Medications
Some medications or nutritional supplements may alter the colour, odour or consistency of your stool. If you have any questions about the medications you are taking and the effect it may have on your colostomy (especially when commencing a new medication), ask your doctor, pharmacist or your STN.

For further information or help with any stoma questions contact your STN or visit www.stomaltherapy.com and click on “Find a STN”

Disclaimer  The information in this brochure:
• has been developed as a general guide only
• relates to adults only

Any concerns need to be discussed with your STN or doctor

Prepared by the Australian Association of Stomal Therapy Nurses Inc. Education and Professional Development Subcommittee  www.stomaltherapy.com

References:
• Breckman B. (2005) Stoma care & rehabilitation. Livingston

Review due 2019
Level 1V Evidence (Expert Opinion)
GENERAL INFORMATION

- This dietary information has been compiled as a “Guide only”
- Because you now have a colostomy you should not have to change your eating habits significantly
- You may now be able to eat foods you were having trouble with prior to the surgery
- Each person is an individual and will react to each food type in their own way
- It is important that you have a well balanced diet

REDUCING gas / wind production

- Eat your food slowly, chew with the mouth closed and avoid gulping your food
- Eating too much food at one time adds to discomfort
- Eat regular meals, as skipping meals is more likely to increase gas production

Foods that may CAUSE gas / wind

- Cucumber
- Peas
- Beans
- Orange juice
- Onions
- Eggs
- Cabbage
- Yeast
- Mushrooms
- Baked beans
- Broccoli
- Brussel spouts
- Corn
- Garlic
- Cauliflower
- Fizzy / carbonated beverages including beer
- Low calorie sweets and lollies (with Sorbitol)

It may also be a result of swallowing air. Chewing gum, chewing with your mouth open, drinking with a straw, smoking and snoring can all increase the amount of air you swallow.

Foods that may REDUCE odour

- Yoghurt
- Cranberry juice
- Yakult
- Buttermilk
- Fresh parsley
- Stewed or grated apple (no skin)

Constipation (hard stomal output)

Constipation can occur for a variety of reasons. It is recommended that you try and identify the cause of the constipation – See A guide to preventing constipation, available from www.stomaltherapy.com or contact your Stomal Therapy Nurse (STN)

If constipation should occur, try the following:

- Eat prunes, fresh fruit
- Aim to drink 2 litres (6 – 8 glasses) of fluid per day
- Take a gentle stool softener or fibre supplement
- If 2 – 3 days pass with no bowel action, check with your STN or doctor

Diarrhoea (runny or fluid stomal output)

Diarrhoea can occur for a variety of reasons. It is recommended that you try and identify the cause of the diarrhoea.

- If diarrhoea occurs, treat as you did before you had a colostomy
- Consult your doctor if it persists for more than 2 – 3 days
- If you usually use a closed pouch you may need to change to a drainable pouch to avoid frequent pouch changes that can affect your skin and the number of supplies available for later use. Speak with your STN

Foods to help THICKEN your stomal output

- Pasta
- Pumpkin
- Dumplings
- Custard
- Tapioca
- Pancakes
- Pretzels
- Rice
- Bananas
- Toast
- Mashed potato
- Apple sauce
- Arrowroot
- Marshmallows
- Uncooked corn flour
- Cheese
- Jelly babies /beans
- Smooth peanut butter
- White bread (not fresh)
- Fresh grated apple (no skin)