.

## **7. Don't Avoid Dairy Foods Unnecessarily**

Unfortunately many people with stomas and pouches are unnecessarily advised to avoid milk, cheese, yoghurt, ice-cream and other dairy foods. It is a problem for only about one in five people, and even then generally most people can tolerate some cheese, yoghurt and small amounts of milk. Dairy foods provide an abundant supply of calcium – if you are avoiding them, discuss supplementation with your doctor or dietitian to avoid increasing the risk of developing osteoporosis.

## **8. Don't Forget to Drink**

Keeping well hydrated is very important. High outputs from an internal pouch or stoma run a real risk of dehydration due to water and salt losses. Aim for at least 8-10 cups of fluid per day, and increase this if losses are high.

- Limit sugary drinks and fruit juice, and keep tea and coffee to less than 4 cups daily.
- Water, diluted squash and fruit juice are the best things to drink for most, but some people will require rehydration drinks. It may be advisable to talk to your dietitian about your specific needs.

## **9. Probiotics**

The jury is still out on the direct benefits of probiotics for people with stomas or internal pouches although we know that people taking high dose probiotics with chronic pouchitis remain in remission longer. We still have a lot to learn and they do vary in their effectiveness but some people do report that they find them beneficial. Try to take sources such as fermented milk drinks, yoghurts, capsules which contain both Bifidus and Lactobacillus bacteria, and preferably take them with food. Take them daily and trial for several weeks or months.

## **10. Go Easy with the Salt Shaker**

Salt has been in the headlines lately as the government urges us to reduce the amount of salt we eat to protect against high blood pressure and the risks that go along with that. Most of us are consuming at least twice the amount of salt we need, so go easy. After surgery you may be encouraged to use more salt than you normally might, but this is often only until your body adapts to your new stoma or internal pouch.

## **Optimising Pouch / Stoma Function**

Often you may receive conflicting information and end up very confused. Below are some tips you may find helpful if you are having trouble with your stoma or internal pouch.

- Don't skip meals
- Include foods that thicken output (see below)
- Avoid eating and drinking at the same time
- Limit foods that increase output (see below)

- Limit foods that cause gas
- Chew foods well and take time with your meals
- Avoid excess tea, coffee, cola and alcohol
- Get a formal assessment from a dietitian

### **Foods that may increase wind and odour**

- Broccoli, sprouts and cabbage
- Onion, garlic, leeks, asparagus
- Beans, pulses, lentils
- Spicy foods
- Fizzy drinks
- Beer
- Eggs

### **Foods that thicken output**

- Rice, rice cakes, rice crackers
- Fresh pasta and white bread
- Mashed potato
- Apple sauce / stewed apple
- Smooth peanut butter
- Ripe banana
- Marshmallows and jelly cubes

### **Foods that increase output**

- Pulses, lentils
- High fibre fruit and vegetables (sweetcorn, leeks, onions, cabbage, mushrooms, sprouts, peas, dried fruit, citrus fruit, rhubarb)
- Wholegrain cereals
- Alcohol, fruit juice and caffeinated drinks
- Chocolates
- Fatty foods
- Other food intolerances

**Remember everybody is different and have differing tolerances to foods, what works for one may not work for another, and vice-versa.**

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