

Dietary Advice Following Ileoanal Pouch Surgery

Patient Information

Colorectal Surgery

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Eating and drinking

One of the benefits of your operation is that you will be able to return to a regular diet. You may decide to alter your diet a little in order to aid in slowing bowel function or to prevent anal canal and perianal skin irritation. The table lists four groups of foods that commonly affect pouch output of the lower digestive tract. There are no specific rules to follow – diet is unique to each person. However, the following suggestions may be helpful:

- Add new foods to your diet one at a time. In this way, you can identify problem foods
 quickly. Keep in mind that foods which cause problems at first may not continue to do
 so. You can try small amounts of problem foods again sometime in the future.
- Eat small meals at first. It will make you feel more comfortable and less bloated.
- Eat regularly don't skip meals. If you are having frequent bowel movements and think that eating fewer meals will help, remember that more gas may be produced when your bowel is empty so don't avoid meals in an attempt to limit output. Also, eat foods that may decrease pouch output.
- When you eat food high in fibre e.g.; salad, pulses i.e. lentils, beans be sure to chew them well, limit the quantity and drink plenty of fluids. Try to drink after food is swallowed so that you are not washing down a mouth full of half chewed food.
- If your pouch output becomes so thick that it is difficult to pass, you may be able to ease the problem by drinking more fluids especially fruit juice. Also, eat foods which may increase pouch output (see table below).
- Many people have not had to make any changes to their eating and drinking habits.

Foods that may affect pouch and bowel functioning

Foods	Effect
Beans, beer, caffeinated beverages, chocolate, leafy green vegetables, spicy foods, wholemeal food, cereals, alcohol, citrus fruits and juice.	May increase output.
Apple sauce, bananas, boiled rice, cheese, creamy peanut butter, tapioca, white bread, potatoes, suet pudding, pasta.	May decrease output.
Coconut, nuts, oriental vegetables e.g. (oranges, apples, coleslaw, celery, corn) citrus fruits and juices, food containing bran, popcorn.	May cause anal irritation.
Beer, carbonated beverages, dried beans and peas, milk and milk products, onions, vegetables in the cabbage family (cabbage, broccoli, sprouts) salad, mushrooms.	May increase wind.
Sweetcorn, potato skins, nuts, tomato skins, raw fruit skins, pineapple.	Need to chew well, have on rare occasions been known to block the flow from the pouch.

Fluid replacement

It is important to remember that you no longer have a colon, which makes you slightly more at risk of dehydration. It is important to ensure that you drink more fluid than previously. In hot weather you may need to drink slightly more, or if you have been active and sweating a lot.

There are numerous isotonic drinks readily available on the supermarket shelves, which are very good. Dioralyte sachets (available from most chemists) are fluid replacement salts, which can be taken when required. The Home Made Rehydration Drink (see recipe below) can also be made up daily and left in the fridge for you to drink at your leisure, although it is nicer to flavour with juice.

Rehydration solution

You will need to make up the solution fresh each day.

Glucose 6 x flat 5ml spoonful's

Sodium Chloride (Table Salt) 1 x flat 5ml spoonful

Sodium Bicarbonate (Bicarbonate of Soda) 1 x 2.5ml heaped spoonful

Mix with Tap water Up to 1 litre

Comments, Compliments or Complaints

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Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

- 1. What are my options?
- 2. What are the pros and cons of each option for me?
- 3. How do I get support to help me make a decision that is right for me?

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