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

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:

Acknowledgement: Omnigon

Review due 2019
Level 1V Evidence (Expert Opinion)
What is a parastomal hernia?
A protrusion of abdominal contents through a weakened area of muscle. This area is usually where the muscles have been cut or separated to allow the stoma to be formed.

What makes you think you might have a hernia?
A bulge under or around your stoma, especially when you increase the pressure in your abdomen eg when you stand up, sneeze, cough, strain to pass urine or to lift objects. Getting in and out of bed if you use a sitting-up motion first can be enough to increase the pressure. The bulge may subside if you lie down. It may appear suddenly or over time and may vary in size. It may be emotionally distressing.

You may also experience discomfort, dull or sharp pain, a feeling of heaviness or dragging, and the size and shape of your stoma may change. You may note a change in the output of your stoma. With the change of body shape, the appliance you are using may not adhere as well, leading to leaks.

If any of these symptoms arise, contact your Stomal Therapy Nurse (STN) to discuss your stoma care.

Can hernias be prevented?
Currently No – up to 50 % of people who have a stoma develop a hernia. However, there are things you can do to reduce the risk

1. Eat a healthy, well balanced diet, including proteins, vitamins, minerals and water for healing and muscle repair
2. Think about the things that increase abdominal pressure:
   - Sit up or get out of bed by rolling onto your side with your knees bent and use your hands to push yourself upwards as you swing your legs over the side

What to do if you think you have a hernia

- Give added support to your abdomen with your hands when you sneeze, cough or laugh
- Seek and use treatments if you have hay fever
- Stop or reduce smoking so you don’t have to cough
- Don’t lift a child or pet, basket of washing, groceries or tools etc. for the first 6 – 8 weeks after surgery. Pushing or pulling objects may be just as difficult
- If you have to lift something, face the way you want to go, bend your knees and don’t hold your breath
- Restart gentle exercises and activities, especially walking, as soon as you feel able and your STN or Surgeon has agreed
- Gain and maintain an ideal body weight
- Seek dietary advice from your STN or dietitian if you have difficulty maintaining soft stools
- Seek medical advice if you are straining to pass urine or have respiratory conditions causing you to cough

Most hernias are not treated surgically but this can be discussed with your Surgeon