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Courtesy of South Devon Healthcare Foundation Trust

Sophie explains what can cause constipation and how alterations in diet and lifestyle can help to prevent this problem...

About Constipation...

Constipation is a problem which is thought to affect up to 30% of the population. It is generally described as passing stools less frequently than usual or passing stools which are dry, hard and lumpy. It can cause many unpleasant symptoms such as bloating, pain, feeling sick and loss of appetite. In ostomates, constipation can also cause the stool to build up at the top of the bag leading to what is referred to as 'pancaking', which can cause leakages and sore skin.

In general, only patients with colostomies are at risk of constipation. This is because it is the large bowel that absorbs most of the fluid we drink. People with ileostomies should pass looser stools. If your ileostomy stops working for six hours or more, you must seek medical advice. If you have ever been told you have adhesions or strictures, or have been put on a 'low residue' diet by your doctor or consultant the following advice is not suitable for you.

Constipation can be caused by several factors.

Diet

One of the key things which can cause constipation is diet. This may be because the diet does not provide enough fibre, the amount of food is not adequate or not enough fluid is taken.

There are **two different** types of fibre:

Insoluble fibre resists digestion in the small bowel and adds bulk to the stool, increasing stool volume and increasing the transit time of food through the bowel. Generally, it is high fibre cereals and the skin, pips and peel of fruit and vegetables which provide us with a good source of insoluble fibre.

Soluble fibre acts like a sponge, absorbing water and helping the stool to remain soft and easy to pass. Soluble fibre is found in the flesh of fruit and vegetables, oats and barley.

In general, people should try to achieve a balance of the two fibres in their diet for good digestive health. However, ostomates may find it more convenient to have more soluble than insoluble fibre to reduce the volume of stool passed but keep the stools soft.

When introducing more fibre into the diet, do it slowly and change one thing at a time. It is important that you increase your fluid intake alongside taking additional fibre.

Higher fibre foods

Peas, beans, Brussels sprouts, parsnips, spring greens, wholemeal, rye and granary bread, wholemeal pasta, bran-based breakfast cereals, muesli.

Foods with a medium fibre content

Most fruit and vegetables, nuts, brown and white bread, brown rice, other pasta, baked goods containing wholemeal flour or dried fruits, wholewheat breakfast cereals, porridge.

(Above taken from The Manual of Dietetic Practice, edited by Briony Thomas, Third edition, 2001).

Good ways of adding fibre include:

- Baking cakes with wholemeal flour
- Having fruit cake or foods containing dried fruit
- Drinking juice with the pulp, or having prune juice
- Trying smoothies
- Adding dried fruit to breakfast cereal

Fluid

Fluid also plays an important role in preventing and treating constipation. It stands to reason that if there is not enough fluid going in by mouth, the stool will not contain enough fluid and will be too hard. Most adults need between 1.5-2 litres (3-4 pints) of fluid per day. This includes all fluid except for alcoholic drinks. Some tips to help you get enough fluid are:

- Keep a jug or bottle of water in the

fridge so you can measure how much fluid you are having

- Keep a range of cordials, flavoured waters and other drinks to tempt you to drink more
- Use ice and nice glasses to make drinks more appealing. Some people also find a straw helpful
- Ensure you drink more in hot weather and after exercise to replace what you lose through sweat

If you feel you are getting enough fibre but are still constipated it is most likely that it is inadequate fluid intake that is causing the problem. This is because the fibre acts as a sponge in the bowel, absorbing water and softening the stools. This process however, relies upon plenty of fluid being taken by mouth. Adding extra fibre and not adding extra fluid could actually make you more constipated.

Exercise

Being inactive as a result of illness or a chronic condition can add to problems with constipation. If you feel that reduced activity has affected your bowel motions speak to your GP who may consider some medication to help to relieve your discomfort. However, buying laxatives from a chemist and using them long term can make the problem worse, so it is important to speak to your doctor.

Take more exercise if you are able. Gentle exercise such as walking every day can increase the movement in your bowel and help to relieve constipation.

Medication

Many medications can cause constipation, particularly painkillers, indigestion medication, calcium supplements, water tablets and iron supplements. However, it is very important that you do not stop taking medications without first discussing it with your GP. It is likely that they will be able to alter your medications to improve the problem.

When is Constipation not Constipation?

Sometimes when people have had a lot of surgery, have hernias or have stricturing disease, for example Crohn's disease, they can develop intermittent or total bowel obstruction.

A bowel obstruction is defined as: Blockage of the intestines (bowel) producing symptoms of vomiting, distension and abdominal pain, failure to pass flatus (wind) or faeces (complete constipation) is usual. (*Oxford Concise medical dictionary, Seventh Edition, 2007, Oxford university press*).

Some people find that they fluctuate between constipation and very loose stools. This is a common problem, but if coupled with abdominal distension and pain it is important that you speak to your stoma nurse, consultant or GP to rule out partial or intermittent obstruction.

Your Questions Answered...

Q: *Just wondering if you can offer some advice. I've had a colostomy for three months and haven't been able to get a proper night's sleep as my bag fills up with wind during the night to almost bursting point. I have to get up every two hours or so to empty it. I've read all the lists of good/bad foods and stick pretty closely to them. Is there anything else I can do to prevent this?*

A: Wind can be a difficult thing to control. (I wonder if this was a problem for you before you had your stoma formed) As you are already following the lists of foods to avoid and include, here is some more in depth information we give to our patients with Irritable Bowel Syndrome who suffer with wind:

- Drink at least 8 glasses of water per day
- Include plenty of low fibre foods
- Include oats

- Try probiotic yogurts/drinks for at least 4 weeks
- Reduce alcohol intake and have at least 2 alcohol free days per week
- Avoid fizzy drinks
- Be cautious with the amount of fruit and fruit juice you include. Try not to have more than three portions per day
- Avoid foods containing resistant starch. These include wholegrains, seeds, sweetcorn, muesli, green bananas, garlic and onions
- Resistant starch can also be formed during the cooking process so you might find that reducing your intake of pre-cooked or ready-made meals containing, potato, pasta or rice, oven chips and other preheated potato products may help
- Foods which typically cause wind include beans, green leafy vegetables, onions, garlic, leeks, asparagus, Jerusalem artichokes and chicory so try to reduce your intake of these

Hopefully there will be something here that you can pick out as the possible cause of your problem. Remember to cut out one thing at a time so you can be clear about which food is causing your problem. I hope this helps.

Note: As always this advice is very general and will not be suitable for everyone reading this article. If you are unsure please speak to your consultant, dietitian or stoma care nurse.

