Colostomy dietary guidelines

Patient education

You should not need to change your diet unless your doctor prescribes a special diet for you. Certain foods produce more gas and odor than others and over time you will learn how those foods effect you.

Gas
Gas is created when carbohydrates you have eaten react with the healthy bacteria in your large bowel. It may take five or six hours from the time you eat gas-producing foods until gas passes from your colostomy.

You can buy products that may decrease gas, although always check with your physician before taking new medications.

Odor
The only time you should experience odor is when emptying your colostomy pouch. You can put special drops in your emptied pouch to help lubricate and eliminate the odor involved in the emptying process. One example is Brava® Lubricating Deodorant by Coloplast®.

You can also take medications by mouth to help control odor. Check with your physician or WOC Nurse to see if they are appropriate for you.

Another suggestion is to carry a room deodorizer in your pocket or purse to help decrease odor when using a public rest room.

Diarrhea
Loose, runny stools can be caused by antibiotics, food intolerance, some medications or a “flu-like” illness. If you have diarrhea, you may want to switch to a bland, constipating diet that includes rice, pasta, cheese, bananas and applesauce.

Diarrhea causes you to lose water, sodium and potassium, so drink plenty of extra fluids including an 8-ounce glass every time you empty your pouch. Sports drinks may help to replace the sodium and potassium. If your diarrhea continues, your physician may want to prescribe an anti-diarrheal medication.

Constipation
You may become constipated just as you did prior to your surgery. To avoid constipation, eat a diet that is high in fiber, fruits, vegetables and grains (breads and cereals). Drink 6 to 8 glasses of fluid a day, with your physician’s approval. In some cases, your physician may have you take a mild laxative to relieve constipation. Check with your physician before taking any laxatives.
Additional information

WOC Nurse: _________________________________________________________________
Physician: __________________________________________________________________
Ostomy supplier: __________________________________________________________________
Phone number: __________________________________________________________________
Address: ________________________________________________________________________

Special instructions

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The recommendations and information in this material should not be considered a substitute for personal medical advice or diagnosis.