

**Ask Our Nurse**



# Urostomy



**This booklet has been produced in conjunction with the Community Specialist Nurse Team at Respond Healthcare.**

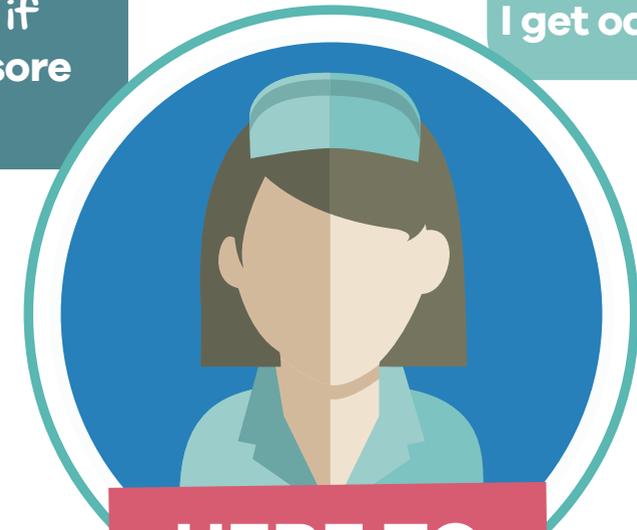
0800 220 300  
0800 028 6848 N.Ireland  
Respond Healthcare Ltd  
hello@respond.co.uk  
respond.co.uk  
f respondltd  
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What if I get a hernia?

What if I get an infection?

What if I get sore skin?

What if I get odour?



**HERE TO  
ANSWER YOUR  
QUESTIONS**

# What if

## you get bleeding on or around your stoma?

### What is bleeding on or around your stoma?

When your stoma was formed, a piece of bowel was brought out onto the surface of your tummy through your abdominal wall. This piece of bowel was then folded back upon itself to form your stoma, rather like when you turn over the cuff of your jumper, so the inner surface or lining of your bowel is now on the outside. This inner surface has lots of superficial blood vessels which can bleed easily, because of this a small amount of bleeding when cleaning around your stoma is normal.

### What can cause bleeding on or around your stoma?

- Trauma, often the result of over diligent cleaning techniques
- Friction
- Clips or stitches around your stoma
- Ulcers
- Granulomas\*
- A ruptured blood vessel

*\*Granulomas are warty growths around the base of your stoma. They probably occur as a reaction to the continual friction from your stoma pouch. Granulomas are harmless but can be tender. Their persistent bleeding can sometimes hinder the application and adhesion of your pouch.*

## Hints and tips



- Remember, gently does it. Soft cleaning wipes and warm water are all you need to clean around your stoma
- The use of OstoZYME odour neutralising pouch lubricant on the inside of your pouch can help to prevent friction
- Sometimes ulcers on your stoma can occur when you have been poorly or stressed and will usually clear up as your health improves
- Make sure that you have at least a 1mm clearance between your stoma and the pouch to prevent friction occurring
- You may wish to apply a thin layer of stoma paste, a stoma seal or a collar around the base of your stoma for added protection
- Apply cold pressure. A small bag of ice is ideal if you have a specific bleeding point on your stoma. Seek urgent medical advice if this does not stop the bleeding

### See your doctor or stoma care nurse for advice regarding:

- Treatment of granulomas, a ruptured blood vessel or ulcers on your stoma
- Excessive bleeding
- Blood coming from the inside of your stoma where your waste normally comes from



# What if you get a parastomal hernia?

## What is a parastomal hernia?

A parastomal hernia is a bulge or swelling around or underneath your stoma. The hernia usually develops slowly and may increase in size over time.

## What can cause a parastomal hernia?

When a stoma is created, the end of the bowel is brought out onto your tummy through the muscle of the abdominal wall. This process can cause a weakness or gap in the abdominal muscle. Sometimes a loop of bowel bulges through that gap causing a hernia to develop.



## Hints and tips



### In the weeks following your stoma surgery:

- Avoid heavy lifting
- Support your stoma and tummy whilst coughing or sneezing

### In the months following your stoma surgery:

- Wear a support garment if you are doing heavy work
- Keep your back straight, bend your knees and place your feet apart when lifting heavy objects
- Take regular, gentle exercise such as swimming or walking
- Avoid high impact sports such as rugby, football or strenuous racket sports

### Getting back to your normal lifestyle:

- Try not to gain weight, or lose a bit of weight if you need to
- Always check with your doctor or stoma nurse before starting any new exercise programme or sport

### It is important to remember that:

- Not everyone gets a parastomal hernia, nor do all hernias cause pain, symptoms or stoma management problems
- Most parastomal hernias can be managed using an abdominal support garment
- Surgery to repair a parastomal hernia is always the last resort as there is a very high risk that the hernia will recur
- A strangulated hernia is a rare complication. If this happens, you will experience severe pain in your tummy, your stoma will stop working and will change from its normal bright red colour to a darker, bluish red. Seek help immediately as you will require urgent surgical treatment
- If your parastomal hernia does increase in size, it can make pouch choice and fitting difficult

*If you need advice or help about pouch management or the use of support garments, make an appointment to see your stoma care nurse.*

# What if you get sore skin?

## What is sore skin?

The skin around your stoma called the peristomal skin can become red but intact, sore but dry or broken and wet.

## What causes red or sore skin?

- Waste from your stoma getting directly onto your skin
- Changing your stoma pouch too frequently causing trauma to your skin
- Sensitivity or allergies
- Pre-existing skin conditions

### Pre-existing skin conditions

If you already suffer with skin problems such as psoriasis, eczema, sensitivity or allergies, you could be more at risk of these conditions developing around your stoma. Different skin conditions present in different ways so a medical or nursing assessment is essential.

Make an appointment to see your doctor or stoma care nurse to discuss any peristomal skin problem, which may be worrying you. They will offer you the appropriate advice and treatment to deal with the situation.

## Hints and tips

- Some redness is to be expected when you change your pouch. Pulling the adhesive off your skin makes it react in this way
- Shaving your peristomal skin may be necessary if body hair is an issue. Trauma caused by the pouch adhesive ripping the hair off your body can give you inflammation of the hair follicle or root (folliculitis). If using a razor, take care not to cut your stoma and only use the razor blade once before discarding it. You may prefer to use an electric razor
- Use a skin barrier film such as OstoGUARD or a suitable alternative before putting on a new pouch. This will protect your skin and also help to reduce redness when you remove your pouch
- The flange part of your pouch needs to fit snugly around your stoma with no more than a 1mm gap between the stoma and flange. If the gap is too large your skin will be exposed to the pouch content resulting in sore skin
- If the flange is cut too small, the adhesive will rest on your stoma instead of on your skin and the risk of waste getting underneath the flange and onto your skin is increased
- For broken skin a barrier cream such as OstoGUARD, or a specially formulated protective powder such as OstoSEAL can help. Skin protective products similar to OstoGUARD and OstoSEAL are also available
- If you are using a 1-piece pouch, you may wish to consider using a 2-piece system until your sore skin has healed



# What if

## you get a urinary tract infection?

### What is a urinary tract infection?

Your urinary tract consists of your kidneys, ureters (which are the tubes draining urine from your kidneys) and your stoma. A urinary tract infection (UTI) can occur in any part, or all of this system.

### What can cause a urinary tract infection?

The piece of bowel used to make your stoma will discharge mucus. Mucus is a natural bowel lubricant and is normal, however if it is not flushed out into your stoma pouch, it can cause a UTI.

### What are the signs of a urinary tract infection?

- Flu like symptoms
- Cloudy, offensive smelling urine
- Pain or discomfort around your stoma or kidney area

*Contamination from unwashed hands can also cause a UTI.*

## Hints and tips

- Always wash your hands before changing your pouch or attaching your night drainage bag
- Keep the tube connecting your stoma pouch to the night drainage bag clean
- Vitamin C drinks and in particular cranberry juice will help keep your urine clear. If you do not like cranberry juice, you can buy cranberry tablets from health food shops
- Do not take cranberry juice or cranberry tablets if you have been prescribed Warfarin
- Drink plenty of fluids (about 2-3 litres a day). This will dilute your urine and help to flush away the mucus
- If symptoms persist, make an appointment to see your doctor. He may suggest testing your urine and prescribe you a course of antibiotics

### How to obtain a urine sample

Wash your stoma and surrounding skin and apply a clean pouch. The urine that has collected in the pouch can be used for the test. Alternatively wash your stoma and surrounding skin, then hold a clean sample bottle under your stoma and let urine drip into the bottle.

Do not allow anyone to take a sample of urine from a pouch you have been wearing for some time, or from your night drainage bag.

*If your doctor requests a sterile urine sample, contact your stoma care nurse as this will have to be collected using a sterile technique.*

# What if

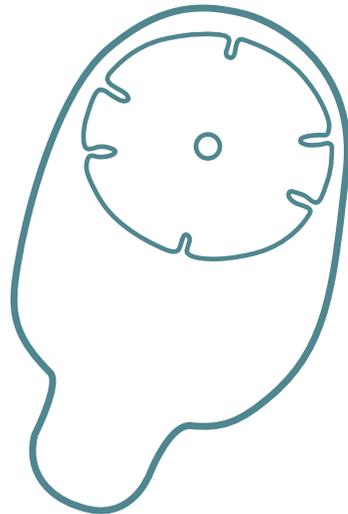
## you get urinary odour or a change to the colour of your urine?

### What is odour?

Urine has an odour that can vary depending upon what we eat or drink. This does not change when you have a urostomy. Your urostomy pouch is made of special laminated and odour proof plastic. When it is in place and properly applied there should not be an odour.

### What can cause odour?

- Urinary tract infections
- Asparagus
- Fish
- Onions and garlic
- Some Spices



*Cranberry juice (200ml a day) or cranberry tablets from health food shops can help to keep urine odour free. If you are on Warfarin please check with your stoma care nurse or doctor before taking either cranberry juice or cranberry tablets.*

## Colour

Urine is normally clear and pale yellow in colour.

### What can cause urine to change colour?

- Food and drinks such as beetroot, red fruit and red fruit drinks
- Senna - yellow-brown or pink
- Nitrofurantoin - brown-yellow
- Ibuprofen - red
- Iron salts - black
- Warfarin - orange
- Antibiotics - reddish brown
- Some anti-depressants turn urine blue-green
- Some of the above medications may also alter the smell of your urine
- Iron salts - black



# What if

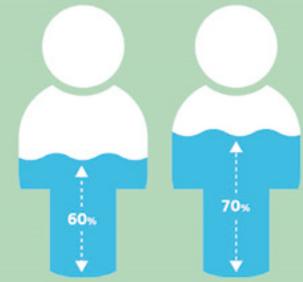
## you need to use night drainage bags or leg bags?



## Hints and tips

- Always wash your hands before connecting your leg bag or night drainage bag to your urostomy pouch
- When you connect your urostomy pouch to your night drainage system leave some urine in the pouch. When you connect, this urine flows into the night drainage bag and helps to prevent airlocks and vacuuming
- Use an anti kinking drainage tube to prevent twisting of the urostomy pouch, tubing and night drainage bag
- If you need a longer night drainage tube speak to your stoma care nurse who will show you how to join two pieces of night drainage tube together
- Fasten your night drainage bag to a night drainage stand to help to prevent leakage or spillage onto the floor
- If you reuse your night drainage bag, empty it via the drainage tap at the bottom then rinse it through with water and hang to dry. Always drain urine from your night bag before disposal
- Mattress protectors, disposable bedding and bedding protection for use when travelling or on holiday are available from Respond
- When travelling long distances you may find it convenient to attach a leg bag to your urostomy pouch for added capacity and security

*Speak to your stoma care nurse who will be pleased to advise you regarding any of the above matters.*



60 - 70%

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KEEPING HYDRATED IS ESSENTIAL!

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## Did you know?

Watermelon, strawberries and grapefruit  
each have a water content of over

90%

perfect for keeping hydrated!



8

Drink  
glasses of water a day,  
a lack of water causes dehydration

### HydrationTip

Make your own vitamin water, simply add  
slices of cucumber, lemon, lime or berries  
to a jug of cold water.



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 respondltd

 @respondltd



**Manchester**  
2 Victoria Avenue East  
Manchester  
M9 6HB

Direct-0161 702 3380  
Fax-0161 820 4510

**Scotland**  
9 York Place  
Perth  
Scotland  
PH2 8EP

Direct-01738 629 395  
Fax-01738 657 221

**Larne**  
36 Curran Road  
Larne  
BT40 1BU

Direct-028 282 60506  
Fax-028 686 87999

**Peterborough**  
20 Phorpres Close  
Cygnet Park  
Hampton  
Peterborough  
PE7 8FZ

Direct-01733 348 883  
Fax-01733 806 515

**Cardiff**  
Greypoint  
Cardiff Business Park  
Cardiff  
CF14 5WF

Direct-029 2076 7880  
Fax-029 2076 7881

**London**  
23 Heritage Avenue  
London  
NW9 5XY

Direct-0208 166 4593  
Fax-0203 051 2412

**Nottingham**  
97 Manvers Street  
Nottingham  
NG2 4NU

Direct-0115 940 3080  
Fax-0115 871 8097

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## **Urostomy Association**

**info@urostomyassociation.org.uk**

**01386 430140**

**urostomyassociation.org.uk**

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5 054685 013058