What Is a Colostomy/ lleostomy?

An ostomy is a surgically created opening in the abdomen for the discharge of body waste.

After the ostomy is created, you will expel or release waste through a stoma.

- ► Ostomies that discharge stool are called ileostomies or colostomies.
- ► An ileostomy is an opening in the **small** intestine.
- ► A colostomy is an opening in the **large** intestine.

Your stoma is the end of the small or large intestine that can be seen protruding or sticking out of the abdominal wall. It is the new site where stool will leave the body and be collected in the ostomy pouch. The size and location of your stoma depend on your specific operation and the shape of your abdomen.

Most stomas are similar and may:

- ► Stick out of the body, usually an inch or less above the skin
- Vary in size
- ► Be round or oval in shape
- ► Be red and moist (similar to the tissue inside of your mouth)
- ► Have no feeling. You will also have no control over stool passing through, so you will need to wear a pouch over the stoma.
- ▶ Be slightly swollen for the first weeks after the operation and then shrink to their permanent size



WATCH VIDEO

Ostomy Home Skills Program:
Welcome and Your Colostomy / Ileostomy





Your Ileostomy/ Colostomy Operation

Who Needs an Ostomy?

Disease or injury such as cancer, trauma, diverticulitis, inflammatory bowel disease (Crohn's and ulcerative colitis), or certain birth defects may be the reason an ostomy needs to be created. The ostomy will reroute the stool to a new opening on the abdomen.



WATCH VIDEO

Ostomy Home Skills Program: Your Operation

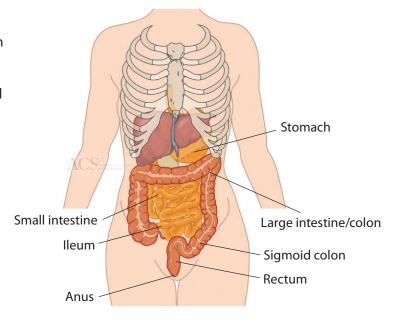


Understanding Your Digestive System

Food passes from your mouth through your esophagus to your stomach. The stomach breaks down food into small pieces that move into the small intestine.

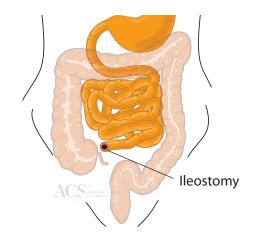
In the small intestine, enzymes break down food into a thick liquid. The intestine absorbs nutrients, vitamins, and water. The material then moves into the large intestine, called the colon. In the colon, water is absorbed from the stool. It becomes thicker as it moves

through the parts of the colon. Stool passes from the colon into the rectum and is expelled through the anus. Your operation will bring either the small or large intestine to the surface of the abdomen.



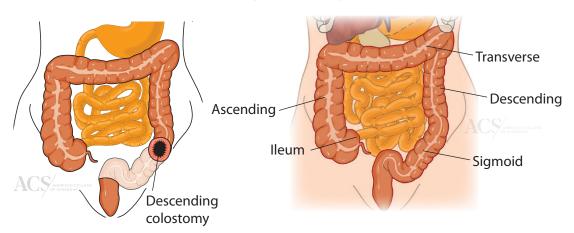
lleostomy

An ileostomy is the opening created by the surgeon to bring the small intestine (ileum) to the surface of the abdomen. An ileostomy may be temporary or permanent. Since the small intestine is no longer attached to the colon, less water is absorbed. The stool that comes out of your stoma will be more liquid (similar to oatmeal or applesauce). Immediately after surgery, the stoma output may be watery and should get thicker over time.¹



Colostomy

A colostomy is the opening created by the surgeon to bring the colon (large intestine) to the surface of the abdomen. There are various kinds of colostomies, each named for the location in the colon where the ostomy is formed. They are ascending, transverse, descending, or sigmoid colostomy. A colostomy may be temporary or permanent. The stool consistency and activity (how often the stool will pass) will vary depending upon the location of the stoma. When the stoma is closer to the rectum (descending and sigmoid), the stool is more formed and it may only pass from the stoma once or twice a day. A stoma that is closer to the small intestine (ascending and right transverse) will have watery to semi-pasty stools.



Sample

Pouching System

Pouching systems are made up of a skin barrier and the pouch. The skin barrier protects the skin around the stoma and provides the adhesive seal. The pouch collects and holds the stool.

Pouching systems come available in many forms:

- ► One- or two-piece systems
- ► Pouches that are clear (transparent) or opaque (cannot see through)
- ► Pouches that are drainable (for long term wear) or not drainable (one-time use)
- ▶ Skin barriers that are cut-to-fit (often used immediately after surgery) or pre-cut
- ► Skin barriers are available as flat or convex (shaped)

Your ostomy nurse will help you decide the best fit for you.



WATCH VIDEO

Ostomy Home Skills Program: Pouching Systems



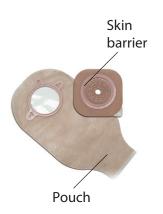
One-Piece System

In a one-piece pouch, the pouch and skin barrier are attached together.



Two-Piece System

In a two-piece system, there is a skin barrier with a flange (rim) and a separate attachable pouch. The skin barrier adheres to the skin. The pouch attaches to the barrier with a snapped flange or adhesive seal. Flange sizes are made to fit exactly to a specific pouch.



Drainable Pouch

A drainable or open pouch allows stool to be emptied at the bottom. You do not need to remove a drainable pouch to empty. The pouch can remain in place for several days. Drainable pouches are easy to empty and are an option for people with ostomies that need to be emptied several times a day.



Closed-End Pouch

A closed-end pouch has no opening at the bottom. The pouch is removed when 1/3 to 1/2 full and you throw it away. A new pouch is applied. It is generally used for a person with a colostomy. Closed-end pouches are available in one-piece or two-piece systems.



A closed-end pouch is often used:

- ▶ When the pouch does not have to be emptied often
- ► For convenience while traveling
- ▶ During intimate moments (because it is smaller and has no clips or closures)
- ► While swimming

Barrier Shape

You will need a pouch barrier that fits your stoma type. Some stomas lie flat with the body, others sink in or extend out. Your barrier (convex or flat) will help you have the best seal around the stoma. Your ostomy nurse can help you with the correct fit.





Sample

Pouch Closure

A clamp or roll-up-and-seal method is used to close a drainable pouch.

ROLL AND SEAL

The pouch is sealed by folding or rolling the opening, usually three times in the same direction. Then, either press across the opening or use Velcro® tabs that secure around the closure.



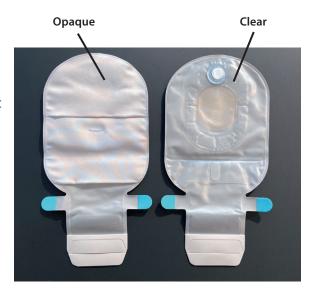
CLAMP CLOSURE

When using a clamp, be sure to wrap the end or tail piece around the clamp, and tug on the clamp once while holding the bag to make sure it doesn't slip off. Clamps usually last a month or longer.



Pouch Colors

Some pouches are clear or transparent, and others are opaque (you can't see through them). While in the hospital, your pouch will most likely be clear or transparent. When you get home, you may prefer to switch to an opaque pouch.



Pouch Sizes

Pouches can be small or large. The size you need depends on the amount of output that you produce as well as your personal preference. An ileostomy produces watery output and needs to be emptied more often, so a larger pouch may be needed. Colostomy output is more formed, so a shorter pouch may work. A mini pouch is smaller and less visible under clothes. The mini pouch may be convenient during intimacy and exercise.



Pre-Cut or Cut-to-Fit Barrier

A pre-cut barrier means that you order the size that fits closely around the stoma. A cut-to-fit barrier means you have to measure your stoma size and cut the opening in the barrier to match. Right after your operation your stoma is swollen and continues to decrease in size over several weeks. A cut-to-fit is most common right after your surgery as the stoma size changes.



Pouch with Filter

Some pouches have gas filters. This allows gas to pass from the pouch and keeps the pouch from expanding. The filter can eliminate odor. Filters typically do not work well once they get wet. If you bathe or swim, you may have to cover the opening with a cover or waterproof tape.



Pouch Closure

POUCH BELTS AND WRAPS

A pouch belt or wrap may provide extra support. Some are made specifically for water sports. If you choose to wear an ostomy belt or wrap:

- Attach the belt so that it lies evenly against your abdomen and lies level with your stoma.
- ► The belt/wrap should not be so tight that it cuts into or leaves a deep groove in your skin.
- You should be able to place one finger between the belt and your abdomen.







POUCH COVERS

Pouch covers are lightweight, soft coverings that go over the pouch. They come in a variety of colors and prints. They may reduce heat and moisture caused by the pouch resting against your skin.



Additional Ostomy Resources

Resources

American College of Surgeons Ostomy Home Skills Program and E-Learning Course

facs.org/ostomy | 1-800-621-4111

Wound, Ostomy and Continence Nurses Society (WOCN®)

wocn.org | 1-888-224-9626

United Ostomy Associations of America (UOAA)

ostomy.org | 1-800-826-0826

American Society of Colon and Rectal Surgeons (ASCRS)

fascrs.org

American Urological Association (AUA)

auanet.org

American Pediatric Surgical Association (APSA)

apsapedsurg.org

American Pediatric Surgical Nurses Association (APSNA)

apsna.org

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