

Diet and Exercise

Lee Gavegan
Stomal Therapy Nurse

2026





Agenda

Diet, Exercise & stomas

Information provided in this session is a guide only.
Discuss any issues you may have with your STN / GP/
Surgeon.

Stop exercising if you have any unexplained pain and
seek medical help.



Aim

- Diet is a major concern for many ostomates!
- What is a healthy diet?
- Let's identify soluble & insoluble fibre.
- How much liquid we should drink?
- What about exercise?

Australian Dietary Guidelines 2019

1. Healthy **weight**, physically active, match nutritious food & drinks to energy needs

2. Eat from a **wide range** of nutritious foods: a) veg, b) fruit, c) grains, d) lean meats, fish, poultry, e) dairy, yoghurt, milk

3. **Limit** saturated fats, added salt, added sugar,

4. Encourage, **support**, & promote breastfeeding

5. **Care** for your food, prepare & store safely. I'd add don't waste.

Australian Guide to Healthy Eating

Enjoy a wide variety of nutritious foods from these five food groups every day.
 Drink plenty of water.



Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties



Vegetables and legumes/beans



Lean meats and poultry, fish, eggs, tofu, nuts and seeds and legumes/beans



Fruit



Milk, yoghurt, cheese and/or alternatives, mostly reduced fat



Use small amounts

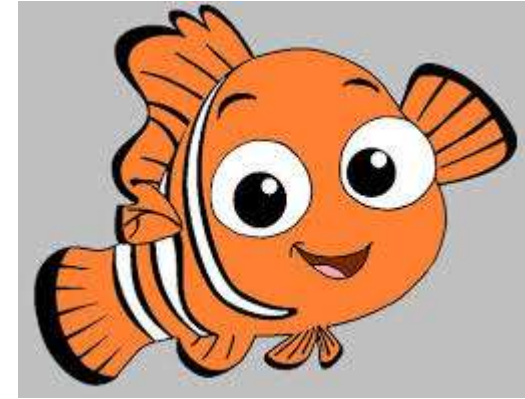


Only sometimes and in small amounts



NEMO

- + Nutrition Education Materials Online
- + Qld Government Health initiative - free
- + Select a category e.g. Gastroenterology
- + Use search table e.g. - ileostomy or
- + - colostomy





Dietary fibre

“roughage or
bulk”



What does roughage do?

Keeps internal plumbing clear

Helps regulate bowel pattern.

Eat food → nutrients for body to absorb

Body cannot absorb or digest fibre (roughage).

“Roughage”

Soluble

- + Apples
- + Barley
- + Beans (some)
- + Carrots (well cooked)
- + Citrus fruit (remove pith)
- + Oats
- + Peas
- + **psyllium**

Insoluble

- + Beans (some)
- + **Nuts**
- + Corn
- + Wheatbran
- + Whole wheat bran
- + Cauliflower, green beans, potatoes, carrots (raw or chunky)
- + Burghal wheat
- + berries

Experiment A



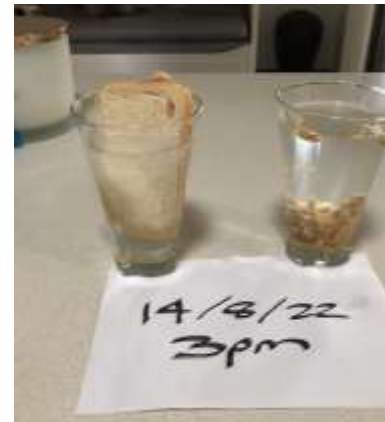
Soluble fibre

27g



Insoluble fibre

27g



250 ml H₂O

Bread & peanuts



250 ml H₂O

Bread & peanuts

Experiment B



Psyllium



**2 teaspoons &
water**



**Sucking up
water**



Set like a jelly

Soluble Fibre



Blockage

- + Cause: Foods - bean sprouts, celery, corn, coconut, mango, nuts, oranges, mandarins, stir fry veggies, whole grain foods, zucchini skin, mushrooms, dried fruits, popcorn, fruits with seeds
- + Symptoms: abdominal cramping, watery diarrhea or no output +/- vomiting. Food having difficulty passing through bowel & out of stoma
- + Have a warm shower onto your lower back, try to relax, heat pack to abdomen with care not to burn stoma (stoma has no feeling) or skin.
- + Seek medical help if this persists
- + *HINT*: chew your food well, especially ileostomates & make low fibre food choices, ↑ fluids

Gas / Wind

Cause: fizzy drinks, beer, cabbage, cauliflower, legumes, peas, radish, onion, spicy foods

Non-food causes: chewing gum, drinking with a straw, talking while eating, smoking, irregular eating times

HINT: regular meals, open fizzy drinks & allow to settle, add yoghurt daily, try changing pouch at night for fresh filter when going to bed, if wearing drainable pouch add Diamonds - odour reducing gelling sachets





Odour

- + Cause: fish, eggs, onions, garlic, beer, asparagus, beans, nutritional supplements, medications
- + *HINT:* If pouch output smelly try lubricating deodorants that aim to neutralise odour.
- + Try striking a match
- + Peppermint tea, live yoghurt culture, buttermilk

Diarrhea/High output

Cause: diet (spicy) & how your body processes food. Output mostly water, increased emptying, change from usual pattern.

Infection - C'Diff

Food poisoning

Eat banana, cheese, apple sauce, marshmallows, white rice, mashed potato, milk arrowroot biscuits, rice noodles

HINT: put marshmallows in freezer (last longer), wear drainable pouch, empty more frequently

Use gelling agent into pouch e.g. Perform



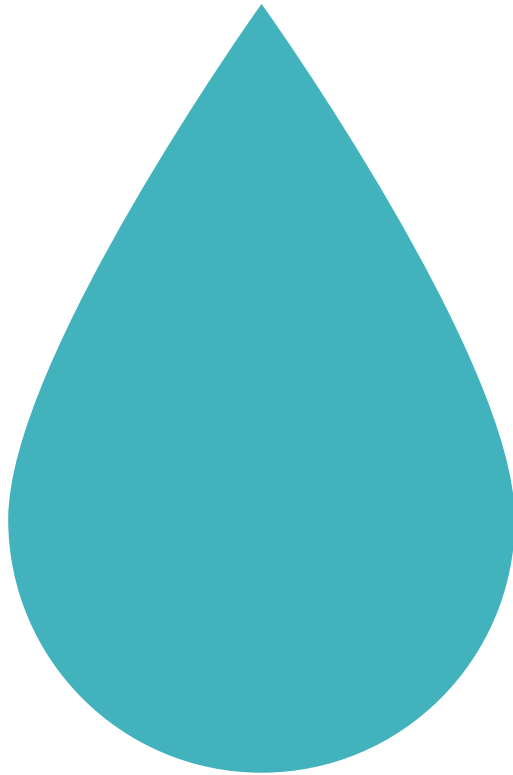


Dehydration

- + Increased emptying of pouch, change in consistency +/- vomiting risk of dehydration
- + Signs of dehydration: thirst, dark coloured urine, reduced amount of urine, weakness, lethargy, faintness, dry mouth, dry skin, muscle & abdominal cramps, confusion, headache, tingling in fingers &/or toes.
- + **Ring an ambulance** if tingling in fingers & toes a later sign of dehydration

Constipation

- + Colostomates
- + ↑ fluid
- + ↑ insoluble fibre, roughage, bulk e.g. pears, kiwi fruit, leafy veg, watermelon, rockmelon, fluid if possible, prunes, prune juice, cabbage
- + Consider liquorice or some type of food you know makes you regular
- + Gentle exercise
- + Soluble fibre like Psyllium (***)need to drink 2ls H2O***)
- + Know bowel pattern & output consistency
- + Ring STN or GP for guidance



HOW MUCH WATER?

50-70% body weight

**Individual: activity, environment,
breastfeeding, health e.g. dialysis**

Every body cell needs water

**Water removes waste in urination,
perspiration, bowel movements & lost in
breathing**

Regulates temperature

Lubricates & cushions joints

Protects sensitive tissues

20% fluid from food & drinks

mayoclinic.org



Urostomates

- + Coffee, tea, alcohol diuretics, try reducing before bed if not connecting to overnight drainage bag or try overnight drainage bag
- + Foods ↑ vit C make urine more acidic (citrus, soft berries, blackcurrant cordial), ↓ risk of UTI
- + Try limiting bananas, peanut butter or add cranberry to reduce mucous. Cranberry & Warfarin medication should not be taken together.
- + Food dye, vitamins, beetroot, spinach = colour change



Hints & Tips

Choosing healthier food options read labels e.g. diet drinks often sweetened by sorbitol. Too much sorbitol can cause diarrhea

Generally, avoid high levels of salt (sodium)

After new faecal stoma small, frequent meals, bland type food

Revisit foods again later that may have caused discomfort

Colostomate try not to eat evening meals too late

GP management plan = dietitian

Exercise

- + “Staying active regularly is essential for good physical and mental health and wellbeing. This is true no matter how young or old you are. But the amount of activity varies, depending on your age.”
- + Australian Government Dept of Health and Aged care

Sarcopenia

- + **"The Timeline of Muscle Loss**
- + **Age 30 to 50:** Muscle mass peaks in your mid-20s to 30s. Afterward, you naturally begin to lose about **1% of your muscle mass per year**.
- + **Age 50 to 60:** The decline speeds up, with people generally losing **3% to 5% per decade**. Women often experience an accelerated loss during menopause.
- + **Age 65 to 80+:** The decline accelerates to roughly **3% per year** (up to 8% per decade). Over a lifetime, individuals can lose up to 30% of their peak muscle mass if they do not actively train."
- + **Medically Reviewed.** Last updated on 04/02/2026 Cleveland Clinic



18-64 years

- + “Adults should be active most days, preferably every day. Each week, adults should do either:
 - 2.5 to 5 hours of moderate intensity physical activity – such as a brisk walk, golf, mowing the lawn or swimming
 - 1.25 to 2.5 hours of vigorous intensity physical activity – such as jogging, aerobics, fast cycling, soccer or netball
 - an equivalent combination of moderate and vigorous activities.
- + Include muscle-strengthening activities as part of your daily physical activity on at least 2 days each week.”
- + Push-ups, pull-ups, squats or lunges, lifting weights, household tasks that involve lifting, carrying or digging



65+

- + “As you get older, it’s important to do some form of physical activity every day.
- + What you do depends on your health and lifestyle. But there are easy ways to add activity to your day.
- + If you have health problems, it’s a matter of finding what works for you. Talk to your doctor about what activity suits you. For example, if you have:
 - heart problems, diabetes or asthma – you can start moderate walking or swimming
 - arthritis – you can try hydrotherapy or swimming in a warm pool
 - osteoporosis – you can try weight bearing and strength activities.”
 - Aim is 30 mins or over each day

Core engagement

- + Abdomen + spine = core
- + Abdominal muscles supporting stoma are part of core
- + Strengthening core = better posture, body awareness, reduction in parastomal hernia development, greater independence.



Chair Yoga

+ **Japan's Oldest Doctor: REVERSE Sarcopenia | 8-Step Chair Yoga for Seniors**



Lifting

- + Heavy lifting be avoided until you are comfortable
- + If lifting bend knees
- + Feet apart
- + Keep objects close to body
- + Regular lifting wear a support belt
- + STN needs to measure you for support belt



Hints & Tips

01

See GP for
Management Plan
for Exercise
Physiologist /
Physiotherapist /
Dietitian

02

See your STN for
measurement of
support garment &
help ordering

03

Look out Sarah
Russell online
education.

YouTube video

- + [Core Exercises after Abdominal Surgery](#)
- + Please check with your surgeon/GP before starting any exercises.

Youtube exercises from Me+ Recovery

The Ostomy Studio Sarah Russell

- + "Exercise" will do 1:1
- + Masters in Sport & Exercise Science
- + Runs a private oncology exercise practice
- + Author of "The Bowel Cancer Recovery Toolkit"
- + Lectures throughout the world, consults to many associations, published research & has a stoma.

Resources

- + Eatforhealth.gov.au (brochures available – see attached and good information)
- + Nutrition Australia ([<https://nutritionaustralia.org>])<https://nutritionaustralia.org>)
- + Dietitians Australia ([<https://dietitiansaustralia.org.au>])<https://dietitiansaustralia.org.au>)
- + Harvard Health (health.harvard.edu)
- + <https://www.health.gov.au/health-topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians/for-adults-18-to-64-years>
- + <https://www.health.gov.au/health-topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians/for-people-with-disability-or-chronic-conditions>
- + <https://www.dansac.com.au/enau/livingwithastoma/recoveryafterstomasurgery/theimportanceofcoreexercisewithastoma>
- + NEMO



Thank you

Lee Gavegan STN

M: 0499 980 330

E: stomaclinic@ostomynsw.org.au

ANY
QUESTIONS
?