Your Care at Home: Colostomy Care

Narrator

If you're leaving the hospital after a colostomy, you probably have a lot of questions. Living with a colostomy can be a big adjustment. Just learning more about how a colostomy works and how to take care of it may help make it easier for you. My friend and I will help you.

A colostomy is an opening to drain feces, or stool, from your large intestine into a pouch that you wear on your body. The opening, which is called a stoma, is usually placed on the left side of your abdomen. There are two types, temporary and permanent. A permanent colostomy is usually in the lower part of your large intestine. The feces that collects in the pouch should be well-formed with this kind of colostomy. A temporary colostomy is usually a little higher up with the opening on your upper abdomen. Because it's not as far along in your digestive system, the stool may be less well-formed than with a permanent colostomy.

There are a few different types of colostomy pouches, the bag that holds your stool. Your doctor or nurse will help you decide what's right for you, based on your colostomy, your lifestyle and what your insurance will cover. Colostomy pouches are either open (and drainable) or closed (not drainable). "Drainable" pouches can be emptied and reused, but in time, you will need to replace them. Closed pouches are usually changed every day.

About once a day, you'll have to dispose of the stool in your pouch. If it's a drainable pouch, you'll empty it into the toilet. If it's closed, you'll throw the entire pouch away or reuse it. Emptying your drainable pouch should be done before the pouch is one-third full. Hold the pouch over the toilet and remove the clip if it has one, but don't throw it away. Now, turn the tail of the pouch inside out, making a cuff, and empty the pouch by squeezing from top to bottom. With your finger wrapped in toilet paper, wipe from the outside to the inside making sure the outside of the pouch tail is clean. Turn the cuff back and reapply the clamp or Velcro-like closure to close it.

Remember, one-piece pouches should be replaced every three to five days or as directed by your doctor or nurse, but if you prefer to change yours daily, that's fine too. Non-drainable pouches are usually replaced every day, usually after a bowel movement. It's up to you if you empty the pouch before you dispose of it, or not.

To dispose of a closed pouch, double bag it in two plastic bags and throw it away. Never flush the pouch, as it will stop up your toilet. Now let's talk about how to attach a new colostomy pouch. Your pouch may be one-piece, attaching to your body as a single unit. Or it might be a two-piece pouch with one adhesive piece that attaches to the body and a second piece, a pouch that fastens on to that.

Before you start, gather your supplies, including a wastebasket, two plastic bags and a skin barrier. Measure and cut or mold the new skin barrier opening to fit your stoma if it needs to be sized. For a one-piece pouch, drainable or non-drainable, attaching it is the same. First, cut or mold the opening to fit your stoma, or use a premeasured pouch, then make sure you take off the protective film from the barrier. If you are using a drainable pouch, make sure it's closed before you apply it. Clean your skin, dry it well, and apply the pouch from the bottom up. Hold your hands over the barrier part for 45 seconds to make sure the barrier molds and holds well to your skin. That's it!

Now let's look at how to put on a two-piece pouch. Whether drainable or not, it works the same. With a drainable pouch, make sure the bottom of the new pouch is closed before you apply it. Now, cut or mold the opening to fit your stoma, or use the premeasured pouch, then remove the protective film from the skin barrier. You can use your finger in the opening to soften it and keep it even.

Then, with clean, dry skin, apply the barrier running your finger all around the skin barrier near the opening to make sure it's sealed. Snap the pouch onto the barrier starting from bottom to the top. Press your hand against the barrier for 45 seconds, to mold it to your skin. Then snap the end of the pouch to make sure the two parts are secure.

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We should also mention irrigation. If your colostomy is lower in your intestine, you may need irrigation to make your bowel movements easier. Irrigation rinses your bowel with water to loosen your stool. Ask your nurse or doctor if you need it. Also call your doctor if you have:

- Abdominal pain, nausea, severe constipation or diarrhea
- A fever of 101° or higher
- Increased bleeding around the colostomy opening, some streaks of blood are normal, but not more than that
- Also call if your skin becomes irritated

You probably have a lot of questions about living with a colostomy. Before you leave the hospital, ask for a referral to home health to help with the adjustment. Most insurance companies should cover a visit or two.

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