

## General Information

Immediately following surgery, you should be able to go back to your usual diet unless you are otherwise instructed. A well-balanced diet is important to good health. You should eat slowly and chew your food well. Add foods to your diet gradually to see how they agree with your system.

## Dehydration

If you have high volumes of output (diarrhoea) from your ileostomy and/or vomiting, dehydration could be a problem. Symptoms of dehydration include:

- > Thirst
- > Dry mouth
- > Dark urine or decreased urinary output
- > Muscle and/or abdominal cramps
- > Weakness, lethargy, or feeling faint

You will probably need to drink more fluids than most people—especially when you are active and perspiring. A good rule of thumb to remember is to drink a glass of liquid whenever you empty your pouch. It also is very important to replace key electrolytes (e.g., sodium and potassium) as well.

## Diarrhoea

How thick or thin your output is depends on what you eat and how your body processes the food. If your stool changes to mostly fluid and there is a marked increase in the volume, you may have diarrhoea. This could be related to food, medications, or an intestinal flu. During this time, you need to drink more fluids to prevent dehydration, avoid foods and beverages that cause loose stools, and empty your pouch more frequently.

## Food Blockage

Cramping and abdominal pain along with watery diarrhoea or no stool output may indicate a food blockage or bowel obstruction. This can occur when high fiber foods have difficulty passing through the intestine and exiting the stoma. Food blockage risk can be minimised by reducing high fiber foods, chewing foods thoroughly, and increasing your fluid intake. Your surgeon may advise you to eat only cooked (vs. raw) fruits and vegetables for about six to eight weeks after surgery. This gives your body time to adjust to the changes in digestion. Note: If you have no output and have vomiting, it is important that you see your healthcare provider or seek care at an emergency room.

## Gas

As your bowel begins to function after surgery, you will notice gas in your pouch. Gas can be the result of foods and fluids you consume and swallowed air. Smoking, chewing gum, and chewing with your mouth open can all increase the amount of air you swallow. If you are concerned about gas in your pouch, you may want to consider a pouch with an integrated filter.

## Odour

Odour is a concern for most people who have ostomy surgery. Some foods and nutritional supplements affect the odour of stool. Today's ileostomy pouches are made with odour-barrier film. There are pouch deodorants and lubricating deodorants that can help neutralise the odour when you empty your pouch. If you notice odour at any other time, check the pouch seal for leakage.



## Medications

Some medications or nutritional supplements may change the colour, odour, or consistency of your stool. Even non-prescription medications, like antacids, can cause changes. Some medications like long-acting, time-released, or enteric-coated pills may not be absorbed effectively. Do not crush medications without the approval of a pharmacist and never take a laxative. Before taking any medications, it is a good idea to ask your doctor or pharmacist.

<b>Foods and fluids which may help replace lost electrolytes</b>	Sports drinks, bananas, strong, hot tea, broths (like chicken or beef bouillon), potatoes, tomatoes, crackers
<b>Foods that may help to thicken loose stools</b>	Applesauce, bananas, cheese, noodles (cooked), pretzels, white rice, white toast, marshmallows
<b>Foods that can contribute to food blockage</b>	Celery, corn, coconut, dried fruit, popcorn, Chinese vegetables, nuts, mushrooms, grapes or raisins
<b>Foods and fluids which increase intestinal gas</b>	Beans, beer, carbonated beverages, broccoli, brussel sprouts, cabbage, onions, cucumbers
<b>Foods which may increase stool odour</b>	Asparagus, broccoli, brussel sprouts, cabbage, cauliflower, eggs, fish, garlic, onions, some spices



## Other recommendations from my healthcare professional:

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