Eating and drinking after emergency abdominal / bowel surgery



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Returning to a normal pattern of eating and drinking following abdominal or bowel surgery will differ vastly between patients. This is because different people and their gut will respond to surgery in a variety of ways.

After an operation, the aim is to eat, drink and mobilise within 24 hours of surgery. However, this is not always possible following emergency surgery, with some patients needing to progress more slowly with the introduction of diet, occasionally starting on diet and then having to revert to fluids depending on their clinical condition.

Occasionally, patients who cannot tolerate any diet and/or need to rest their bowel for a period of time, have to commence another type of feeding called total parental nutrition via an intravenous drip. Your surgeon will explain this to you if it is required and you will see a dietician before this is commenced.

Fluid

Drinking fluids first, before returning to diet, is important to ensure that you are not sick and can tolerate fluids before re-introducing food.

These first fluids include water, tea/coffee without milk, clear fruit juice/squash.

Once tolerated we can introduce milk to your fluids; and can include smoothies, yoghurt and milkshakes and a clear soup (however these cannot contain any seeds, vegetables or pips).

Diet

You may be commenced on what's referred to as a 'light/soft diet'.

At this stage introducing small portions of food from the table below. These foods are soft to eat and low in fibre. The first few weeks after surgery it is important to avoid fibre dense foods as this helps move food and fluids through the bowel and adds bulk to the stools. Obviously, this needs to be tailored to how your gut is reacting, as you may need higher fibre foods and if you have a stoma following surgery you may need to adjust further. Information can be given from your Stoma Nurse regarding this and the type of stoma you have (see individualised section on page 3).

The table below shows foods that are considered light/soft foods (optional foods) and foods that you are to avoid at this stage of eating. When completing your hospital dietary menus, these can be used as a guide.

| Food Type | Optional Foods | Foods to avoid |
|-----------------|--|--|
| Breakfast Foods | Corn flakes, frosted flakes, rice crispies, puffed wheat, oat-based cereals; rolled oat porridge, Ready Brek | Bran based cereals – all-bran, branflakes; wholewheat cereals - Shreddies, Shredded Wheat, Weetabix; cereals containing dried fruit or nuts; granola, muesli, Crunchy Nut Flakes |

| Breads, crackers etc | White bread & rolls, english muffins, crumpets, waffles, pancakes, scones, white crackers | Wholemeal, wholegrain, granary or seeded bread and rolls, 50:50 bread. Bread/bread products with nuts, seeds or dried fruit, Wholemeal crackers |
|---------------------------|--|--|
| Starchy Foods | White rice, pasta or noodles, potatoes with skin removed, couscous, bulgar wheat, polenta, tapioca | Brown rice, pasta or noodles, wholegrains, potato skins |
| Dairy | Milk and cream, all cheeses, yoghurt crème fraiche, fromage frais | Yoghurts / cheese & alike with pips, nuts etc |
| Vegetables and Salad | Soft, cooked without peel or seeds, vegetable-based soup | Raw vegetables, seeded vegetables, sweetcorn, celery, beans, pulses, legumes, high fibre veg (mushrooms, spinach, cabbage) |
| Fruit | Soft fruits without seeds & peel - banana, peach, plum, apple; canned fruit | Citrus fruits, berries, dried fruit, fruit juice with bits |
| Nuts & seeds | Smooth peanut butter | All nuts & seeds, crunchy peanut butter, coconut |
| Meat, fish & alternatives | Lean meat and poultry, fish, eggs – not fried, Quorn, tofu, meat-based soups | Tough or fatty meats, high fat processed meats, chicken Kiev, pies/pastries, fried eggs |
| Desserts | Custard, ice cream, sponge, milk, rice pudding, crème caramel, jelly | Puddings with dried fruit, nuts or coconut |
| Snacks | Plain biscuits, cakes and scones, chocolate / fudge, sweets, crisps & popcorn | Biscuits, cakes or scones with wholemeal flour or seeds/nuts/dried fruits, oat biscuits/cereal bars |
| Drinks | Smooth fruit juice, squash, fizzy drinks, tea / coffee | |

As you recover, you should be able to increase eating and include other foods to return to a more normal diet.

Further Information

- Eat smaller meals or snacks as these will be easier to manage
- Ensure you chew your food well before digesting especially important if you have an ileostomy
- Aim to drink 8-10 glasses of fluid a day
- Try to incorporate vitamin C into your diet daily suggest a glass of fruit juice
- Avoid high fat & processed foods
- Limit your caffeine intake as this can increase bowel motility
- Consult with your doctor/dietician if you are unable to manage the light diet
- Eat regularly throughout the day to promote good bowel habit
- Incorporate protein rich foods in two of your daily meals to promote healing after surgery

Your Feedback

We want your visit to be as comfortable as possible - talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve it, then ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care.

Before leaving please complete a Friends and Family Test feedback card.

Help us transform NHS services and to support patient choice.



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

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