

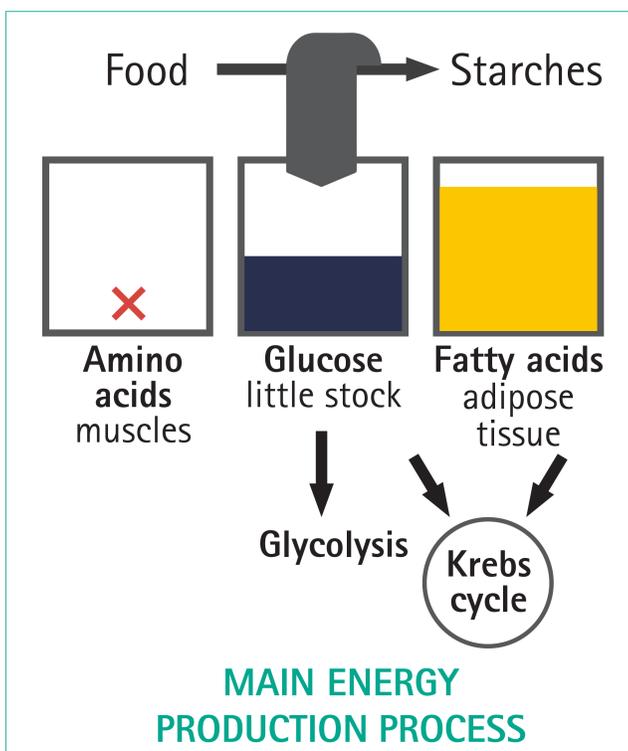
# Nutrition in ileostomates can make the difference

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**Aim:** The digestive tube is the organ where food, vitamins, minerals and water are absorbed, allowing nutrients to be used as building blocks and source of energy. Due to the ileostoma, only few nutrients can be absorbed in the large intestine thus increasing risk of deficiencies. Furthermore, some categories of food or beverages irritate the digestive tract and may cause high output or very liquid stool consistency. Accordingly, specific dietary rules must be developed and followed.

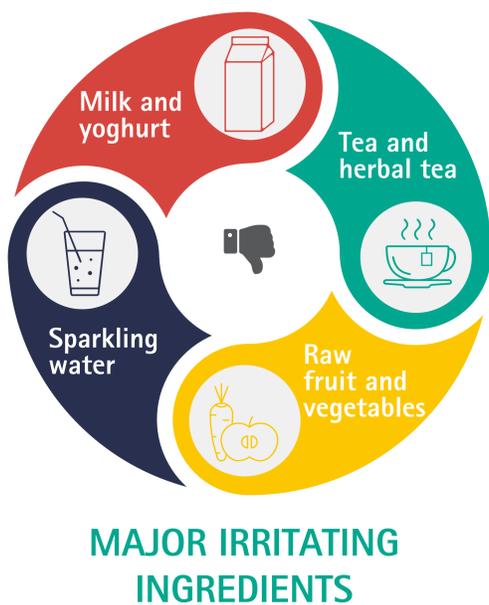
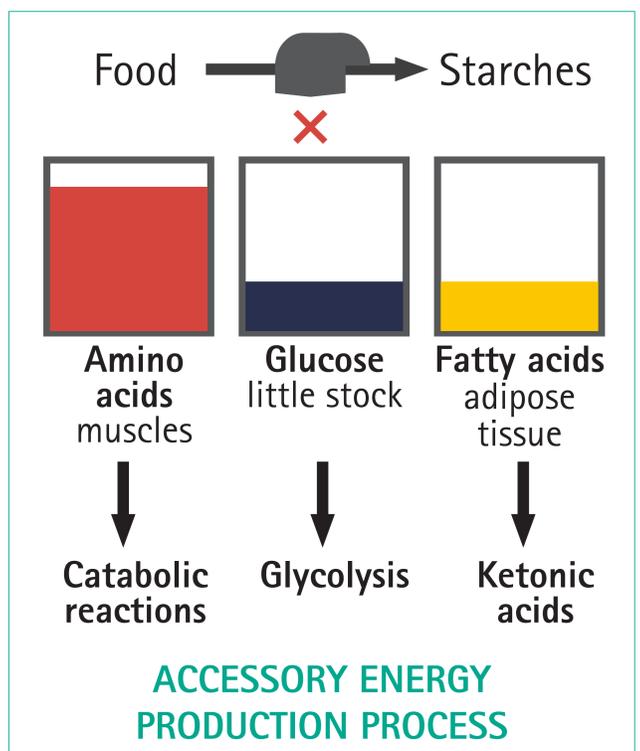
**Method:** In our Clinical Nutrition Unit, we evaluated in patients having short bowel syndrome and high outputs the effect of different nutrients on the output volume and the evolution of body weight. Then we derived from our findings a set of precise dietary guidelines to adjust to metabolic needs.

**Results:** An optimal diet must include starches three times a day. They are used as the main energy source for the Krebs cycle, thereby preserving proteins from catabolism. Moreover, it is the only food that have an optimal intestinal absorption capacity.



- Recommended starches:**
- rice
  - pasta
  - non whole wheat cereal
  - non whole wheat bread

- Starches to be avoided because of a potential irritative effect on the gut mucosa:**
- corn
  - whole wheat cereal
  - whole wheat bread
  - pulses



One year observational study with ileostomates, Clinical Unit Nutrition in 2018

CAUSES	NUMBER OF PATIENTS	AVERAGE OUTPUT WITH STANDARD DIET	AVERAGE OUTPUT WITH SPECIFIC DIET
Intestinal injuries	14	5 800 +/- 1 500 cc	3 000 +/- 700 cc
Crohn's disease	9		
Mesenteric trombosis	8		
Cancer	22		

NB: Standard diet contains dairy, sparkling salted water, fruit, fruit puree, raw and cooked vegetables... Specific diet doesn't contain irritating ingredients as dairy, sparkling water, raw fruits and vegetables and brings recommended starches three times a day with some proteins and more or less cooked vegetables.

**Conclusions:** A diet based on starches and excluding irritating foods and drinks prevents the risk of malnutrition, enhances the healing process and limits the volume of stoma output. It facilitates quick physical recovery and helps the patients on their way of psychological recovery.

References: Fulham J. Providing dietary advice for the individual with a stoma. Br J Nurs. 2008; 17(2): S22-27. Akbulut G. Nutrition in Stoma Patient: A Practical View of Dietary Therapy. International Journal of hematology and oncology. 2011; 1(21): 61-66. Brinkworth GD and al. Long term effect on a very low carbohydrates diet and a low fat diet on mood and cognitive function, Arch Intern Med. 2009; 169(20):1873-1880