

Managing a high output stoma

RBH stoma care department [patient information](#)

What is a high output stoma?

A high output stoma is when you experience an increased output from your stoma of more than 1.5 litres in 24 hours which is watery in consistency. This can happen if you have a colostomy or ileostomy.

It is important to manage and treat any high output from your stoma, as this can lead to dehydration, leaking, and potentially sore skin.

Why might a high output stoma occur?

- The stoma is newly formed
- The bowel is affected by disease or infection
- You have started some new medication/treatment
- Obstruction of the bowel

What are the risks associated with a high output stoma?

- Dehydration (either long or short term). The colour of your urine is a good guide to see how well hydrated you are. A clear, pale yellow colour suggests good hydration, whereas a more concentrated or dark yellow colour may indicate you are getting dehydrated
- Electrolyte imbalance (occurs when your body's mineral levels are too high or too low)
- Medication may not be absorbed (avoid enteric coated capsules/tablets if possible)
- Weight loss or difficulty maintaining a healthy body weight
- Tiredness and weakness

When you have a high output stoma, most of the fluid that is taken by mouth is not absorbed and will be passed straight out of the body, into your stoma bag. As this happens, you will feel increasingly thirsty because sodium (salt) has been flushed out and you will become dehydrated.

What can you do to reduce high output?

- Avoid high fibre foods and laxative foods e.g. wholegrain, skins of fruit and vegetables, nuts, seeds, or uncooked vegetables
- Snack between meals
- Add salt to your meals to help replace the salt you are losing from your stoma
- Avoid drinking at mealtimes and sip your drinks at other times of the day. Avoid caffeinated, sugary drinks as these over stimulate the bowel
- Additional snacks such as gelatine-based sweets e.g. jelly, marshmallows, jelly babies (sugar free if diabetic) and savoury snacks such as crisps and cheese biscuits can often help to thicken a liquid output
- Do not drink plain water
- You may be prescribed an electrolyte replacement drink (Dioralyte or Electrolyte Mix). You must make sure you take this daily as prescribed. This is a specially formulated drink which is high in salt to help your body absorb fluid and reduce losses from your stoma

Electrolyte mix

Recipe:

- 20g (six level 5ml spoonful) of glucose powder
- 2.5g (one heaped 2.5ml spoonful) of sodium bicarbonate (baking soda) if you cannot tolerate the taste then use sodium citrate powder
- 3.5g (one level 5ml spoonful) of sodium chloride (table salt)

These are then to be dissolved in one litre of cold tap water and you will need to drink the prescribed volume throughout the day. This provides 90mmol/L of sodium.

You may find that the solution tastes bitter due to the sodium bicarbonate. This can be minimised by storing the solution in the fridge and drinking it chilled. It can also be frozen and made into ice cubes and drank as slush, or a small amount of fruit juice or squash (lemon or lime squash) can be added. Sipping the solution through a straw can minimise the bitter taste. If this continues to be a problem, the sodium bicarbonate can be replaced by the same quantity of sodium citrate, which can be prescribed by your GP.

Other drinks (soft drinks, tea etc) should not exceed a total of another litre, or five cups per day.

Important: drink the electrolyte mix gradually through the day rather than drinking the full litre in one go.

Medications

The medicines prescribed for those with high output stoma perform one of two functions. They either slow down the passage of food/drink in the bowel (anti-diarrhoeal medications) or reduce the amount of fluid produced by the bowel (anti-secretory medications).

Some of the most commonly prescribed medications are listed below:

Anti-diarrhoeal medication

Loperimide (Imodium®).

Codeine phosphate.

These need to be taken 30 to 60 minutes before food to work best.

Anti-secretory medications

Omeprazole (Losec®).

Lansoprazole (Zoton®).

All the above medication can be taken by mouth. These medications are usually prescribed in much higher doses than in someone who does not have high output stoma.

For further information

Please call the RBH stoma care department

Direct line: **0300 019 4813**.

Our working days are Monday-Friday 8am-4pm with a voice mail service available.

Email: **stoma.care@uhd.nhs.uk**

The Royal Bournemouth Hospital, Castle Lane East, Bournemouth, Dorset, BH7 7DW

Author: Christina Vincent Date: July 2024 Version: One Review date: July 2027 Ref: 094/24

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