

Tips to help with eating problems after Critical Illness

It is common to find it difficult
to eat after critical illness
and to maintain a healthy weight.

This information sheet tells you more about
these problems and tips to help you.



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Introduction

Many aspects of your life can be affected after being critically ill, and this includes how your body feels and how you are eating. It may be that you find eating more difficult than before and you may feel worried or low because of your difficulties.

Often, these problems get better as you get stronger, but you may need some help or advice while this is happening. This information sheet looks at common problems around eating after critical illness and gives you tips about what may help.

This information sheet is part of a series about nutrition and recovery after critical illness. The other information sheets look at nutrition when in hospital and when you get home. Nutrition is the term used to describe what you eat or drink to give you energy and other nutrients to help your body recover and stay healthy.

Having this information may help you to understand more about nutrition, how it can help your recovery and overcome any difficulties with eating after your critical illness. We hope it will help you and your family, but if you have any particular nutritional questions or worries about your eating or your weight, please ask your doctor for help or see if they can refer you to a dietitian. A dietitian is a registered health care professional who advises about nutrition for health and during illness.

You can check how healthy your current weight is for your height on the NHS website: <https://tinyurl.com/ICUsteps-BMI>

There are also very good self-screening tools to use to check whether you should be worried about how your low weight or poor eating may affect your health:

<https://tinyurl.com/ICUsteps-Nutrition>

Or the <https://www.malnutritionselfscreening.org/>

I don't feel hungry or I feel full very quickly when I'm eating

You may not feel like eating or you eat less than you used to eat before your critical illness. This is called 'poor appetite' and it is very common after critical illness. You may also feel full quickly when eating. This is called 'early satiety'. These symptoms mean it can be difficult to get the nutrition that you need.

Why do I have poor appetite or feel full up quickly?

It is not entirely understood why these symptoms happen after critical illness. It is thought that being very unwell causes the body to release a number of hormones. These hormones can reduce appetite signals from the brain or make our stomach empty more

—————
*You will need a diet
high in protein
and energy*
—————

slowly and so we feel fuller. If you have these symptoms and it affects how much you can eat, it means you can lose weight when you don't want to.

How can I make sure I eat enough if I feel this way?

You will need a have a diet high in protein and energy so that every mouthful makes a difference. You can do this by eating more of the right foods and drinks or by adding more energy or protein to them (which is called fortifying or enriching).

Eating 'little and often'

If you are finding eating difficult, having a full plate of food in front of you can feel overwhelming. One way to help this, is to eat smaller amounts more often during the day. You can do this by having snacks in between meals and before bed so that you eat every 2-3 hours (about 6 times a day).

Here are some high protein and energy snack ideas:

- fruit with cream/
custard
- creamy yogurt
- crème caramel
- custard tart or pot
- rice pudding
- trifle
- mousse
- cheesecake
- biscuits
- cakes
- chocolate/cereal bars
- nuts
- pâté
- cheese
- crisps
- savoury biscuits
- bread sticks with
humus/dips
- olives
- sandwiches
- small pieces of pizza
- flan
- pork pies
- pasties
- scotch eggs
- salmon/sausage rolls
- pakoras
- Bombay mix
- halva
- bhajis
- spring rolls
- crumpets/muffins
- bagels
- scones
- croissants
- toast
- breakfast cereal

Here are some other tips to help you eat:

- eat whenever you feel hungry– like having cereal at midnight
- try not to drink just before meals as this may fill you up and spoil your appetite
- avoid fizzy drinks as they can make you feel full up
- have ready-made meals in the fridge or freezer which you have either bought or made yourself, and
- a short walk before a meal or some fresh air may help you feel hungry.

How can I have more energy and protein?

If you find you can only eat small amounts of food at each meal and you need to gain weight, it can help to eat foods and drinks that are high in energy and protein. This will help you get more nutrition without having to eat more food.

If you need to gain weight, start by having full fat foods. Avoid “light” or “diet”

versions, these are not right for you at the moment if you need to have more energy.

If you have diabetes or high blood cholesterol, please ask your doctor or dietitian for advice on foods high in energy or protein that are good for you to eat.

You can also add things to foods or drinks to give it more energy or protein. This is called fortifying or enriching, and there are tips on how to do in the following section.

Tips for fortifying your foods and drinks

There are many ways to add extra energy and protein to your food. Savoury foods can be fortified, by adding:

- beans, pulses or ground nuts and seeds to soups and casseroles
- cheese, milk, milk powder, butter, margarine or olive oil into mashed potato
- butter, full-fat margarine, cheese or white sauce on vegetables
- 2 tablespoons of milk powder to a portion of white or cheese sauce
- cheese/cream/milk or crème fraîche to soup
- cream/sour cream/crème fraîche or coconut milk to casseroles and curries, and
- mayonnaise/salad cream or pesto to sandwiches or have two fillings, such as: egg mayonnaise and bacon or cheese and ham.

Sweet foods can be fortified by:

- adding cream, custard, condensed milk, evaporated milk, fortified milk, or ice cream to pies, sponge or fruit
- adding extra sugar, honey or syrup to desserts and cereals
- making jelly with fortified milk, instead of water
- adding 2 tablespoons of milk powder to a portion of porridge, milky puddings and custard, and
- adding cream, yoghurt, sugar, honey, condensed/evaporated milk or dried fruit to breakfast cereals.

If you are worried about having too much fat, or if you have been advised to lose weight, then try to include more foods which contain fats that are healthy for your heart. Fats such as rapeseed oil, olive oil, olive oil spreads, avocado, nuts and seeds are high calorie and “heart-healthy”. Ask your GP or speak to a dietitian for further advice if you are worried about gaining too much weight.

Tips for increasing your protein intake

Eating foods high in protein will help build your muscles, especially as you are getting around more and may be doing exercise. If you have a kidney disease, please ask your doctor or dietitian for advice on how much protein you should have.

Try the following to increase your protein intake:

- have high protein foods at each meal from either poultry, meat, fish, eggs, beans, pulses, soya beans, cheese or nuts
- have a milky dessert between your meals like custard, rice pudding or a creamy yogurt
- fortify your milk by adding 2oz (4 tablespoons) of milk powder (such as Marvel or supermarket own brand) to 1 pint of full cream milk. Adding milk powder gives it extra protein and more energy, and
- use the fortified milk in drinks, on cereals, in sauces and puddings.

How can I have extra energy from drinks?

There are drinks you can have which are high in energy. For example:

- Hot drinks: hot chocolate, Ovaltine/malted drinks, milky coffee, latte, cappuccino, instant soups made with fortified milk.
- Cold drinks: milkshakes with added ice cream/cream, fruit smoothie (blended fruit with milk), ice cream/yoghurt with honey/malt, ice cream soda (ice cream added to a fizzy drink), fruit juice.

You can also have special drinks that are high in calories and protein (also called nutritional supplement drinks). You may have had these recommended during your hospital stay and advised to continue them until you reach a better weight, or

you are eating full meals. If you are uncertain about how to take them, or how long for, please contact your doctor or dietitian for advice.

Nutritional supplement drinks come in a wide range of different types and flavours for example:

- Nourishing powdered drinks: Complan and Meritene are common brands. These are available from most chemists/supermarkets and it is worth trying these first before using the ready-made ones below.
- Prescription Nutritional supplement drinks: come in milkshake, juice or jelly varieties. They also come in various sizes. You may have had these in hospital and may have been told to continue them. The ones you get from your GP may have a different name (be a different brand) than those in hospital. Check with your pharmacist that they are similar (for example in protein content). If you are unsure about having these drinks, or you are not having them, but think they may help you while you are struggling with your eating or weight, speak to your dietitian or your doctor for advice.

Summary

If you have a poor appetite, or feel full quickly when you eat, this should improve in time, but choosing a diet high in protein and energy, as well as having extra snacks and nutritious drinks, will help you get enough nutrition to help with your recovery.

More information

British Dietetic Association Food Fact Sheet on:

- Malnutrition <https://tinyurl.com/BDA-Malnutrition>

NHS UK advice on:

- Malnutrition <https://tinyurl.com/NHS-Malnutrition>
- Unintentional weight loss <https://tinyurl.com/NHS-WeightLoss>

See ICUsteps information for more information <https://icusteps.org/information>

I feel sick or I am sick, so I don't feel like eating

Feeling sick (called nausea) is common after critical illness. It can happen for different reasons and it usually goes away once you begin to recover and get stronger. Being sick (called vomiting) is your body's way of getting rid of something that your stomach doesn't want or as a side effect to an illness or medicine. Sometimes feeling anxious or worried can make us feel or be sick.

How can my nausea and sickness be helped?

There are different ways that you can be helped with nausea and vomiting, depending on why it is happening and how bad it is. Most mild forms of nausea and vomiting can be managed with diet and lifestyle tips, such as the ones below.

Most mild forms of nausea and vomiting can be managed with diet and lifestyle

However, there are times when you will need to seek medical advice about sickness or vomiting. For example, if you:

- have been vomiting for more than 24 hours
- have been vomiting blood or the colour is very dark (like coffee grounds)
- have not been able to manage more than 4 cups of fluid in a day or if you have been unable to eat anything for 48 hours
- notice that your urine (wee) is dark yellow or if you have been weeing less than usual
- are feeling very weak, dizzy or confused
- are unable to take important medications or to keep them in your stomach (because you are vomiting)
- have a high temperature as well as nausea or vomiting, or
- are experiencing constant stomach pain or bloating that is not helped by being sick.

These are some of the reasons you will need to seek medical advice, but there are other ones to, so do check with your doctor or nurse if you are worried.

What should I eat when I feel sick or might be sick?

If your doctor thinks that your nausea or vomiting can be helped by diet and lifestyle, it may help if you make some changes to the foods that you eat or to when you eat.

Tips for managing nausea:

- Eat smaller meals or snacks. Try and eat them throughout the day to avoid getting full too quickly or to avoid feeling sick because your stomach is empty.
- Avoid very spicy, fatty or sweet foods as these may make the feeling of sickness worse
- Keep to plain, low fat food choices such as light meals with plain meat or fish along with plain potato, rice or pasta.
- Choose foods which are easier to eat, such as sandwiches, cold meats and chilled desserts, yoghurts and mousse.
- Try dry foods such as crackers, toast or biscuits.
- Avoid strong-smelling foods, as these may make the feeling of sickness worse.
- Let a relative or friend cook for you, that way you are not put off from eating by being around the smell while it is cooking.
- Try drinks that contain ginger (such as ginger tea and ginger beer), as this may help your stomach feel more comfortable. Peppermint or herbal tea may also help.
- Suck on ice lollies or sip cold liquids.
- Avoid drinking large amounts before a meal because this will fill you up. You can have a drink 30 minutes before or after eating, unless you feel that sipping a drink helps you while you are eating.
- Keep your mouth fresh by regular toothbrushing or by using mouth wash. This can also help with unpleasant tastes.

- Suck on sweets, particularly peppermint ones.
- Eat what you feel like eating. Don't worry if you 'go off' your favourite foods because you will want to eat them again when you feel better.

Tips for when you have been vomiting:

- After you've been sick, it's important that you have a drink to put liquid back in your body that it has lost from being sick. This means drinking small amounts often (such as water). You can do this every 10-30 minutes during the day and then build up to drinking your normal amount when you are able to.
- Once you have managed to keep the drink in your stomach, you can try eating a small amount again. Choose bland foods to begin with, such as bread, crackers, plain soups, rice and pasta. Sometimes tinned fruits can be refreshing. Continue to slowly try and eat what you normally would when you feel you are ready to.

Is there anything else that can help sickness or nausea?

There are lifestyle tips that may help you, such as:

- sitting upright for at least an hour after each meal
- getting fresh air and activity if you feel well enough
- finding ways to relax such as listening to music, watching television or doing other activities that make you feel calm - try breathing exercises, meditation or mindfulness techniques. This could help even if you can only do them for a few minutes.

Is there medicine that can help?

If your nausea or vomiting is not getting better, or you are worried about it, speak to your doctor. They may suggest you try some medicine to help (depending on the reasons for why you are feeling sick).

If you are given medicine to help with your sickness, you will be told when you

need to take it and how often. Some medicines you can take at the first sign of nausea (to help prevent this getting worse and leading to being sick) or take them before eating to help you eat and drink enough - but always check the specific advice on the medicine box and leaflet.

If the medicine you have been given doesn't seem to be working, talk to your doctor as there may be other medicine you could have.

Summary

If you are feeling sick or vomiting, this should get better in time. While you are feeling sick, it can help changing what you eat and when you eat, depending on the reason for the sickness.

More information

NHS UK advice on:

- Feeling sick (nausea) <https://tinyurl.com/NHS-Nausea>

NHS Inform advice on:

- Vomiting in adults <https://tinyurl.com/NHS-Vomiting>

See ICUsteps information for more information <https://icusteps.org/information>

I find it hard to eat because food tastes or smells different

It is common to find that taste and smell can be different after your critical illness. This may be because:

- the medicine you had while in the intensive care unit
- your body's response to the stress of critical illness
- you needed help breathing (either oxygen through a mask or being on a breathing machine), or
- you were fed by a tube through your nose.

*Eat when you
feel hungry and
choose the types of
food you feel like you
want to eat*

You might find that you have a complete loss of taste or smell or that food tastes like metal, too sweet or has a bitter or salty taste. This means that food or drink may taste different once you start eating again and this can make it difficult to eat what you need. These changes to taste and smell usually get better after a short

period of time but the following advice can help you manage it until then.

What can help me eat when I have a loss of taste or smell?

- Eat when you feel hungry and choose the types of food you feel like you want to eat.
- It may help to rinse your mouth well before eating to keep it fresh, especially if you need to use a nebuliser (a device that helps you breathe in a fine spray of liquid medicine to help your lungs and breathing) or have had oxygen through a mask.

- Sharp, strong or tangy flavours may help to make you feel like eating, so use these flavours in your cooking or as sauces.
- Sugar-free mints or chewing gum may help to get rid of any unpleasant tastes in your mouth.
- Brush your teeth, tongue and gums more often if you find that this helps.

What will help me if food or drinks taste metallic?

- It might help to use plastic cutlery to help reduce the metallic taste in your mouth.
- Try choosing acidic or tangy flavoured food and drink as this may cover up the metallic taste.

What will help me if foods or drinks taste unusually sweet?

- It may help to choose salty or acidic flavoured foods to stop the sweet taste.
- Cut down on sweet and sugary foods.
- Water down sweet tasting drinks or fruit juices with water or ice.
- Having herbal tea before meals may help.

What can I do if foods or drinks tastes unusually bitter or salty?

- Adding sweet flavours to food or drink, such as sweetener, honey, or sugar may help reduce the salty or bitter taste.
- Drinking herbal tea e.g. ginger/ mint before meals may help.

Summary

These changes in taste should settle down in time, but if you are worried about them, or these tips haven't helped and you are finding it difficult to eat, ask a doctor or dietitian for advice.

More information

NHS UK advice on:

- Metallic taste <https://tinyurl.com/NHS-MetallicTaste>
- Lost or changed sense of smell <https://tinyurl.com/NHS-Smell>

See ICUsteps information for more information <https://icusteps.org/information>

I find it difficult to swallow or to chew

It is common to find it difficult to swallow or chew after critical illness, but it can vary between people how much it affects eating and drinking. These problems are called dysphagia.

Problems swallowing or chewing might make it difficult to eat and drink what you need to help your recovery. It can also feel frightening or worrying and make you feel like you don't want to eat too often.

You might find that foods or drinks are easier to eat if they are smooth

These problems usually get better as you get stronger, but if you have problems with coughing or any feelings of choking, ask your doctor or nurse to get a speech and language therapist to see you for advice.

Why does this happen?

If you have been on a ventilator (breathing machine), you may have needed a breathing tube down your throat. This can cause swelling or weakness of your throat muscles and tissues and this affects how it feels when you have food or drink in your throat. Some of the medicines you have had can also make swallowing more difficult.

How can this affect my eating or drinking?

If you had problems with swallowing or you were not able to eat when you were in hospital, you may have been fed through a tube. These feeding tubes go through your nose and then either into your stomach or into your small bowel. If you needed feeding help for some time, you may have a different type of tube that you can keep in for a longer time.

When you are able to start eating and drinking again, a Speech and Language therapist will test how easy you find it to swallow. They will advise on what foods and drinks you would find easiest to swallow safely. They may also give some exercises to help strengthen your muscles for swallowing.

How can foods and drinks be made easier to swallow?

When we drink, we first have to hold it in our mouth, then we move it to the back of our mouth, and then we swallow it. We need different muscles in our mouth and neck to do this, and when our muscles are weak, it can be difficult to do these different steps. If this is the case, then it can help to choose food or drink that makes it easier to swallow.

You may find that foods or fluids with a certain 'mouth feel' makes them easier to chew or swallow. This is called the texture (like how thick it is or runny it is) and you may have had specific advice from the speech and language therapist about this.

You might find that foods or drinks are easier to eat if they are smooth such as pureed, soft or moist foods as these are easier to move round your mouth. These are also easier to eat if you are weak or tired, or if you find it hard to cut or chew foods. Having softer foods or foods with plenty of sauce can also make them easier to swallow. Always follow the advice from the speech and language therapist or ask to be referred if you are having difficulties with swallowing.

Thicker fluids can be easier to hold in your mouth and swallow (as thin fluids move quickly and may make you cough). Some fluids are naturally thicker (such as thick soups, smoothies or tomato juice), or you may have been advised to thicken your drinks (using a thickening powder) by your speech and language therapist. If you are having difficulties with fluids making you cough, ask to be referred to a speech and language therapist.

It can feel difficult to get used to eating different textures of food and if you are finding it difficult to swallow, you might feel like not drinking as much. But it is very important that you try to still have 6-8 cups of fluids per day to stay well. This will

help your body and your recovery. You could try:

- having a little to drink more often.
- experiment with different flavours, as you might like stronger or sweeter flavours with thicker textures.
- different temperatures (hot or cold) to see if that makes it easier for you.

It's important that you follow the advice you received from the doctor, speech and language therapist or dietitian and that you ask for help if you are unsure or finding it difficult to do.

The picture below shows different textures of food and drink. The thickness is described on a scale from zero to seven. Fluid is 0 (as it is thin) and it goes to level 4 which is very thick. Foods can be from liquidised (level 3) to an easy to chew texture (level 7). This way of describing these textures has been agreed internationally to help everyone understand it correctly for patients.



As you start finding it easier to swallow and chew, you will be advised to start choosing foods that need more chewing to start moving towards eating normal food again or drinks that are a bit thinner. Your speech and language therapist or dietitian will have information for you about good meals, snack and fluid choices.

What else might the Speech and Language therapist tell me?

Your speech and language therapist may advise you on ways that you can hold your head or chin when you swallow which could help you control foods or fluids in your mouth better. They can also advise you on exercises you could do to build the strength of your swallowing muscles.

If you are worried about your swallowing or you feel like you might choke, ask your doctor to refer you to a speech and language therapist for advice.

Summary

Swallowing difficulties should improve in time but adjusting your foods and fluids as advised by your speech and language therapist will help you continue to take enough nutrition in for your recovery.

More information

NHS UK Advice on:

- Dysphagia <https://tinyurl.com/NHS-Dysphagia>

See ICUsteps information for more information <https://icusteps.org/information>

I have indigestion

It is normal for your stomach to produce acid, but sometimes this acid can hurt your gullet (oesophagus), lining of your stomach, or top part of your bowel (duodenum). This is called indigestion or heartburn and causes pain or discomfort in your stomach or a burning pain behind your breastbone. You might have both these symptoms, or only one, and they may happen just after eating or drinking.

Other symptoms of indigestion can be:

- feeling full or bloated
- feeling sick (nausea)
- burping, or
- bringing up (regurgitating) fluid or food into higher up your stomach (the oesophagus).

Why do I have indigestion?

Indigestion can be caused by different things such as:

- some medicines (e.g. aspirin or ibuprofen)
- stress or anxiety
- physical changes, such as a hiatus hernia, stomach ulcer or reflux disease
- infections (such as *Helicobacter pylori* – a bacteria usually found in the stomach)
- smoking
- alcohol, or
- being overweight.

It is common to have indigestion after a critical illness because of the medications you may have had or just because our bodies have been through a lot of stress.

What can I do to help my indigestion?

There are different things which could help your indigestion including some of the following lifestyle changes:

- Eat 'little and often' and stop eating before you feel full.
- Try to sit down during and after eating or drinking.
- Don't wear tight fitting clothes around your stomach, for example tight trousers or belts.
- Avoid eating large meals 2-3 hours before sleeping if you find your indigestion is worse at night or when lying down.
- Sleep propped up with a pillow.
- Cut down or stop smoking and having alcohol, especially around mealtimes. Please see your nurse or doctor if you need support or advice to help you with this.
- Keep a diary for a few days when you have indigestion. This will help you to see if specific foods, drinks or eating patterns are causing you a problem.
- Losing weight if you are overweight, because extra weight around your stomach can put pressure on it and cause indigestion. A healthy, balanced diet combined with regular exercise may help you to achieve gradual weight loss. For more guidance on losing weight during recovery, see the 'Healthy eating advice for life after critical illness' of the 'Nutrition at home after critical illness' leaflet.

What foods or drinks may make indigestion worse?

Although it is difficult to give tips that will help everyone, some people with indigestion often say that some foods or drinks sometimes make indigestion worse, such as:

- rich or fatty foods – which may take longer to digest
- spicy foods and caffeine – which may irritate your stomach lining, and
- fizzy drinks– which may increase pressure in your stomach, causing acid to rise up.

What medicines may help?

Treatment will depend on the likely cause of your indigestion. You can ask your pharmacist for medicines that might help you (such as heartburn relief liquid or tablets). If symptoms carry on, speak to your doctor who may ask you to have some tests to check the cause, or who may give you medicine to protect your stomach lining and reduce symptoms.

Summary

Any indigestion you have after your critical illness should settle in time, but choosing certain foods and drinks fluids, as well as how and when you have them, could help the symptoms of indigestion.

More information

NHS UK advice on:

- Indigestion <https://tinyurl.com/NHS-Indigestion>

See ICUsteps information for more information <https://icusteps.org/information>

I have an upset stomach or bowels (diarrhoea)

It is common to have an upset tummy during and at first after critical illness. You may have stomach cramps or poo that is loose or even liquid. It will generally settle as your body slowly recovers and you get used to eating again, and as you start eating a more varied diet. Please do speak to your doctor or specialist nurse if you want more information or you are worried about it.

Why does this happen?

While you were on intensive care you will have had a lot of medication which can upset your stomach and bowels. Bowels are the lower parts of our digestive system. The stress of critical illness and the hormones that our body makes to deal with the illness, can also affect our bowels.

The stress of critical illness and the hormones that our body makes to deal with the illness, can also affect our bowels.

If you have had an operation where a large part of your bowels have been removed you may have diarrhoea. If you have a bag attached to hold your poo (called a stoma bag) you may notice your poo being very liquid. If this causes a problem for you, your medical team or dietitian can advise you on medication for this or how to change your diet a little if needed.

If you have a disease which affects your liver, pancreas or bowels, or if you had an operation on them, you may have problems with eating and digesting food. If food is not properly digested, this means that nutrients aren't properly absorbed from your food. This type of diarrhoea is called malabsorption. It means you will also have diarrhoea with urgency to poo, especially after eating. If your poo look yellow or a pale 'clay' colour, seem oily or glossy, floats and not easy to flush

away, or unusually strong smelling, you may not be absorbing fats very well (also called steatorrhoea). Speak to your doctor or dietitian who can give you advice on medications like pancreatic enzymes and how to change your diet to help. Malabsorption can cause weight loss and can cause you to not get all the important nutrients you need (such as vitamins and minerals for your bones), so it is important to speak to your doctor or specialist nurse if you want more information or you are worried.

Can changing what I eat help my diarrhoea?

As you recover from your critical illness and gradually increase the variety of what you eat your diarrhoea should get better. Generally, you shouldn't need to make big changes to what you eat or drink. This is the time to try and eat enough and not limit your choices because you need food to help your recovery.

However, you might want to make small changes to help you while your stomach is upset. The following things may help you get enough food without upsetting your tummy too much:

- eat 'little and often'
- try to relax when you are eating because being nervous or anxious may make it worse
- plan ahead when you go out so that you have little snacks to hand of foods that you know will not upset your stomach
- cut down or stop caffeine (in coffee, tea and some fizzy drinks), alcohol and smoking because this will affect your tummy
- if you feel that certain foods or drinks make your diarrhoea worse (like rich or fatty foods), a dietitian can advise you further so ask to be referred, especially if you are losing weight, and
- it may be helpful to keep a diary for a few days of when you have diarrhoea and what foods or drinks you have had. This will help you to see if specific foods, drinks or when you are eating is causing you a problem.

Sometimes, changing what you eat for a short while may help your diarrhoea, but this is mostly if you have a bowel condition. You may hear people talking about

having less roughage (such as wholemeal foods) for a while. This may be helpful for some people but shouldn't be continued long-term without advice from a dietitian.

It is very important that you drink enough if you have an upset stomach. This is important so you don't feel unwell because you haven't drunk enough to replace what you are losing from having diarrhoea.

If you have had a lot of antibiotics, you might think about having products to help healthy bacteria (also called microbiome) in your stomach. There are many different products available in either drink, powder or tablet form that will give a dose of microbiome (generally called a probiotic). There are also other products or foods that help microbiome grow in the bowels (called prebiotics). They may help with diarrhoea, but if you have bloating, they may not be the best choice for now. If you decide to try these products, do discuss this with your doctor, nurse or dietitian because there are some situations where this may not be a good idea (like if you have active bowel disease or where you have a higher risk of having an infection).

What medicines may help?

You can buy tablets from a pharmacy to help your diarrhoea. If it is an ongoing problem, you may have been advised to take these if you go to the toilet and you have an upset stomach. These can work well but talk to your doctor or nurse if you find you need to take them often.

There are also some oral rehydration fluids or powdered products available if you are finding it difficult to have enough to drink because you have severe diarrhoea. Discuss this with your doctor or nurse because these products have salts and often sugar in them and so if you have a health problem such as diabetes or with your kidneys, it might not be a good idea to have them.

Summary

Diarrhoea can happen after a critical illness and usually gets better by itself. It can help to avoid foods that upset your tummy for a short time. You may need medicine to help, and your doctor will be able to advise you on that. As your stomach settles, you will be able to eat a varied healthy diet which will help good digestion and your bowels to work normally.

More information

British Dietetic Association Food Fact Sheet on:

- Probiotics <https://tinyurl.com/BDA-Probiotics>

NHS UK advice on:

- Dehydration <https://tinyurl.com/NHS-Dehydration>

See ICUsteps information for more information <https://icusteps.org/information>

I find it difficult to have a poo (constipation)

It is common to have problems going to the toilet after critical illness and this includes problems with having a poo. If this happens often, you could have constipation. Signs of constipation include:

- having a poo less than three times a week
- difficulty and pain when having a poo
- having to strain a lot when having a poo
- poo that is like small hard pellets, and
- feeling that you haven't been able to get all the poo out.

What can cause constipation?

To understand what causes constipation, it is helpful to know how poo is made. The food which you eat is broken down in your stomach. Any liquid and food moves from the stomach into the first part of your digestive tract (called the small bowel) which is where nutrients and energy is taken up by the gut lining. This leaves some food that can't be used by your body and it goes into your large bowel. This is mixed with fluid in your body and forms poo. To help the poo come out of your body, your large bowel has muscles which tense up and relax to push it towards your rectum (bottom) until you have the feeling that you need to go to the toilet.

Constipation can happen after critical illness because of all the medications you had or because of the stress your body has been through.

You might also get constipation if:

- there is not enough water in your poo, which makes it very hard to push out
- muscle contractions in the large bowel are too slow or weak, which means the poo doesn't move through your body quickly. This means poo can stay in the same place for hours or days and make it drier and harder.

The good news is that there are many things that can help constipation, including exercise and what you eat and drink.

What can I eat to help constipation?

The main type of food to help constipation are those that are high in fibre. Fibre is the part of plant foods that cannot be absorbed into the gut lining and so it provides bulk to poo. It can help constipation by making each poo bigger but also by acting like a sponge, absorbing water into the poo, which makes it softer and move through your body more easily.

The main type of food to help constipation are those that are high in fibre

Many of us don't eat enough fibre, so it is important to increase fibre intake slowly while your body gets used to it. It also helps to drink enough when having more fibre. This also helps food to go through your body and helps the poo to be softer. Try and drink a glass of water with every meal.

There are two types of fibre which can help constipation:

- Insoluble fibre which helps to provide bulk to the stool and is often called 'roughage'. It is found in foods such as wheat bran, vegetables and whole grains.
- Soluble fibre dissolves in water and helps slow down how the food goes through our body, which means it gives us energy for longer. This fibre is found in:
 - oats, barley or rye
 - fruits such as apples, pears, blueberries and citrus fruit
 - vegetables such as broccoli, cauliflower, cabbage, sweet potatoes, avocado and onions
 - seeds and nuts, such as pumpkin and sunflower seeds and most nuts, and
 - flaxseed, linseed and chia seeds.

Tips to eat more fibre

Try and get fibre from different foods to help you have a balanced diet. You can do this by swapping some of the food you usually eat to foods with more fibre. Some simple swaps could be:

- choose a higher fibre breakfast cereal such as porridge oats, shredded wholegrain cereals or whole-wheat biscuits
- choose wholemeal or granary breads or seeded white breads
- choose brown pasta or brown rice
- add pulses, such as lentils, beans or chickpeas to stews, curries and salads
- include vegetables with every meal, and keep the skin on vegetables if possible (for example, carrots and potatoes)
- have more fruit, which can be fresh, tinned or dried fruit, and
- add 1 tablespoon per day of flaxseed, linseeds or chia seeds into cereals, yoghurts or soups. Remember to have an extra glass of water for every tablespoon taken.

It is very important that you have more to drink as you add more fibre into your diet. This also helps food to pass through your body and helps the poo be softer. Try and drink a glass of water with every meal and have at least 8 glasses per day. See the section on 'I'm not drinking enough' for tips to help this.

Does exercise help constipation?

Exercise can help constipation by helping food move through your body. In particular it can help the muscles which move poo. When you are first home from hospital after being critically ill, it can feel very tiring just beginning to move around again, so you may not be able to do extra exercise straight away. As you get stronger, you can gently start by adding in a little bit more activity, which could be walking around the house or outside, or by doing exercises in your chair. Keep slowly increasing your activity and that will help your constipation.

What else can help me if I am constipated?

Find out the best time of day when you are likely to want to go for a poo. For many people this can be 15-20 minutes after you have eaten breakfast. Try to find 10 minutes when you won't be interrupted to try to go. However, whenever you feel like you might want to poo during the day or night, go to the toilet. It's important not to ignore that feeling or leave it until later.

Going to the toilet is something we can often do easily, so it can feel strange to have to think about it and learn how to do it. But many things are different when recovering after a critical illness, and it can help to have tips to help you at this time. These tips can help your constipation when you are on the toilet:

- Check your sitting position on the toilet: If possible, put your feet on something to make you sit with your knees slightly higher than your hips. Lean forward with your forearms resting on your thighs and with your back straight.



- Find out which muscles you will use: It is your waist muscles that help to push stools out of your bottom. Place your hands either side of your waist and cough. Can you feel the muscles work? When you push down you need to feel these muscles expand (move out slightly).

Remember:
*This will take time
and practice*

- Relax: Lower your shoulders. Breathe slowly and gently. Try to release all your stomach muscles and breathe so that your tummy moves in and out instead of your chest. Now push down to try to poo.

- Do not hold your breath (so do not take in a big breath first and then hold onto that breath).

- Slowly move out the muscles at your waist. You can put your hand on your waist to see if the muscles are moving. Then push from your waist downwards and backwards into your bottom, ensuring that your muscle in your back passage is relaxed and open. Do not strain.
- Relax for one second, but only slightly while you still keep some pressure at your waist without pushing with it.
- Push outwards and push downwards again. This should be repeated.

Remember: This will take time and practice. Do not spend more than 10 minutes on the toilet. Only go back to try to have another poo that day if you have the feeling that you want to poo.

What medicines may help?

If you have tried these suggestions but you are still constipated, you could try taking medicine to help you. These are called laxatives and they work by softening your poo to make it easier to go to the toilet. They are best to only take for a short time and you can stop taking them when your constipation is better, and you are going for a poo more often each week. Laxatives can be bought at a pharmacy or prescribed by your doctor.

Laxatives may be taken as a tablet by mouth (orally) or they may be a tablet which goes into your bottom. These are called suppositories. There are different types of laxatives, so speak to your doctor to find out which is best for you (and check they won't affect other medicine you are taking). It is important that you drink enough when you are taking laxatives.

If your constipation continues, or you often need to take medicine to help it, speak to your doctor.

Summary

If you have problems with constipation, it may help to eat different foods, drink more, look at how you go to the toilet and exercise. If you need medicine, there are several different types that your doctor will be able to advise you on. As you get stronger after your critical illness, you will be able to eat a varied healthy diet which will help good digestion and your bowels to work normally.

More information

NHS advice on:

- Constipation <https://tinyurl.com/NHS-Constipation>

British Dietetic Association Food Fact Sheets on:

- Fibre <https://tinyurl.com/BDA-Fibre>
- Wholegrain <https://tinyurl.com/BDA-Wholegrains>

See ICUsteps information for more information <https://icusteps.org/information>

My tummy feels swollen or bloated

Bloating is when your tummy feels swollen and looks bigger. It can happen after eating or gradually build up through the day. It can be uncomfortable or painful and your tummy can feel full.

If your stomach or tummy often feels bloated, it could be because of:

- too much excess wind (gas)
- not having a poo regularly (constipation)
- swallowing air or gas from fizzy drinks
- if you eat a food that causes a reaction in your body (a food intolerance or an allergy), or
- a condition such as irritable bowel syndrome (sensitive digestion which affects the way your bowels work).

What changes can I make in my diet to help this?

Making changes to your diet can help or stop bloating. Changes that might help are:

- Not eating too much at a time as being too full can make your tummy feel uncomfortable.
- Chewing your food more. This can make it easier for you to break down food and make it go through your body more easily. Chewing more means you don't swallow so much air. Also, it makes you eat more slower which can stop you from eating too much in one go.
- Eating 5-6 smaller meals/ snacks per day, so you don't get too full at any one time.
- try not to miss any meals or eat late at night.
- Eating less fat. Fatty foods can take longer to go through your body and means your stomach is full for longer, and this can cause bloating. Ways to have less fat include:

- eating less fried or creamy foods
 - taking fat that you can see off meat before you cook it, and
 - grill or oven bake foods rather than frying them.
- Hot drinks can help food to go through your body more easily, but drinks such as too much coffee can make bloating and stomach problems worse. Try to only have 2-3 cups a day of drinks with caffeine in them. Instead try mint or fruit teas or decaffeinated tea and coffees.
- Cutting down on what alcohol you have as this can also make stomach problems worse.
- Certain foods can make you have more wind (gas). If this wind stays in your stomach (and it doesn't pass through your body and come out as wind) it can make you feel uncomfortable and bloated. There are some foods which might give you more wind, so try to cut down on foods such as:
 - beans and pulses
 - vegetables such as brussels sprouts, cauliflower, garlic, onions, cabbage, leeks, mushrooms
 - fruit such as apples, cherries, and
 - some artificial sweeteners such as xylitol, sorbitol and mannitol which are commonly added to sugar-free products like fruit squashes, mints or chewing gum.
- If you cut down these foods, but it doesn't help your bloating, you can start eating them again.
- Eating more soluble fibre. You could eat more oats or oat bran (such as oat based breakfast cereal or porridge) or try adding linseeds or flaxseeds (starting with ½ tablespoon a day and building to 1 tablespoon twice a day as required). Make sure you drink an additional 200ml water with each tablespoon of seeds that you add so that you don't get constipated.
- Consider trying probiotics. There are many different products available in either drink, powder or tablet form (generally called a probiotic). Choose a product high in bifido bacteria and try it for 1 month. If it doesn't help, you can stop having it.

What else can I do that may help?

There are lots of things that affect how our stomach and gut works, including how we feel and the relaxation or exercise we do.

Lifestyle tips to try are:

- Noticing how stress affects you and your body. In some people, stress slows down how food goes through your body, which can cause bloating, pain and constipation or it can cause an upset stomach and diarrhoea. Stress can make you not feel like eating, or it can make you gulp air. It can be difficult to avoid all stress but having ways to help you manage the stress can be really useful. For example, when you are tense, practise slow breathing or mindfulness exercises. If you are feeling very anxious, stressed or unhappy then it may help to try and calm yourself before eating. Try to keep mealtimes happy and relaxed and put off any difficult conversations until after a meal.
- Wear clothes that are not too tight around your waist, as these can increase the pressure on your stomach and make it harder for wind to pass along normally.
- Avoid swallowing extra air. It can help to:
 - cut back on chewing gum
 - eat and drink more slowly
 - chew your food more
 - don't smoke, and
 - make sure your dentures (false teeth) fit well if you have them, because this may affect how you chew and swallow your food.
- Having a warm bath, and spend time soaking, and relaxing. The heat of the bath can help a sore tummy. Doing this and finding other ways to relax can help you feel less stressed and this helps your stomach.
- Consider counselling to talk about the things that you are finding difficult or stressful. There may be things about your critical illness that you are upset about and need support with.

Exercise and massage might help bloating and wind. For example:

- If you are able, try to move about regularly. If you are able to walk, get up to stretch your legs and tummy regularly (at least every hour). Stretching out by lying flat may also help you.
- Try to take regular exercise to help food to move through your body. This may be a walk if you are able to, or other movement exercises that you can do.
- Yoga poses may help if you can do them and if it is safe for you to do so. Certain yoga poses can help you release wind from your stomach. Poses such as Child's Pose, Happy Baby Pose, Knees to Chest pose and squats can all help pass wind through your bowels and out.
- Gently, but firmly, massage your lower stomach from right to left to release trapped wind. Ask a doctor before trying this if you have had any surgery on your stomach.

Are there any medicines that may help?

If these tips haven't helped, you can try medicines to help your bloating. There are different options such as:

- peppermint oil capsules, which can work by relaxing the gut muscles, allowing gas and poo to move along more easily. If you get heartburn you may want to avoid taking extra peppermint. Talk to your doctor or nurse about this if you are unsure
- antispasmodics. These help the gut to relax so they can help wind to come out
- antacids. These can help to reduce heartburn and can also affect your bloating, and
- anti-flatulence treatment. These can help to reduce the pressure of trapped wind and help your stomach feel more comfortable.

Ask your GP or pharmacist for more information about what medicines might help you.

If your bloating continues, you are losing weight, or have pain and diarrhoea with it, speak to your GP. There may be a reason for your bloating such as food allergies, intolerance or Irritable Bowel Syndrome.

Summary

If you have bloating it may help to eat different foods, drink more, look at how you go to the toilet and exercise. If you need medicine, there are several different types that your doctor will be able to advise you on. As you get stronger after your critical illness, you will be able to eat a varied healthy diet which will help good digestion and your bowels to work normally.

More information

Guts UK! Wind, burping, flatulence and bloating: <https://tinyurl.com/GutsUK>

NHS Beat the Bloat: <https://tinyurl.com/NHS-Bloating>

NHS UK advice on:

- Stomach ache: <https://tinyurl.com/NHS-StomachAche>

British Dietetic Association Food Fact Sheet on:

- Probiotics <https://tinyurl.com/BDA-Probiotics>

Mayo Clinic. Belching, intestinal gas and bloating: Tips for reducing them:

<https://tinyurl.com/MayoClinic-Gas>

See ICUsteps information for more information <https://icusteps.org/information>

I'm not drinking enough

It is important that you drink enough during your recovery from critical illness. When we don't drink enough, it can make us tired, dizzy, confused or give us headaches. If you are older, this might mean that you could have a fall or and your skin may be thinner. If we don't drink enough, this is called being dehydrated. If you are dehydrated for a long time, it can lead to problems which might need medical treatment.

How can dehydration happen?

Dehydration happens when you use or lose more fluid than you take in. As well as not drinking enough, things that can cause dehydration are:

- being sick
- having an upset stomach (Diarrhoea)
- having a temperature (38C or more)
- having diabetes that is not well controlled
- sweating after exercise or during hot weather
- medicines that make you wee more (called diuretics)
- drinking too much caffeine
- drinking too much alcohol. It is recommended not to regularly drink more than 14 units per week (14 units is equivalent to a bottle and a half of wine or five pints of export-type lager (5% abv) over a week), and
- difficulty in drinking enough, for example if you are confused and don't want to drink or if you find it difficult to swallow.

If you are finding it difficult to drink enough, speak to a healthcare professional.

The main way to know if you are dehydrated is if you feel thirsty. Other signs to look out for include:

- if your wee is dark yellow or smells strongly
- if you wee less than you usually do, or don't wee much when you do go to the toilet

- feeling dizzy or lightheaded
- having a headache
- having low energy and feeling tired, and
- having dry skin, mouth, lips or eyes.

Everyone needs different amounts of fluids every day, but as a rough guide, try to have 30-35 ml of fluids per kilogram of body weight per day. So, for a 70kg (11 stone) person this would be about 2000-2500ml (about 3.5 to 4.5 pints), whereas for a 50kg (8 stone) person this would be about 1500-1750ml (about 2.5 to 3 pints) a day.

If you are sweating more (e.g. in hot weather or after exercise) or have some of the risk factors for dehydration (on page 38), then you may need to drink more than this amount.

However, if a healthcare professional has advised you not to drink too much (for example, because of a medical condition), then you should follow their advice.

How can I drink enough?

Having enough to drink is important. These tips may help you:

- Water is a great option, but you can drink other things as well. Liquid foods such as soup, ice cream or custard also help you get liquid in your body. However, remember that some drinks (fizzy drinks, fruit juice, smoothies) can be very high in sugar and should not be drunk too often, especially if you are concerned about weight gain or blood sugar control. You can add water to fruit juice down to make it lower in sugars.
- Keep a reusable water bottle with you and sip it and refill it often. Some drinking bottles have markings on them to show you how much you could drink each hour.
- Set yourself drinking goals each day, such as drinking a glass of water at the beginning of each hour, or a glass of water before each meal.

Summary

Drinking enough is important as it helps our bodies work well. Try to drink enough each day, but if this is difficult or you are worried, please discuss this with your doctor.

More information

British Dietetic Association Food Fact Sheets on:

- Fluid (water and drinks) <https://tinyurl.com/BDA-Fluid>
- Alcohol facts <https://tinyurl.com/BDA-Alcohol>

NHS UK advice on:

- Alcohol <https://tinyurl.com/NHS-AlcoholUnits>

See ICUsteps information for more information <https://icusteps.org/information>

My hair, nails or skin are different

It is common to have changes to your hair, nails or skin in the months after your critical illness. You might find that:

- your hair is different, or it is falling out more than usual (this is also called alopecia)
- your nails are different, such as ridged, brittle or flaky, and
- your skin is dry or flaky.

All this can feel a worry if you don't know that it happens after critical illness, and it can be upsetting. Your skin, nails and hair should recover in time.

Your skin, nails and hair should recover in time.

Why do I have changes in my hair, nails or skin?

This can happen after critical illness because of the physical stress your body was under, emotional distress, and the medicine that you had. Hair has the second fastest growing cells in your body but during critical illness, it was not a priority for your body to grow hair or nails and skin. The effect of this is sometimes only seen a few months after your illness.

Hair changes are also more common in some medical conditions. Hair loss can be common in some families or happen because of taking some medicines such as beta-blockers, blood thinning tablets, chemotherapy, immuno-suppressants, and hormone therapy. Speak to your doctor or pharmacist if you are worried. Where hair loss happens due to a critical illness, it usually grows back within 6 months or a year. Hair can often grow back straighter, curlier or thinner than before.

Changes in nails and skin can also happen because of medical conditions, but like with hair, long periods of not getting enough energy or protein during a critical illness, as well as not having enough to drink can affect their growth. If you have dry or itchy skin, it can help to use a moisturiser regularly.

Can I change my diet to help my hair, nails and skin?

Generally, your hair, skin and nails will improve as you get recover from critical illness and taking medicine or vitamins won't be able to make that quicker. However, there are things you can do to make sure you have the right food and drink to give hair, nails and skin what they need. Tips are:

- A healthy balanced diet is very important to help your body grow healthy hair, nails and skin. This must include enough protein to help recovery and healing.
- B vitamins (Folate, vitamin B12, Riboflavin, Biotin, Niacin) are important for the growth of hair, nails and skin and you can get these by eating a healthy diet with different foods in it.
- Taking Biotin (vitamin B7) vitamins could help brittle nails.
- Having more iron rich foods or supplements, as well as good intake of vitamin C to help absorption, may help hair and nail health.
- Drinking enough water is important for hair, nail or skin cells to grow well.

Summary

Changes in hair, nails and skin happen because of their growth was affected during critical illness but in time this should get better. A balanced diet will give your hair, nails and skin what they need to grow well.

More information

British Dietetic Association Food Fact Sheet on:

- Skin health <https://tinyurl.com/BDA-Skin>

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With thanks to the working group and reviewers: Anouska Baker, Danielle Bear, Mina Bharal, Ruth Chinuck, Emma Gaskin, Carmen Hodgkiss, Tom Hollis, Katie Johnson, Emma Leech, Jennifer Leyland, Judith Merriweather, Lucy Morgan, Gemma Naidoo, Katy Stuart, Ella Terblanche, Liesl Wandrag.

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