



Living with an Ostomy:

Healthy Eating



Ostomy Care

*Healthy skin. Positive outcomes.*



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. Each person is unique and everyone reacts differently to certain foods, regardless of



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*A glossary is included at the back of this booklet to help with some terms with which you may not be familiar.*

whether or not they have a stoma. It is always best to eat a variety of foods in moderation. Along with exercise, this is the best way to achieve and maintain good health.

A photograph of a person sitting at a white table, eating breakfast. The person is wearing a light-colored long-sleeved shirt and a blue wristband. They are holding a knife and cutting a piece of bread on a white plate. On the table, there are two white egg cups, each containing a brown egg. A glass of white milk is also visible. In the background, there are some yellow fruits, possibly lemons or limes, and a small white bowl. The overall scene is bright and clean.

## Reintroducing Food Into Your Diet

If you recently had surgery, it is vital to re-establish a healthy diet. This will promote optimal healing and help you gain 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 healthcare professional may recommend a period of time of no food or water. To ensure you still receive the nutrition your body requires they may decide to put you on an intravenous drip (IV) for fluids.

From IV fluids you will transition to clear liquids. This would then be followed by a reintroduction of softer, more bland foods (i.e. white bread, eggs, yoghurt) to help your system adjust to your new ostomy. 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 favourite foods slowly. Your stoma may not react positively to the first hot and spicy dish it tries. When possible, start with plain foods. Avoid those that are stringy or fibrous.

After your surgery, swelling may exist in the bowel. This swelling may narrow the bowel, making some foods 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 dietitian 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.

### **Settling into a routine**

In the initial stages after colostomy or ileostomy surgery, the output into your pouch will frequently be very loose and fluid-like. This generally improves with time. There are many foods that help thicken your output of stool. This is covered in more detail later in this booklet.

Aim to drink six to eight glasses of fluid each day to make sure you don't get dehydrated. If you pass regular amounts of clear or pale, straw-coloured urine, you most likely have enough fluid in your system. If your urine becomes brown or dark yellow in colour, it's wise to drink more fluid to keep properly hydrated. Talk to your healthcare professional about any dietary restrictions.

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. A healthcare professional can help you develop a dietary plan that meets your needs.

Once you are feeling better, and you have settled into more of a routine, you can start experimenting with your favourite foods.







# Build a Healthy Eating Style

All food and beverage choices matter — focus on variety, amount, and nutrition.

- Make healthy food and beverage choices from all five food groups including grains, vegetables, fruits, protein foods, and dairy to get the nutrients you need
- Eat the right amount of calories for you based on your age, gender, height, weight, and physical activity level
- Build a healthier eating style to help avoid weight gain and reduce your risk of diseases such as heart disease, diabetes, and cancer
- Use nutrition labels and ingredient lists to find food and beverage choices that are lower in saturated fat, sodium, and added sugars



## 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. Be sure to chew anything with seeds carefully and completely.

Refined grains have been milled to remove husks or fibre. 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, one half cup of cooked cereal, a half cup of rice or pasta, or a cup of cold cereal.



## Vegetables and fruits

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.

For vegetables, one serving equals about one cup. Depending on age, weight and gender, guidelines call for one to three cups of vegetables a day.

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.





## Oils

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

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. 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.

### **TIP**

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

## **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, yoghurt, pudding made with milk, ice cream, and ice milk.

If you have lactose intolerance, there are milk alternative products available that are lactose free. Some cheeses and yoghurts 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 yoghurt 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, popcorn, and other foods 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, cashew, 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.







## How Food Choices

## Affect Output

<b>Foods and fluids which may help replace lost electrolytes</b>	Sports drinks, bananas, broths (like chicken or beef bouillon), potatoes, tomatoes, crackers
<b>Foods that may help to thicken loose output</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, raisins
<b>Foods and fluids which increase intestinal gas</b>	Beans, beer, carbonated beverages, broccoli, brussels sprouts, cabbage, onions, cucumbers
<b>Foods which may increase output odour</b>	Asparagus, broccoli, brussels sprouts, cabbage, cauliflower, eggs, fish, garlic, onions, some spices
<b>Foods which can impact the colour of urine and stools</b>	Beets, foods with food colourings, iron tablets, licorice, tomato sauce, some medications

A photograph of a young couple with dark skin and curly hair, smiling and eating together outdoors. The woman is holding a small white bowl of food. The background is a blurred green landscape.

## Food-related Issues\*

*\*Applies to a faecal ostomy*

### Gas

As your bowel begins to function after surgery, you will notice gas in your pouch. The amount of gas varies. If you experienced excessive gas before your surgery, you will likely have similar problems after your surgery.

Gas can be caused by the foods you eat. It can also be the result of swallowing air. Drinking carbonated beverages, smoking, chewing gum, and chewing with your mouth open can all increase the amount of air you swallow.

If you are concerned about gas, you can use a pouch with a filter. The filter lets the gas out of the pouch, but not the odour.

It also prevents gas from building up, so the pouch does not inflate like a balloon. Filters work best with a more formed discharge.

## **Diarrhoea**

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 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. If this doesn't resolve, contact your healthcare professional.

Foods known to increase stoma output are fibrous foods, raw fruit and vegetables, spicy foods, high fat foods, caffeine, nuts, and corn.

See the chart on page 13 for some other foods that can help thicken loose output.

## **Constipation**

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

### **Food blockage**

If you have an ileostomy, 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 fibre foods (such as raw vegetables, coconut, corn, nuts, dried fruit, and popcorn) have difficulty passing through the intestine and exiting the stoma. Food blockage risk can be minimised by reducing high fibre foods, chewing foods thoroughly, and increasing fluid intake. Your surgeon may recommend you 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.

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.

*Note: If you have no output and have vomiting, it is important that you see your healthcare professional or seek care at an emergency room.*

# General guidelines

- **Try to develop a regular eating pattern.** Create one 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 worry too much** 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.** 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.
- **Watch your fluid intake and urine output,** as mentioned earlier, if you have an ileostomy or urostomy.

Above all, food is an essential part of life, and it is an extremely pleasurable part of living. It provides a social and relaxed part of everyone's life. A stoma should not limit your enjoyment of sharing a meal with family and friends.

# Procuring your ostomy product supplies

## Australia

In order to purchase your ostomy products at a subsidised rate, you will need to become a member of a Stoma Association. An annual membership fee is required to assist the association with administration costs.

Stoma Associations purchase ostomy products from suppliers such as Hollister Incorporated and distribute them to their members on a monthly basis. Most of these products are subsidised by the Australian Government. The Department of Health's **Stoma Appliance Scheme (SAS)**, established in 1975, improves access to the most suitable and clinically appropriate stoma-related products.

The **Australian Council of Stoma Associations Inc. (ACSA)** (website [www.australianstoma.com.au](http://www.australianstoma.com.au)) represents, at a national level, the interests of 21 regional Stoma Associations and approximately 46,000 people living with ostomies throughout Australia. The ACSA liaises with the Australian Government in matters related to accessing products funded through the SAS, coordinates ostomy-related support services, provides advocacy for people living with stomas, and publishes the national journal, *Ostomy Australia*.



## 1. How to order your ostomy products through the Stoma Appliance Scheme (SAS)

Once you become a member of a Stoma Association, you will be able to obtain your ostomy products at a subsidised rate. The Association will provide you with details on how to place your monthly order.

### Access SAS Forms

[www.australianstoma.com.au/associations](http://www.australianstoma.com.au/associations)

Your STN/healthcare professional can help you complete the necessary forms to become a member.

## 2. How to find a Stomal Therapy Nurse (STN) near your home

The Australian Association of Stomal Therapy Nurses (AASTN) – (website [www.stomaltherapy.com](http://www.stomaltherapy.com)) is a professional organisation of STNs. One of their major objectives is to promote quality care for a wide range of people with specific needs. These needs may be related to ostomy construction, urinary or faecal incontinence, wounds with or without tube insertion, and breast surgery.

The AASTN website provides a “**Find a Stomal Nurse**” feature to help you locate a STN in your State/Area. It also provides a helpful **Managing Your Stoma Supplies** guide.

## New Zealand

After surgery, your Stoma Nurse will establish a product fit that is right for you. Supply of your product is organised by your Stoma Nurse, via a distributor.

## Useful links:

### Australia

#### **Find a Stoma Association Near You**

[www.australianstoma.com.au/associations](http://www.australianstoma.com.au/associations)

#### **Find a Local Ostomy Support Group**

[www.australianstoma.com.au/living-well-with-a-stoma/support-groups-2/](http://www.australianstoma.com.au/living-well-with-a-stoma/support-groups-2/)

### New Zealand

#### **The Ostomy NZ**

[www.ostomy.org.nz](http://www.ostomy.org.nz)

(The Federation of Ostomy Societies NZ) represents, at a national level, the interests of 19 regional Ostomy Societies located throughout New Zealand. Helping ostomates and their families/caregivers feel educated and empowered to lead a normal life is the main focus.

#### **Cancer Society**

[ostomyasiasouthpacific.org](http://ostomyasiasouthpacific.org)

#### **Crohns and Colitis NZ**

[www.crohnsandcolitis.org.nz](http://www.crohnsandcolitis.org.nz)

# Resources and Organisations

Your healthcare professional and your STN will be very important resources for you in the days ahead. You also have ongoing access to online information or printed educational materials:

## **Ostomy Learning Centre**

Find useful content that's easy to read and share with others.

Australia: [www.hollister.com.au/ostomylearningcentre](http://www.hollister.com.au/ostomylearningcentre)

New Zealand: [www.hollister.co.nz/ostomylearningcentre](http://www.hollister.co.nz/ostomylearningcentre)



Understanding  
an Ostomy



Maintaining  
Skin Health



Living With  
an Ostomy



Using Ostomy  
Products

## **Hollister Incorporated YouTube Channel**

[www.youtube.com/hollisterincorporated](http://www.youtube.com/hollisterincorporated)

View a variety of how to and lifestyle videos. Also includes interviews and tips from people living with ostomies.

## **Australia**

### **Cancer Council of Australia**

*[www.cancer.org.au](http://www.cancer.org.au)*

### **Bowel Cancer Australia**

*[www.bowelcanceraustralia.org](http://www.bowelcanceraustralia.org)*

### **Australian Council of Stoma Associations**

*[www.australianstoma.com.au](http://www.australianstoma.com.au)*

## **New Zealand**

### **Cancer Council of New Zealand**

*[www.cancernz.org.nz](http://www.cancernz.org.nz)*

### **Bowel Cancer New Zealand**

*[www.bowelcancernz.org.nz](http://www.bowelcancernz.org.nz)*

### **The Federation of NZ Ostomy Societies Inc. (FNZOS)**

*[www.ostomy.org.nz](http://www.ostomy.org.nz)*

## **Lifestyle Series and Care Tips**

Available from your clinician or for PDF download at:

Australia:

***[www.hollister.com.au/en-au/ostomycare/educationaltools](http://www.hollister.com.au/en-au/ostomycare/educationaltools)***

New Zealand:

***[www.hollister.co.nz/en-nz/ostomycare/educationaltools](http://www.hollister.co.nz/en-nz/ostomycare/educationaltools)***

# Glossary

## **Colon**

Another term for the large intestine or last portion of the gastrointestinal tract.

## **Colostomy**

An ostomy (surgical opening) created in the colon; part of the large intestine or colon.

## **Dehydration**

A loss of too much water from the body.

## **Diarrhoea**

Loose water-like faecal output from the stoman that is more so than usual.

## **Ileostomy**

An ostomy (surgical opening) created in the small intestine.

## **Peristomal Skin**

The area around the stoma starting at the skin/stoma junction and extending outward to the area covered by the pouching system.

## **Pouch**

The bag that collects output from the stoma.

## **Skin Barrier**

The portion of your pouching system that fits immediately around your stoma. It protects your skin and holds the pouching system in place. Sometimes called a wafer.

## **Stoma**

A surgically created opening in the gastrointestinal or urinary tract. Also known as an ostomy.

## **Stool**

Waste material from the bowel. Also known as faeces or bowel movement.

## **Urostomy**

An ostomy (surgical opening) created to drain urine.

## **Wear time**

The length of time a pouching system can be worn before it fails. Wear times can vary but should be fairly consistent for each person.



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The information contained in this brochure is provided as general information only and is not intended to be medical advice. Please see our website for the most up to date information, as guidance can and does sometimes change. Always follow product Instructions For Use and ask your healthcare professional for more information.

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