



Family/ Whānau Guide

Nutrition for children with Short bowel syndrome

Patient name:



Who's in your care team?

It is important to us that you have access to good information. This booklet outlines key information and recommendations for the nutritional management of short bowel syndrome.

If you experience any problems or have questions regarding your child's management plan please contact the care team.

Monday to Friday 8:00am – 4:00pm contact:

Home Care Team: _____

Liver/Gastro Nurse Specialist Service: 021837870 (business hours only)

Please confirm with your local team how to gain out of hours advice in an emergency:

After hours I can contact:

Your shared care (local) doctor is: _____

Your shared care (local) dietitian is: _____

Your shared care (local) nurse is: _____

Your Starship doctor is: _____

Your Starship dietitian is: _____

Your Starship nurses are: _____



What is Short Bowel Syndrome?

Short bowel syndrome is a medical condition in which the body cannot absorb enough fluids and nutrients from food/kai.

This can happen because part of the small intestine may be missing – usually due to surgery or illness, or because the intestine is not working properly.

There are two main sections of your bowel, the small intestine (small bowel) and large intestine (colon).

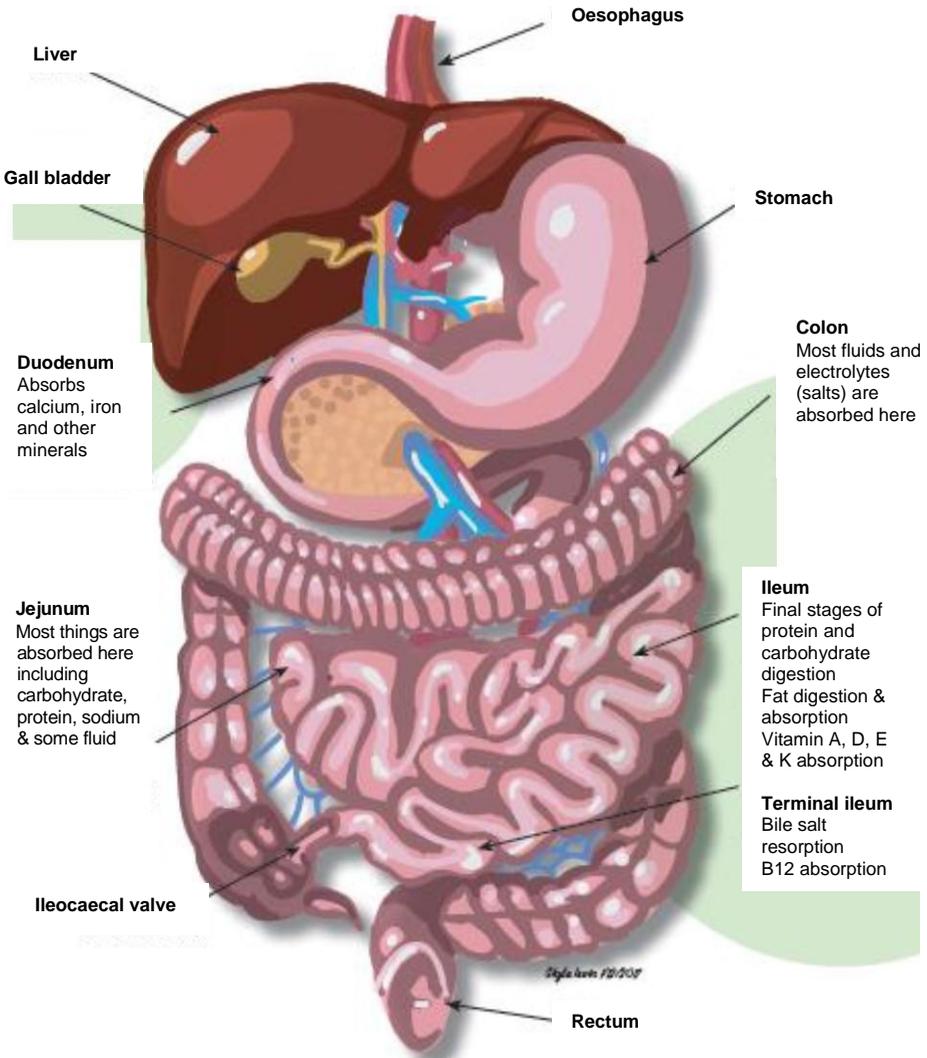
The small bowel can also be broken down to 3 sections the duodenum, jejunum and the ileum.

Problems that can occur

- Diarrhoea
- Bloating or swelling
- A lot of gas and or bad smelling bowel motions
- Poor appetite
- Weight loss or trouble gaining weight
- Tiredness
- Vomiting



Where food and nutrients are absorbed?



What should my child eat?

A well balanced diet can help your child's body to get the key nutrients it needs and can help with his or her short bowel symptoms. There are no foods that are completely excluded and no specific short bowel syndrome diet. See pages 6 & 7 for guidance.

- Please note children may be able to eat more or less of some foods and diet should be tailored to each child. Encourage them to eat slowly and chew food well

Aim to provide:

- Small frequent meals (six to eight) throughout the day as this will enhance digestion and absorption
- Meals high in protein (fish, meat, poultry, eggs, dairy products, tofu)
- Meals with a moderate amount of fat (butter, margarine, oils, mayonnaise)
- Meals high in soluble fibre & complex carbohydrates (pasta, rice, root vegetables and unsweetened breakfast cereals)
- Low sugar options (avoid sweets, soft drinks and fruit juices)

Other tips

- Limit drinks during meals. Large amounts of fluid will push food faster through the bowel, decreasing absorption of nutrients and increasing diarrhoea
- Milk and dairy products contain lactose which can cause diarrhoea in some children. We advise CAUTION, your child may tolerate some lactose but may need low lactose dairy options
- Try to eat high calcium foods * in 2 meals and 2 snacks every day
- Include high soluble fibre foods ** at each meal, including avocado, broccoli tops, oats, peeled apples, pears and oranges
- Limit high oxalate foods *** including beetroot, berries, canned beans, chocolate, nuts and spinach

If your child has diarrhoea, your child will need electrolyte replacement (extra fluids).

Your care team will develop an action plan for fluid replacement for increased losses from stomas and gastric drainage.

If output is two times normal, offer Pedialyte and contact your team for advice.



Eat and drink more often

Protein

- Meat, fish or poultry that is baked grilled poached or steamed
- Canned fish with edible bones
- Tofu
- Beans ***, peas and lentils
- Eggs
- Yoghurt * (low sugar)
- Smooth peanut butter ***

Carbohydrates

- Root vegetables (peeled potatoes, kumara ***, taro and yams)
- Fruits (banana, green banana, mango, peeled apples and pears **)
- Oats **
- Rice and pasta
- White or wholemeal bread

Fats

- Oils
- Avocado **
- Mayonnaise or smooth salad dressings

Drinks

- Water
- Flavoured water
- Oral rehydration solutions such as Pedialyte
- Low sugar sports drinks, such as Gatorade G2 and Powerade Zero
- Milk *
- Unsweetened iced tea ***

Takeaways (sometimes)

- Steamed or boiled dumplings
- Sushi
- Chicken tenders
- Burgers
- Cheese or ham and cheese pizza

Dessert/Snacks (sometimes)

- Pancakes
- Scones

Notes



Eat and drink less often

Protein

- Fried meat, fish or poultry
- Sausage and chicken skins
- Grisly or fatty meats
- Bacon and salami
- Dairy food / Yoghurt *
- Soft cheese *
- Ice cream *
- Whole or crushed nuts ***

Carbohydrates

- Muesli and high sugar/low fibre breakfast cereals
- Whole grain breads
- Sweet corn (popcorn in moderation – chew well)
- Jam, honey and sweetened nut spreads

Fats

- Butter
- Cream
- Sour cream

Drinks

- Soft drink or cordial
- Fruit juice
- High sugar sports drinks
- Sweetened iced tea
- Flavoured milk *

Takeaways

- Deep fried potato or kumara chips and wedges
- Deep fried fish, meats and hotdogs

Dessert/Snacks

- Biscuits
- Cakes
- Muffins
- Snack bars
- Lollies
- Chocolate ***

Key

High calcium foods	*
Food containing soluble fibre	**
High oxalate foods	***

If whanau are uncertain about the best food options, please feel free to ask your Dietitian for advice.



Information provided in this family guide, is a guide and not intended to replace qualified medical or professional advice. For diagnosis treatment and medication, you should consult your child's care team.

Every effort has been made to provide the most current and relevant information .



NZNIFS
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