

# Advice for patients with a High Output Stoma

This leaflet provides advice on ways to reduce your stoma output.

## What is a high stoma output?

If your stoma produces more than 1 litre of fluid per day, then it is considered to have a high output and you may be at risk of becoming dehydrated.

As well as obtaining nutrients from food, the bowel has an important role in absorbing fluid and electrolytes (salts). A high stoma output can lead to poor absorption of nutrients, salts and fluids, which can result in dehydration and weight loss. Most fluid is absorbed in the lower bowel. If this has been removed or is disconnected from the upper bowel by a stoma, you are more likely to experience a high output from your stoma. Depending on the length of your remaining bowel, your absorption may get better over time and your high output may decrease. However, there are several things that can be done to help this earlier on.

## Reducing your stoma output

Your stoma output may be reduced by:

1. Drinking less ordinary fluid and replacing this with an oral rehydration solution, such as diorolyte or St Marks.
2. Increasing salt intake
3. Reducing fibre intake
4. Taking medication to reduce your stoma output.

## Fluids

Drinking too much ordinary fluid (e.g. tea, coffee, water, squash, fruit juice) will increase your stoma output and make you thirsty and dehydrated. You may be advised to limit your consumption of ordinary fluid to 500-1000mls per day. Your health care team will advise you on this.

You may also be advised to take a rehydration solution such as diorolyte. This is high in salt and helps your body absorb fluid, therefore helping to reduce your stoma output and keeping you hydrated. The usual prescribed daily amount is 10 sachets of diorolyte dissolved in 1000ml water or St Marks solution which can be made as follows:

The electrolyte mix needs to be made up freshly every day. To do this you need to measure out the following powders:

- 20g (six level 5ml spoonful) of Glucose
- 2.5g (one heaped 2.5ml spoonful) of Sodium Bicarbonate (baking soda)
- 3.5g (one level 5 ml spoonful) of Sodium Chloride (salt).

This needs to be dissolved in 1 litre of cold tap water. It is recommended that you drink 1 litre of the electrolyte mix each day.

You can buy the ingredients (powders) from any pharmacy and some supermarkets or you can obtain them on prescription from your GP. They are cheaper to buy than to get through a prescription if you pay prescription charges.

**You may find the solution tastes salty. This can be improved by:**

- Storing the drink in the refrigerator and taking it chilled. It can also be frozen and taken as a slush
- Sipping it through a straw
- Adding a small amount of squash, fruit juice or cordial to improve the taste. This is best added while making up the solution rather than adding to each glass so that the salt content remains high
- Adding fresh lemon or lime juice.

### **Increasing Salt Intake**

Each day you will lose salt from your stoma and it is important to try to replace this loss by following a diet high in salt, as follows:

- Sprinkling a little salt on your meals (1/2-1 teaspoon per day)
- Cooking with salt

- Increasing your intake of the following salty foods: cheese, bacon, ham, smoked fish, fish canned in brine (tuna, sardines, salmon), meat and fish pastes, oxo, bovril, marmite, salted crisps, savoury or salty biscuits.

### Reducing Fibre Intake

Foods high in fibre are often difficult to digest and can increase your stoma output. Lower fibre foods may help to decrease your stoma output. You can limit your fibre intake by:

- Having white-based cereal products such as white bread, white rice, white pasta, white breakfast cereals such as corn flakes and rice krispies.
- Having small portions of fruit and vegetables and removing skins, stalks, seeds and pips.
- Avoiding nuts and dried fruit.

### Taking Medications

Certain medications can be used to slow down the bowel and aid absorption.

- **Loperamide:** This tablet slows down the action of the bowel, helping more fluid, salt and nutrients to be absorbed. It is usually taken four times per day and needs to be taken 30-60 minutes before eating.
- **Codeine phosphate:** This also slows down the bowel and is often used in conjunction with Loperamide. It should also be taken 30-60 minutes before eating.
- **Omeprazole or Lansoprazole:** These drugs reduce the amount of acid produced by the stomach and hence stoma output.

### Contact details:

Dietetic department: 01302 642742. Colorectal nurses: 01302 644365.  
Monday to Friday 9-5pm

## **Patient Advice & Liaison Service (PALS)**

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

### **The contact details are:**

**Telephone:** 01302 642764 or 0800 028 8059

**Email:** [dbth.pals.dbh@nhs.net](mailto:dbth.pals.dbh@nhs.net)