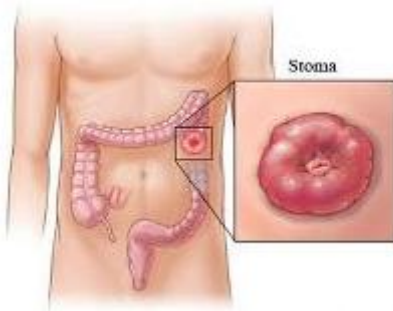




Indian Association of Pediatric Surgeons

Patient Information Sheet

COLOSTOMY



Concept, Text & Photograph Courtesy :

Mrs. Surya Thangaraj MSc (pediatric nursing) &

Dr Pavai Arunachalam, Professor of Pediatric Surgery, PSG IMS&R, Coimbatore

Edited, designed and formatted by :

Dr. Veereshwar Bhatnagar,

Former Professor & Head, Pediatric Surgery, AIIMS, New Delhi,

Currently Professor of Pediatric Surgery & Dean Research, School of

Medical Sciences & Research, Sharda University, Greater Noida, UP.

Published by :

Dr. Amar Shah, Jt. Secretary, IAPS, Consultant Pediatric Surgeon, Amardeep Children Hospital, Ahmedabad &

Professor Ravi Kanojia, Secretary, IAPS, PGIMER, Chandigarh

for & on behalf of the Indian Association of Pediatric Surgeons

What is a colostomy ?

A colostomy is a surgical procedure in which the colon is opened and the end is brought through the wall of the abdomen and attached to the skin.

What causes this problem and how common is it ?

The purpose is to evacuate the bowel contents/faeces which are unable to pass normally.

Colostomy is mostly done as a temporary life saving measure in children. The conditions which require colostomy are:

- Imperforate anus (absence of anal opening at birth)
- Hirschsprung disease
- Necrotizing enterocolitis
- Perforations leading to peritonitis

What are the symptoms ?

The surgeon will create a stoma (opening) in the abdomen with the upper part of the colon to allow stool and gas to pass naturally through the stoma and the child does not need to strain or push. It will be swollen right after surgery and will get smaller as it heals. It should remain red and moist and does not feel pain. It feels like the inside of cheek. But, it might bleed if it is rubbed too hard.

When to see your doctor ?

You would have seen the doctor before the colostomy was created. After the colostomy you may need to see the doctor frequently for management of the colostomy.

How is it diagnosed ?

What are the treatments available?

What are the possible complications / what happens after the operation?

What is the outlook or future of these children?

The diagnosis of a colostomy is obvious but the associated problems need to be understood and managed accordingly.

COLOSTOMY CARE :

Colostomy care using bag. Colostomy bags are available in many styles and sizes. They consist of a sticky

wafer that adheres to the skin and a pouch to collect the stool. There are one piece systems and two piece systems. A one piece pouch has the wafer and pouch joined together as a single unit. A two piece system has a wafer and pouch that are separate. In children mostly single piece drainable bag is used for convenience.

Application of colostomy bag : Wash your hands and clean the skin around the stoma gently with tap water using a piece of cloth/gauze. Adjust stoma size, remove the protective cover from the adhesive flange. Fit the pouch over the stoma and smooth from the center to the edges, making sure there are no creases which might cause leakage. Cover the adhesive with your hands for 30 seconds, as the warmth will increase the adhesion to the skin.

Emptying the colostomy bag : Empty the pouch when it is 1/3 to 1/2 full and before you change the system. Do not wait until the pouch is completely full. This could put pressure on the seal and cause it to leak or spill.

Removing the colostomy bag : Empty the pouch before removing. Observe and clean the stoma. Apply the new one.

Colostomy care using cloth : In India due to the economic condition many people cannot afford colostomy bags hence cloth is advised despite complication (skin irritation). Soft clean cloth is placed above the stoma and secured in place by abdominal tie. The cloth can be reused after washing and sun dry.

SKIN CARE :

Cleanse the skin around the stoma with water. Do not use baby wipes, oils, powders, ointments, or lotions on the skin around the stoma unless directed to do so. If required use barrier powder to protect the skin and manage leaks. Bathing can happen with the pouch on or off. Water will not go into the stoma and does not harm it. Avoid oily soaps and lotions around the stoma. Dry the skin around the stoma after bathing and check the seal for integrity.

PROBLEMS :

- Skin irritation : The skin around the stoma becomes irritated and sore. It is usually caused by leakage from the pouch.

Treated by proper application of pouch and use of barrier powder.

- Stoma stenosis : Narrowing of the stoma. Mild stenosis can be stretched.
- Peristomal hernia : happens when a part of the intestine bulges into the area around the stoma.
- Stoma prolapse : happens when a part of your bowel pushes out of your stoma. The stomal prolapse may be caused by increased abdominal pressure. Mild prolapse may not cause a problem. Severe prolapse needs surgery to fix the problem.
- Stoma retraction : happens when the height of the stoma goes down to or below the skin level.

What is the outlook or future of these children?

- There may be loose stool and this is more in proximal stomas and will need oral rehydrating solution.
- If there is pain and vomiting and there is no feces coming then consult doctor
- Child may need hematinics when there is loss of blood from the stoma
- Prolapse of the bowel needs doctors consultation.



Colostomy bags