



ASCRS

American Society of Colon & Rectal Surgeons

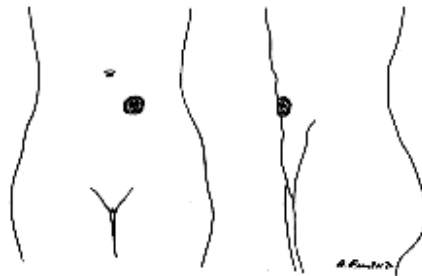
[Home](#) > [Patients & Public](#) > [Treatments and Screenings](#) > Ostomy

Ostomy

WHAT IS AN OSTOMY?

An ostomy is a surgically created opening connecting an internal organ to the surface of the body. Different kinds of ostomies are named for the organ involved. The most common types of ostomies in intestinal surgery are an "ileostomy" (connecting the ileal part of the small intestine to the abdominal wall) and a "colostomy" (connecting the colon, or, large intestine to the abdominal wall).

An ostomy may be temporary or permanent. A temporary ostomy may be required if the intestinal tract can't be properly prepared for surgery because of blockage by disease or scar tissue. A temporary ostomy may also be created to allow inflammation or an operative site to heal without contamination by stool. Temporary ostomies can usually be reversed with minimal or no loss of intestinal function. A permanent ostomy may be required when disease, or its treatment, impairs normal intestinal function, or when the muscles that control elimination do not work properly or require removal. The most common causes of these conditions are low rectal cancer and inflammatory bowel disease.



An ostomy connects either the small or the large intestine to the surface of the body.

HOW WILL I CONTROL MY BOWEL MOVEMENTS?

Once your ostomy has been created, your surgeon or wound ostomy continence nurse (a WOC nurse specializes in ostomy care) will teach you to attach and care for a pouch called an ostomy appliance. An ostomy appliance, or pouch, is designed to catch eliminated fecal material (stool). The pouch is made of plastic and is held to the body with an adhesive. The adhesive, in turn, protects the skin from moisture. The pouch is disposable and is emptied or changed as needed. The system is quite secure; "accidents" are not common, and the pouches are odor-free.

Your bowel movements will naturally empty into the pouch. The frequency and quantity of your bowel movements will vary, depending on the type of ostomy you have, your diet, and your bowel habits prior to surgery. You may be instructed to modify your eating habits in order to control the frequency and consistency of your bowel movements. If the ostomy is a colostomy, irrigation techniques may be learned which allow for increased control over the timing of bowel movements.



An ostomy appliance is a plastic pouch, held to the body with an adhesive skin barrier, that provides secure and odor-free control of bowel movements.

WILL OTHER PEOPLE KNOW THAT I HAVE AN OSTOMY?

Not unless you tell them. An ostomy is easily hidden by your usual clothing. You probably have met people with an ostomy and not realized it!

WHERE WILL THE OSTOMY BE?

An ostomy is best placed on a flat portion of the abdominal wall. Before undergoing surgery to create an ostomy, it is best for your surgeon or WOC nurse to mark an appropriate place on your abdominal wall not constricted by your belt-line. A colostomy is usually placed to the left of your navel and an ileostomy to the right.

WILL MY PHYSICAL ACTIVITIES BE LIMITED?

The answer to this question is usually no. Public figures, prominent entertainers, and even professional athletes have ostomies that do not significantly limit their activities. All your usual activities, including active sports, may be resumed once healing from surgery is complete.

WILL AN OSTOMY AFFECT MY SEX LIFE?

Most patients with ostomies resume their usual sexual activity. Many people with ostomies worry about how their sexual partner will think of them because of their appliance. This perceived change in one's body image can be overcome by a strong relationship, time and patience. Support groups are also available in many cities.

WHAT ARE THE COMPLICATIONS OF AN OSTOMY?

Complications from an ostomy can occur. Most, like local skin irritation are typically minor and can be easily remedied. Problems such as a hernia associated with the ostomy or prolapse of the ostomy (a protrusion of the bowel) occasionally require surgery if they cause significant symptoms. Weight loss or gain may affect the function of an ostomy.

Living with an ostomy will require some adjustments and learning, but an active and fulfilling life is still possible and likely. Your colon and rectal surgeon and WOC nurse will provide you with skills and support to help you better live with your ostomy.

WOULD YOU LIKE ADDITIONAL INFORMATION?

More information about ostomies can be found at: www.uoaa.org – The United Ostomy Associations of America