



COLOSTOMY INFORMATION



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TIPS FOR COLOSTOMATES

ODOUR?

- ↪ Pouch deodorants are available from ostomy supply stores.
- ↪ Adding parsley, buttermilk and yogurt to your diet may help to reduce odor of the stool.
- ↪ Burning a candle or match in the bathroom may help reduce odor when emptying your pouch.
- ↪ Adding some mouthwash to your pouch after emptying may help reduce odor next time you empty.
- ↪ Make sure the bottom of the pouch is clean after emptying.

LEAKS?

- ↪ You may need to empty/deflate your pouch once during the night so it does not overfill and cause a leak - too much gas will blow your pouch off!
- ↪ Has your stoma shrunk or enlarged? A pouch opening that is too large or too small can cause the pouch to leak.
- ↪ Do not wash your pouch out vigorously. Too much water or too vigorous cleaning can cause a leak. The reason water is added to the pouch is to loosen sticky stool and facilitate draining the pouch.
- ↪ If wearing a belt on your appliance, make sure that it is not riding up and pulling the pouch up and off.
- ↪ Snug-fitting clothes or underwear may reduce the capacity of the pouch and cause leaks.
- ↪ Have you gained or lost weight? This may change the contour of your abdomen and the way your pouch is fitting. Book an appointment to see the E.T. nurse to have your stoma re-measured.

SKIN PROBLEMS CAN BE AN ISSUE

- ↪ If an issue with the skin persists beyond 2 pouch changes, call E.T. to make an appointment for an assessment.
- ↪ Make sure size of opening in pouch corresponds to stoma size. It is okay if a small amount of skin shows between the pouch opening and the stoma as long as the skin remains healthy. If the stool is very loose, the exposed skin can become sore and inflamed.

SPARE SUPPLIES

- ↪ Always carry a spare pouch for the unlikely event that the pouch leaks (and a clip if you have a pouch with a clip on the bottom).
- ↪ Suitable carrying cases include eyeglass cases, cosmetic bags, shaving kits, etc. If you keep spare pouches in the car, replace them periodically as heat may damage and deteriorate the product.
- ↪ An elastic band can secure a pouch if you lose your clip - adhesive tape will not.

RECTAL DRAINAGE?

If you still have your rectum, you may periodically feel a sensation of pressure. You may have to pass some old stool and/or mucous. Don't be alarmed as this is normal.

TRAVEL TIPS



- ↪ Ask your ET Nurse for names of ET's in the area you are planning to visit.
- ↪ Carry your ostomy supplies with you in your carry-on luggage in case your checked baggage gets lost.
- ↪ Take extra supplies in case you experience any problems with your pouches.
- ↪ If going to tropical climates, you may need to change more often.
- ↪ Try to keep supplies in a cool place.

SPLASHES?

To prevent “splashing” in the toilet bowl, cover the water in the toilet bowl with toilet paper before emptying your pouch.

SPORTS



- ↪ Some sports may require the added support of an ostomy support belt.
- ↪ Golf, weight lifting, sit ups all exert stress on the abdominal muscles and may require some additional support - check with your ET Nurse.

SHOWERING, BATHING AND SWIMMING

Once you are steady on your feet again, you can resume daily showers. Tub baths and swimming are also okay once your incisions have all healed. You can bath or shower with your pouch on. Always check the tape on your pouch after showering or swimming to make sure it is secure.

On the day you are going to change your pouch you may remove the pouch before showering. Water will not harm your stoma.

DRYING YOUR APPLIANCE



After showering or swimming, a blow drier on low/cool setting may be helpful to dry the tape on your appliance.

DRIVING YOUR CAR



You should not drive your car for 4 to 6 weeks following your surgery. Prior to driving, sit in your parked car with your seatbelt on, and press down hard on the brakes as you would in an unexpected situation, if you experience pain with this, you probably should not be driving. Check with your doctor prior to driving again.

DRUG RELATED TIPS FOR COLOSTOMATES

1. Advise your pharmacist of your recent surgery and that you have a colostomy so they may personalize your treatment protocol. It is a good idea to keep an up to date list of any medications or supplements/vitamins you are taking.
2. Respect all drugs, both prescribed and over-the-counter medications. Discuss any new medications/vitamins etc with your physician and pharmacist.
3. Your pharmacist will advise you which medications to take with food (in order to decrease GI irritation) and which should be taken on an empty stomach.
4. Beware of certain antibiotics:
 - a) Many antibiotics can cause diarrhea by altering the normal bacteria in the gut.
 - b) Some broad-spectrum antibiotics can cause fungal infections of the skin around the stoma.
 - c) Take all antibiotics as directed by your pharmacist, and continue for the full course of treatment.
5. The ostomate and vitamins.
 - a) If on a bland or restricted diet, vitamins may be used to supplement your diet.
 - b) Usually, supplemental vitamins are unnecessary if diet is adequate.
 - c) Vitamins can sometimes produce a strong odor.
6. Laxatives:
 - a) Colostomates may use laxatives or softeners in the event of constipation. Bulk producing laxatives or stool softeners are used by some ostomates. Check with your physician, pharmacist, or E.T.
 - b) If using Tylenol with Codeine or other narcotic pain medication, you will require a softener or laxative as well to prevent constipation. Constipation can contribute to pouch issues and sometimes even development of a hernia around your stoma.

A FEW WORDS ABOUT HERNIA PREVENTION

Healing after bowel surgery continues long after discharge from hospital. The skin surface heals quickly but there are layers below the skin that require days and weeks to completely close. Straining the abdominal muscles before healing is completed may cause a hernia around the stoma or along the incision.

A hernia occurs when the intestine protrudes through a weak area in the muscle layer. This creates a bulge under the surface of the skin either along the incision or more likely, around the stoma. A bulge around the stoma is a parastomal hernia; a bulge along the incision is an incisional hernia. Once a hernia has developed it does not spontaneously go away. It may disappear when the individual is lying down but will show itself again when the person is sneezing or coughing or sitting/standing. The hernia creates a rounded bulge which can interfere with the adhesion of the pouch. If the hernia causes pain or obstruction, surgery may be required to repair the opening so the bowel cannot protrude. However, surgery does not guarantee the hernia won't recur.

It is very important to take measures after surgery to prevent a hernia. The muscle layer needs to heal without undue strain or pressure. Check with your surgeon and/or ET nurse before increasing physical activity.

Hernias are not always preventable but the following measures may be helpful:

- **Avoid** activities that strain the abdominal muscles for 8- 12 weeks after surgery. This means no lifting anything heavier than a light bag of groceries (3 litres of milk), no picking up children or pets, no vacuuming or lawn mowing. Continue using the method shown in the

hospital for getting out of bed – do not sit bolt upright but turn onto your side, lower your legs over the edge of the bed and use your arm to push your upper body into a sitting position. As you are able, resume your daily routines; walking is a good way to gradually increase your level of activity. Try to maintain good posture at all times.

- **Support** the abdominal wall when coughing or sneezing. The pressure inside the abdomen increases greatly during a cough or a sneeze and this pressure can make a hernia more likely. Place hands over the stoma and the incision and gently but firmly brace the abdomen during coughing or sneezing.

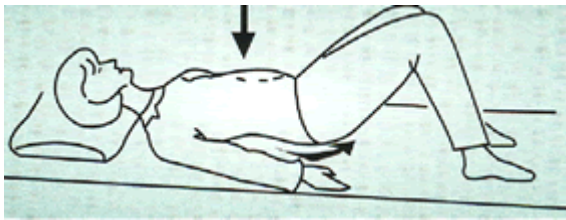
- **Wear** a support belt as you resume increased physical activities. In some cases the ET nurse will recommend a support belt be worn during and following your hospitalization. An ET nurse can fit you for a wide elastic belt that provides abdominal support and support around the stoma. It may be necessary for a belt to be altered to fit your body shape. A customized panty girdle is usually more comfortable for women. Belts are not covered by Pharmacare but may be covered by DVA or third party insurance. A support belt is essential if a hernia has developed; the elastic applies pressure around the stoma and can prevent the hernia from enlarging.

- **Strengthen** your abdominal muscles - use the enclosed exercises **with the approval of your surgeon.**

ABDOMINAL EXERCISES FOLLOWING STOMA FORMING:

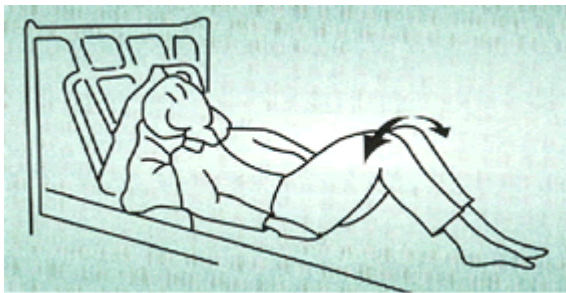
Pelvic Tilting

1. Lie on your back on a firm surface with knees bent and feet flat on the bed.
2. Pull your tummy in, tilt your bottom upwards slightly whilst pressing the middle of your back into the bed and hold for 2 seconds.
3. Let go slowly.
4. Repeat 10 times daily.



Knee rolling

1. Lie on your back on a firm surface with knees bent and feet flat on the bed.
2. Pull your tummy in and keeping your knees together, slowly roll them from side to side.
3. Repeat 10 times.



Abdominal sit ups

1. Lie on your back on a firm surface with knees bent and feet flat on the bed.
2. Place your hands on the front of your thighs and pull your tummy in.
3. Lift your head off the pillow.
4. Hold for 3 seconds, and then slowly return to starting position.
5. Repeat 10 times daily.



(Taken from Thompson, M.J. Trainor, B. (2007) Prevention of parastomal hernia: a comparison of results 3 years on IN Gastro-intestinal Nursing Journal 5(3):22-28. Images reprinted with kind permission from Respond Plus.)

POUCH CHANGE

Your pouch should not leak, however should you have an unexpected leak, you may follow this procedure to apply a new pouch. You will not cause any harm to your stoma.

You will need:

- New pouch
- Garbage bag
- Warm water
- J-cloths or 3 ply Kleenex or clean cloths
- Toilet paper
- Mirror may be helpful

STEPS	WHY YOU DO THEM
Remove paper backing from skin barrier and adhesive tape of new pouch.	So pouch is ready to apply.
Empty pouch before starting.	It keeps your garbage cleaner.
Gently remove old pouch and put it in the garbage. Save clip.(if you use one)	Gentle removal of adhesive and skin barrier is easier on your skin.
Clean around stoma with soft cloths to remove excess drainage.	To remove any stool from skin.
Wash skin well with warm water - no soap.	Soap can leave a residue on the skin and cause irritation.
Dry skin around stoma well.	The adhesive will not stick if the skin is wet.
Look at skin around stoma, use mirror if needed.	To make sure your skin looks healthy. If not, let your nurse know.

STEPS	WHY YOU DO THEM
Look at stoma.	To make sure it is pinky-red and moist. It bleeds easily when rubbed so a little blood when cleaning is normal - do not be alarmed.
Make sure skin around stoma is still dry.	Skin barrier does not stick to anything wet.
Use one hand to hold skin up and the other hand to bring pouch opening underneath stoma.	To get a good position under the stoma and get rid of skin creases so pouch stays on better.
Centre the pouch opening over stoma.	To make sure the skin barrier covers the skin around your stoma.
When pouch is in place, press your hand over the pouch for a minute. Smooth tape out.	The warmth of your hand and body give the pouch a good seal around your stoma.
Don't forget to close the bottom of the pouch; Velcro, lock and roll, or the clip if your pouch has one!	A reminder so you won't have any leaks.

Note:

- It is best to stand while applying your own pouch.
- If you have someone that can centre the pouch over your stoma, lie flat on the bed for ease of application.
- If using *any extra ring or seal* around the opening in the pouch, stretch to fit and press to mold it into place.
- If using *Stomahesive Paste*, apply paste around opening in pouch - may not need entire ring, just "blobs" of paste to correspond to dips or creases around stoma. Let paste dry 10-15 mins as there is alcohol in the paste which may irritate the skin. If using *Coloplast strip paste*, you don't need to let it dry.
- If using *Stomahesive Powder*, only apply to weepy skin and wipe any excess powder off dry skin as the pouch backing and tape will NOT stick to dry powder.