For further information or help with any stoma questions contact your STN or visit www.stomaltherapy.com and click on “Find a STN”

Disclaimer   The information in this brochure:
• has been developed as a general guide only
• relates to adults only
Any concerns need to be discussed with your STN or doctor

Prepared by the Australian Association of Stomal Therapy Nurses Inc. Education and Professional Development Subcommittee   www.stomaltherapy.com

References:
• Dansac (nd) Hints & Tips – Ileostomy
  Hints & Tips – Colostomy (Booklets)

Review due 2019
Level 1V Evidence (Expert Opinion)
Your stoma:
- may change in size in the few weeks following surgery as the swelling subsides: measure your stoma periodically during this time to ensure that your appliance continues to fit snugly
- may move or wiggle from time to time due to the normal movement of your bowel
- has no sensation when you touch it
- may bleed a little at times when you clean it – this is normal

Your skin around the stoma:
- should be the same colour and texture as the rest of the skin on your stomach, so if you notice:
  - redness, unusual irritation, itching, in-growing hair or an uncomfortable feeling around the stoma, check your skin as these could be the first signs of a problem. Ask your Stomal Therapy Nurse (STN) for advice
  - any marked changes in the stoma length or if you have a bulge around your stoma, make an appointment with your STN or doctor

Your Stomal Therapy Nurse (STN)
- Know where your nearest STN is based – Hospital or Community
- A follow-up appointment is usually made prior to your discharge
- A copy of your discharge letter may be provided
- Always phone for an appointment prior to attending the hospital
- Take your emergency kit with you to the appointment

Medications:
- Always advise your doctor and pharmacist that you have a stoma
- Ask what effects any new medication may have on your stoma
- Watch your output to ensure the medication does not pop into the pouch, especially if you have some diarrhoea
- If you have an ileostomy you should not take slow release medications

Resuming activities:
- Increase activities gradually as energy improves
  - Wear hernia prevention garments if suggested and measured by your STN
- Engage in your usual social activities as soon as possible – it increases your confidence and self esteem
- You can swim with your appliance on – place an adhesive dot over the filter if these are supplied with your pouches

Going into hospital
- If you are being admitted, take your equipment and supplies with you as the appliance you are using is unlikely to be available
- Ask nursing staff to advise the STN of your admission

Management review
- A review of your stoma and stoma care by a STN should be conducted:
  - within 2 – 6 weeks after discharge from hospital
  - at any time if problems occur
  - at least every 1 – 2 years
- Colostomy irrigation may be an alternative management option for some people who have a permanent colostomy. Talk to your STN
Storing supplies:

- When you first arrive home from hospital, put all of your supplies and any written instructions for changing your appliance in one area, likely to be the bathroom.
- Store your appliances in a cool place away from direct sunlight.
- Rotate your stock to keep them fresh, including in your emergency stoma kit, but don’t stockpile.
- You may be able to change to a pre-cut base once your stoma size settles so you don’t want extra, unused supplies on hand.

Travelling:

- Always carry an emergency stoma care kit with you when you go out. Include a spare appliance, wipes and plastic bag.
- Rotate the products in your kit regularly to keep them ‘in date’.
- A ‘nappy sack’ is a scented disposal bag ideal for disposing of pouches if in a public toilet. These can be purchased from a supermarket or chemist.
- Use the disabled toilet to make changing easier – a card confirming your eligibility is available from your Association.

For longer journeys:

- Cater for a possible tummy upset – take some drainable pouches and include thickening medication (anti-diarrhoea) in your kit.
- Ask your STN or Association for a TRAVELLING OSTOMY CARD with your details, appliances used and contact number of your STN.
- Divide your ostomy supplies between your hand luggage and regular luggage in case your luggage is lost.
- Do not put scissors in your hand luggage when flying. You may need to pre-cut spare base plates if you use these.
- When travelling overseas, take more supplies than you expect to use (can be taken out of their boxes to reduce space).

Changing your appliance:

- You can bath or shower with your appliance ON or OFF. There is no guarantee that your stoma will not function, but once a pattern is established, you may find a satisfactory time of day or evening when it will be safer to bathe with the appliance off if you wish.
- Establish a regular routine for changing your appliance – this is best done when your bowel is least active e.g. prior to breakfast.
- Never wait for leakage to occur before changing your appliance – usually if you can smell faeces, the appliance has leaked.
- Always wash your hands before and after attending to your stoma.
- Remove the appliance, empty if possible, place in a disposal bag and discard into the rubbish bin.
- Your stoma is not sterile. Wash the stoma and surrounding skin with plain soap and warm water, then dry the skin.
- Check that the skin around your stoma is the same colour and texture as the rest of the skin on your stomach.

Your appliance may:

- be a one or two piece (base plate / wafer and pouch) appliance.
- never be flushed down the toilet: it will cause a blockage.

A. Closed (non-drainable) pouch

- Best changed when it is a third to a half full.

B. Drainable pouch

- Should be emptied when it is a third to a half full.
  - Place toilet paper in the toilet to prevent splashing or drain into a toilet paper-lined container (e.g. ice-cream container) then empty into the toilet.
  - Ensure you close the open end when finished.

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- Check that the skin around your stoma is the same colour and texture as the rest of the skin on your stomach.
• You may notice a trace of blood when cleaning the stoma – this is NORMAL
• Allow plenty of time to change your appliance
• Do not let your appliance become too full before emptying it. One third to a half full is a good guide
• The stoma should be re-measured regularly to ensure the correct size of opening is still being used
• Remember that the opening on the base plate / wafer or appliance should expose no more than 2mm of skin around your stoma. Too large an opening can cause skin soreness and leakage under your base plate / wafer. Too small an opening may cause the stoma to become swollen, ulcerated or bleed
• If you choose to bath / shower with your appliance off, remove the appliance and clean around the site with plain soap and water using a soft washcloth. If you choose to bath / shower with your appliance on, check if the filter needs to be covered with the ‘spot’ supplied with your appliance
• Avoid the use of bath oils, talcum powder or creams as they will interfere with the adhesion of the appliance. Plain soap and warm water is the best cleanser for around the stoma
• Keep hairs around the stoma trimmed or shaved (electric or razor). Hold a tissue, toilet paper or soft cloth over the stoma whilst shaving to protect it. Note any ingrowing hairs
• Clothes pegs are ideal for holding your clothes away while changing

Removing sticky residue / buildup:
• Adhesive remover wipes or sprays may be used
• A capful of vinegar in a cup of water is also useful to remove residue and build-up on the skin if pouches are not sticking well

Gas / Wind Formation:
• Can be decreased by avoiding gas producing foods and drinks as well as chewing food well with a closed mouth
• It is advisable to try small portions of food at home to determine what foods give you wind
• Pouches with gas filters are recommended – these are designed to neutralise odours as gas / wind is passed from the pouch
• Ensure the filter does not get wet in the shower by covering with the ‘spot’ supplied – if required (don’t forget to remove afterwards)
• People who swallow air or do not burp very often will pass more gas into their pouch
• Discuss these problems with your STN. There are appliance gas suppressants in tablet and liquid form available that may help
• Eat well-balanced meals to create a regular bowel pattern

Deodorants:
• May not be necessary with modern appliances
• Review the foods in your diet if your output is offensive – see the brochure: Food and fluids for the person with a colostomy / ileostomy
• Deodorant drops are available to place in your pouch to try to reduce odour

Ordering your appliances:
• Learn the name, diameter, type of appliance and skin protection you are wearing, as it makes ordering easier
• Always keep some supplies on hand in case of delays with your order arriving
• Do NOT over-order – products are too costly to stockpile
• See Managing your stoma supplies for more information (available from AASTN website, your STN or Association)