

Dietary Management – Low Residue Diet

Two days before your procedure you should eat a low residue (fibre) diet. This reduces the stool residue in the bowel.

The main sources of fibre in the diet are cereal products, vegetables and fruits. When following a low fibre diet, intake of these foods needs to be reduced. It is important to have regular meals and a varied diet which includes foods such as meat, poultry, fish, eggs and dairy products (milk, cheese, yoghurt).

It is important to drink plenty of fluid and at least 8-10 cups of water, tea, or squash per day. This helps to flush the bowel contents out and will improve the effect of the bowel preparation. It will also prevent you from becoming dehydrated.

Food Choices	Dessert Choices
White bread Pastry (white flour)	Milk puddings, stewed apple and custard, apple pie, sponge pudding and custard. Mousses, plain or set yoghurts
Corn and rice breakfast cereals eg. Corn Flakes, Rice Krispies	Jelly Lemon Curd Honey Marmite
White rice White and tricolour pasta	Fresh, peeled fruit (NO PIPS OR SEEDS) Tinned fruit (Maximum of 2 portions per day)
Biscuits made with white flour eg rich tea, custard creams, shortbreads, cream crackers	PLEASE DO NOT EAT RED/PURPLE JELLIES
Cake made with white flour eg sponge, Chicken/White Fish	Drinks which are allowed
Potatoes without skins, sweet potatoes without skins, green beans, swede, cauliflower, pumpkin, parsnip, turnip.	Flavoured water/ Lemonade/ Squashes/ black tea/ black coffee/Oxo/ Bovril or other meat extract cubes/clear soup. Boiled sweets are allowed.

MENU IDEAS

BREAKFAST	Cornflakes / Rice cereals White bread toasted / egg - (little butter) (DO NOT EAT WHOLEGRAIN CERALS e.g. Weetabix, porridge, bran flakes)
LUNCH	Chicken soup with white bread/ Chicken or Ham sandwich/ Egg on white toast.
EVENING MEAL	White bread with ham /cheese (little butter) or boiled potatoes(without skins) cauliflower, turnip Small amount of chicken / white fish. White rice/pasta

ADVICE TO PATIENTS TAKING ORAL BOWEL CLEANSING AGENTS SAFELY AND EFFECTIVELY.

You have been supplied with an oral preparation which is a bowel cleansing agent (sometimes called “bowel prep”). The purpose of this is to clear out your bowels and ensure safety and effectiveness of the planned endoscopic procedure. There is a risk of developing dehydration, low blood pressure or kidney problems with this medication. The person prescribing the oral bowel cleansing agent will have assessed your risk and identified the most appropriate medication for you. You **MAY** require a blood test to check your kidney function. You will have been informed if this is the case.

Always refer to the manufacturer’s instructions when taking your preparation. The following conditions apply in all cases:

- The bowel prep will cause diarrhoea and urgency so you will need to stay close to toilet facilities. If after taking your bowel preparation you have not had your bowels open within 7-8 hours overnight, please seek medical advice as soon as possible.
- Make sure that you drink plenty of water up to 2 hours before your test as the bowel prep can cause dehydration. Do not drink coloured juices or milk.
- If you experience symptoms of: dizziness or light headedness (particularly on standing up), thirst or reduction in passing urine, then you may be dehydrated and should seek medical attention.
- Diabetic patients should contact the diabetic clinical nurse specialist (refer to separate information sheet) if further advice is required.

Do not take any other medication at the same time as you are taking the bowel prep. This is because all bowel cleansing agents cause diarrhoea. If medication is required, it should be taken either one hour or more before taking the cleansing agent or 1 hour or more after taking the cleansing agent. **There may be medicines which you are asked to stop taking and these include:**

- Heart/Blood pressure tablets e.g. Lisinopril, Ramipril, Perindopril, Captopril, Losartan, Candesartan, Irbesartan, Valsartan;
- Diuretics (Water tablets) e.g. Furosemide, Bendroflumthiazide, Spironolactone, Amiloride, Co-Amilfruse, Bumetanide, Metolazone, Indapamide, Eplerenone;
- Anti-inflammatory drugs;
- Tolvaptan: Used for progressive Autosomal Dominant Polycystic Kidney disease or conditions causing low sodium.

Please check the manufacturer’s leaflet for a list of ingredients and allergies