



Bengt, Urostomy since 2006



## HINTS & TIPS UROSTOMY

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## INTRODUCTION

This Hints & Tips booklet has been designed for those with a colostomy. Its purpose is to guide you from your operation, through to the first months and beyond, and help you adapt to life with a stoma.

This book is a compilation of hints and tips from the 'university of life': those living with a stoma and health care professionals' experience within stoma care. Some of the hints and tips included may seem different or unusual; however they have made life easier for many people with a colostomy.

We realise that there are probably more hints and tips throughout the world than those included in this book and we are always happy to receive any input for future editions.

We hope that the contents of this book will aid and ease your daily life with your stoma and add quality to your life.

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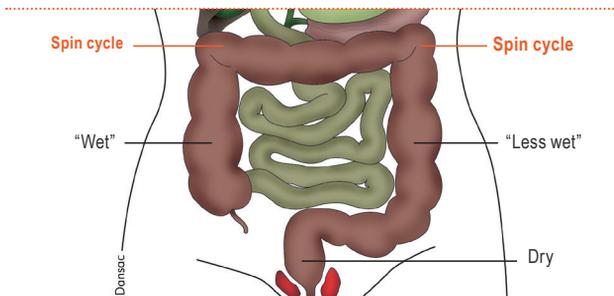
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## NOW YOU HAVE HAD YOUR SURGERY

Learning to take care of your stoma is not as difficult as learning to walk, learning to drive a car or wearing contact lenses – but it will take time to adapt.

The function of your large bowel can be compared to the spin cycle of a washing machine. When the stool enters the large bowel, it is quite similar to when your washing enters the final spin cycle of the washing machine. The stool, like your washing, is very wet at this stage – this means that when part of your large bowel has been removed, it can be compared to missing a part of the spin cycle in your washing machine, making the stool less formed and softer.

The function of your bowel can be compared with a washing machine:



At first, it will take time for you to adjust and learn to care for your stoma. While you are recovering from your surgery, it will seem as if you will be unable to cope with this new situation. But as you recover and gain more strength, you will find it easier and become quicker and more efficient with your stoma care. Going home is a challenge and recovery will take time.

Keep a notebook or a patient diary to put all your queries and questions in. This way you will not forget to ask the important questions when in contact with your Stomal Therapy Nurse/ doctor/health care professional.



*Remember*  
there are no  
silly questions!



*Keep a notebook!*

## CARE OF YOUR STOMA



*Remember*  
your stoma  
is unique to you.



*Drink* up to 2 litres of  
water every day to help  
prevent urinary tract  
infections and kidney  
stone formation.

There are three different types of stomas: colostomy, ileostomy and urostomy. Because the output and consistency is different with each stoma, it is important for you to know which one you have. This book relates to your particular stoma - a urostomy.

Your Stomal Therapy Nurse will give you the appropriate instructions and guide you as to the products you may use.

When your bladder is removed or bypassed, you will need a new way to pass urine. Part of the bowel will be used to divert the urine from your kidneys to the abdominal wall. This new opening is called a urostomy, and is for passing the urine from the body. The stoma is red and moist; there are no nerve endings in the stoma and therefore no sensation.

There are many reasons why people have a urostomy but the questions and concerns are usually the same.

### Urostomy skin care

The area around your urostomy, where your stoma bag is attached, is called the peristomal area. The sticky area of your stoma bag/flange/wafer, called the skin barrier, is designed to protect whilst allowing the peristomal skin to breathe.

It is important that this area is kept clean and protected from contamination of urine because this may cause soreness of the peristomal skin. If the peristomal skin becomes uncomfortable, itchy and painful, your stoma bag needs to be taken off, the area washed, rinsed and dried and a new stoma bag re-applied.

## HINTS AND TIPS

- Many stomas are not round, therefore make sure the skin barrier fits as snugly as possible.
- The easiest way to measure your stoma is by using the backing paper of the skin barrier as a template. You may want to stand in front of the mirror to do this.
- During the first 3 months you may want to do this on a weekly basis, as your stoma may change in size.
- If your skin is damp you may find it useful to dry the peristomal skin with a hair dryer on a low setting before you apply the new skin barrier.
- To aid adhesion of the clean flange/wafer/stoma bag try putting it in a warm place (e.g. sit on it, put it under your arm or on top of a radiator) prior to application.
- Excessive sweating may reduce the skin barriers ability to stick to the skin. The use of a non-perfumed antiperspirant underneath the skin barrier helps solve the problem.
- Care must be taken if applying cream to the peristomal area. Creams are often greasy and may prevent the skin barrier from sticking to your skin. The amount needed is no more than the size of a match head and should be well rubbed in before applying the new skin barrier.
- When travelling by car it is useful to have a night drainage bag available for emptying your urostomy bag, if your journey is delayed.
- When flying long-haul or travelling long distances it can be useful to connect your urostomy bag to a leg bag to give added capacity.
- A bulge around the stoma may indicate a hernia, contact your Stomal Therapy Nurse for advice.
- A prolapse is an increased protrusion/lengthening of the stoma.
- If you think you have a prolapse or a hernia, providing your stoma is still functioning properly and you are not experiencing any problems with the performance of your stoma bag, there is no urgent need to see your Stomal Therapy Nurse or surgeon. Your next routine appointment will do.
- Do not worry if your stoma bleeds when washed - this is normal, because it has the same delicate texture as the inside of your mouth.



*If your bag leaks, change it!*



*Remember*

*Always carry your spare kit when leaving home.*

## CARE OF YOUR STOMA



It is important to be prepared and have all the equipment you require at hand before starting your stoma care.



When washing the peristomal area, it is not advisable to use baby wipes/wet wipes, disinfectants or antiseptic fluids – they may cause skin reactions around the stoma.

Try to get into a routine when changing your stoma bag.

### You will need

- Disposal bag
- Dry non-woven wipes for washing/drying
- Warm water for washing
- Fragrance free mild soap (if required)
- New pouch and/or flange
- Scissors for cutting flange/wafer (if required)
- Any accessories you may use

### Changing the bag

- Secure clothing out of the way (pegs or safety pins may help to hold clothes out of the way).
- Empty your stoma bag.
- Dampen a few non-woven wipes to help release the adhesive barrier.
- Remove the used stoma bag carefully, from top to bottom supporting the skin with the dampened non-woven wipes.
- Wash the stoma and surrounding skin with your dampened non-woven wipes/paper kitchen towels.
- Dry skin thoroughly.
- Do not apply anything to the skin unless recommended by your Stomal Therapy Nurse or health care professional.
- When trying any new cream/gel/wipe under your flange/wafer test it on a small segment of the peristomal skin - if you have a reaction it will not cause the whole area to be involved.
- Remember to remove the backing paper before applying the new stoma bag/flange/wafer.
- Do not forget to carry your spare kit with you when leaving home (see page 28).

## CARE OF YOUR STOMA

### Hair removal around the stoma

Some people find it necessary to remove hair from the skin around the stoma. The best way to do this is either by shaving or cutting long hairs with scissors. Dry shaving is uncomfortable, so it is preferable to wet shave the area with a clean disposable safety razor each time. Shave gently and carefully in the direction of hair growth once a week. Do not use or share family razors. It is not advisable to use hair removing creams or gels.

### Mucous

Your urostomy is made from a piece of bowel which will continue to produce mucous. The mucous, which is white and sticky, will be passed into the stoma bag and can easily be mistaken for signs of infection.

Taking Vitamin C/Ascorbic acid will help keep the urine clear of mucous and prevent blockage of the drain valve on the stoma bag and the night drainage bag. It has been shown that in some cases taking larger amounts of Vitamin C may be required; however this should be discussed individually with the Stomal Therapy Nurse.

### Phosphate deposits

Phosphate deposits, seen as greyish nodules/warty papules, may build up around the stoma (see picture). Contact with urine must be stopped for this condition to heal.

### Treatment

- Clean peristomal skin with equal parts of white vinegar and water at each stoma bag change.
- Check the hole size of your stoma bag/flange/wafer.
- Increase your fluid intake.
- If you have warty lumps around your stoma, either see your doctor or your Stomal Therapy Nurse.



If you need to shave the stoma area: use the cylinder from an empty toilet roll over your stoma for protection and shave safely around the stoma.



To help lessen the mucous in your stoma bag take 100 mg of Vitamin C / Ascorbic acid once a day.



## CARE OF YOUR STOMA



### Obtaining a urine sample

Remove the urostomy bag, wash the stoma and skin, hold a clean sample bottle underneath the stoma and let urine drip into the sample bottle. This may take a while but is the only accurate way of sampling your urine for testing.

A sample of urine should never be taken directly from the urostomy bag or from the night drainage bag.



### Obtaining a sterile urine sample

If your doctor requests a sterile urine sample contact your Stomal Therapy Nurse as this involves a sterile technique.



## DISPOSAL OF PRODUCTS

All stoma bags should be emptied before disposal. If possible, the stoma bag should also be rinsed through. The empty stoma bag should be placed in a disposal bag and sealed before disposing of in a rubbish bin.

When away from home you may wish to double wrap the used stoma bag before placing in the appropriate bin.

### Disposal of used appliance

- Empty contents into the toilet by opening the valve/drainage tap.
- Do not dispose/flush the stoma bag down the toilet.
- Place used stoma bag and wipes in disposal bag and tie a knot before placing it in household waste.



*Nappy* sacks make good disposal bags for used stoma bags..



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## GOING HOME



*Remember* to renew your spare kit regularly.



*Accept* all offers of help (the offer may only come once).



*Sleep*, eat and drink regularly.



*You* will be best in the morning, tired in the afternoon and exhausted in the evening.

### First weeks

The first 2 weeks after returning to your home, your daily routine will be slower to begin with. When you become confident with your stoma care, you will get into a routine and the changing of the bag should only add a few minutes to your normal bathroom routine.

In the beginning you may feel that the stoma will be controlling you, but you will soon be in control of the stoma.

Your tummy may still be distended after surgery, so you may wish to keep your clothing loose for the first couple of weeks. Try moving around your house or garden every 2 hours, as this will help your general blood circulation and reduce the feeling of distension and discomfort in your pelvic area and lower limbs.

To avoid undue abdominal discomfort and the risk of developing a hernia around the stoma, it is advisable to avoid the following activities in the early weeks after surgery:

- Mowing or cutting the grass
- Using the vacuum cleaner
- Pushing a pram, pushchair, supermarket trolleys or wheelchair
- Digging the garden
- Lifting anything heavy (such as a full kettle)
- Moving furniture
- Cleaning the windows
- Ironing

It is also recommended not to drive a car during the early weeks following surgery, because the side effects of medication and anaesthetic slow your reaction time and reduce concentration.

Your progress will go up and down, one day forward, two days back in the beginning. You may be tearful, irritable and snappy. Make sure your family and friends understand, as this is a normal reaction following surgery and during recovery.

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## GOING HOME

### Hints and tips when using a night drainage bag

- When connecting the urostomy bag to your night drainage system, make sure that you leave some urine in the urostomy bag so that when you connect up this urine flows into the night drainage bag. This will help to prevent airlocks, vacuum and twisting of the urostomy bag, night drainage bag and tubing at night time.
- If you require longer night drainage tubing it is possible to join two pieces of night drainage tubing together (talk to your Stomal Therapy Nurse).
- Some night drainage bags are single use only. To empty cut the bag open and drain the urine before disposing.
- Re-usable night drainage bags are emptied via the drainage tap. After use rinse with water and hang to dry.

When travelling and staying in other accommodation try the following to support your night drainage bag

- Take a spare pillowcase and two large safety pins. Place the night drainage bag into the pillowcase and attach the pillowcase to the bed/mattress with the safety pins.
- Take a plastic carrier bag without safety holes in it and place the night drainage bag in the carrier on the floor in case of leakage from the night bag.
- Some stoma bag appliance manufacturers may be able to supply a flat pack plastic night stand.

If your urostomy bag leaks onto the carpet, bedding or furniture, here are some ideas to help with the removal of urine odour

- Liquid enzyme digester, which is a blend of harmless bacteria and surfactant. These products are available in supermarkets or in pet shops.
- Bicarbonate of soda kills smells when sprinkled on dry.
- Proprietary deodorisers such as Febreze.

## FOOD MANAGEMENT



*Listen to your body – do not ignore food cravings!*

Remember that eating should be a pleasure! Our bodies need a whole range of different food types for recovery and health – the secret is to know what you're eating and strike the right balance. For most people, a urostomy has very little effect on diet and you will be able to eat whatever you like.

### It is important to

- Eat at regular times.
- Enjoy your meals in a relaxed atmosphere.
- Do nothing else while eating.
- Sit down to eat, preferably at a table.
- Not drink and eat at the same time, as this may cause wind.
- If you wear dentures, make sure they fit properly.

### Food management after surgery

- Enjoy small meals, taken often.
- Proteins (meat, fish and dairy products) are good for healing.
- Chew food thoroughly to aid digestion.
- Use the fork-test: if cooked food can be cut with the side of a fork it is tender and can be digested easily.
- If you have lost your appetite, simply eat food that you enjoy.
- Listen to your body and your cravings (Mother Nature knows best!).

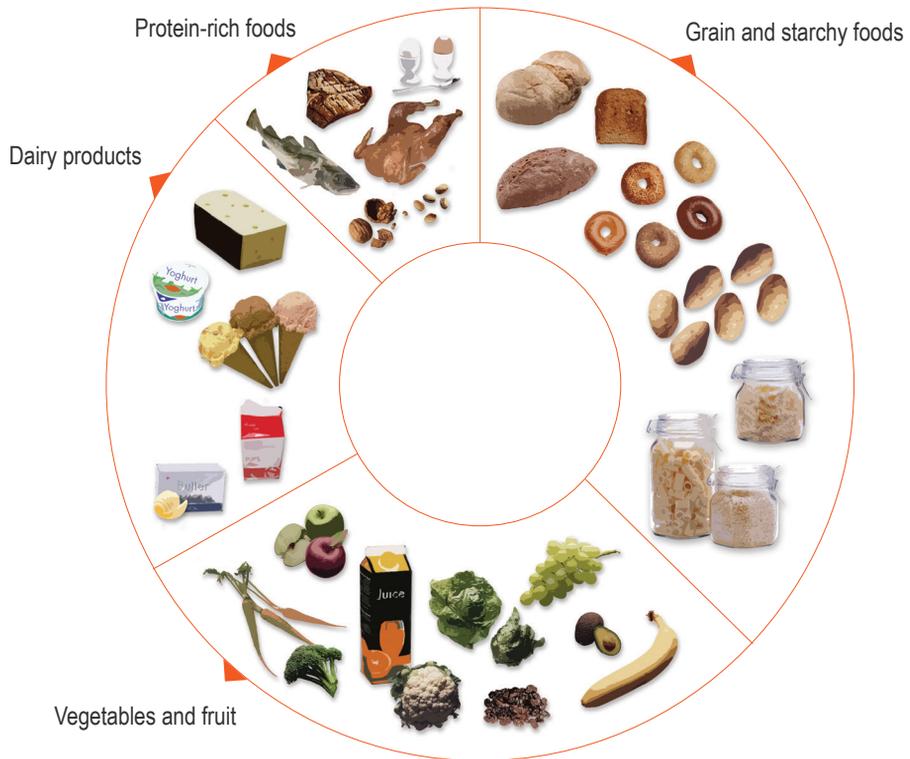
### Day-to-day food management

- Enjoy 3 – 4 regular meals a day.
- Balance your food intake, try to eat a bit of everything from the food circle.
- Eat fruit and vegetables each day.
- Drink plenty of fluids, especially water, each day.
- A glass of wine, sherry or a beer with your meal is OK.

Always remember to drink plenty of fluid each day. Approximately 2½ litres of water and other fluids are needed to hydrate your body. An easy way to remember is to re-fill an empty 2-litre bottle with water each day and have this emptied by evening.

# FOOD MANAGEMENT

## Food guide



## FOOD MANAGEMENT



*Remember*  
to eat a balanced diet,  
chew well and eat your  
food slowly.

### Odour/Colour

Certain foods may give odour to the urine; these include asparagus, fish, onions, garlic and some spices.

Drinking cranberry juice (200 ml a day) can help to keep the urine odour free and can also help in preventing urinary infections. If you are on Warfarin please check with your doctor before taking cranberry juice.

Beetroot, red fruit and red fruit drinks will turn the urine red.

Some medications may also change the colour and odour of your urine. This usually is no cause for alarm, but talk to your Stomal Therapy Nurse if in doubt.

#### Example of some drugs that colour urine

Senna	Urine brown or yellow
Warfarin	Urine orange
Some anti-depressants	Urine blue-green
Antibiotics	Urine reddish-brown

## CLOTHING

You may wish to keep your clothing loose for the first couple of weeks because your tummy may feel uncomfortable. In a few weeks you will be able to wear your usual clothes. Wearing tight-fitting clothes will not affect your stoma.

### Hints and tips for men

- You should be able to wear the same type of clothes you wore before your surgery.
- Trousers with waistband pleats will give more room across the stoma bag area and can be bought from most stores.
- Tight-fitting clothes can still be worn.
- A belt can sometimes cause a problem if it goes across the stoma - braces are better.
- Some companies design specific clothing for men with a stoma, such as swimwear, underwear and high-waisted trousers.

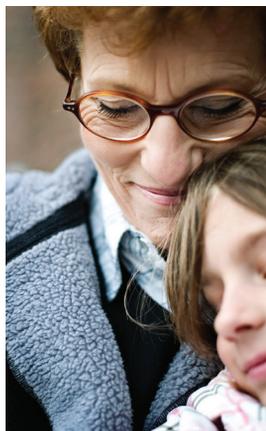
### Hints and tips for women

- You should be able to wear the same type of clothes you wore before your surgery.
- Panties/underwear should go either under or completely over the stoma bag.
- You can still wear a support girdle and tights after stoma surgery.
- Some companies design specific clothing for women with a stoma, such as swimwear, underwear, nightwear and high-waisted tights.
- Patterned swimwear is more flattering.
- Tight-fitting clothes can still be worn.



Dorthe,  
stoma since 2004

## SEX AND RELATIONSHIPS



Marianne,  
stoma since 2007  
From *Life with a stoma*

Even though your stoma surgery may have brought an end to years of illness and discomfort, or been done to cure a life threatening disease, it still represents a change to a natural body function. Some of the emotions you may experience will be a result of this change and may affect the way you see yourself.

Most changes in the way we see ourselves take place gradually over a period of time, as in ageing. Surgery resulting in the formation of a stoma means a sudden major change in your body and in the way you see yourself. It will take time to get used to this change. It is natural to experience sadness and grief while you adapt to the new, but not really so different, you. Sexual activity is one of our normal functions and having a stoma should not prevent this activity.

### Hints and tips

- Share your thoughts and needs with your partner.
- Your sleeping arrangements should stay the same.
- Show that you appreciate a warm and loving relationship.
- Remain intimate and discuss issues openly.
- Touching, caressing, warmth and affection are all important.

If you don't have a partner at present but are concerned about how to tell a new partner that you have a stoma, there is no right or best time to tell. You need to use your own judgement. However it may be better to tell them early in the relationship, prior to a first intimacy. This may make things easier and help you relax.

People with stomas have relationships, marry, have children, and lead normal lives.

Relationships involving a person with a stoma are just as stable as relationships in general.

## SEX AND RELATIONSHIPS

The nerves and blood supply involved in sexual function lie close together and may be damaged during the removal of the bladder. For men this will result in problems with erection and ejaculation. Your surgeon will have discussed this with you in great detail before your surgery. Talk to your Stomal Therapy Nurse for further advice.

Pain during intercourse and lack of sexual interest may also occur. This is not unusual and in most cases temporary, but the experience can be worrying and you may think that your sexual desire and arousal have disappeared.

It is important that you and your partner understand these difficulties, so that you will both keep calm and not be unduly worried.

### Hints and tips for men

There are a number of different ways to help erectile problems:

- Penile injections
- Penile implants
- Mechanical erectile appliances, e.g. vacuum pumps

Medication such as Viagra does not work when you have a urostomy.

### Hints and tips for women

Women who have had their bladder removed during surgery may feel a different sensation in their vagina when having sexual intercourse. There may be pain, vaginal tenderness, dryness or vaginal discharge for some months. It is important that you and your partner understand these difficulties, so that you will both keep calm and not be unduly worried.

- Try using water-soluble lubricant.
- Treatment with a hormone replacement.
- Oestrogen cream.
- Change of position during intercourse.

Contact your Stomal Therapy Nurse for further advice.



Marianne,  
stoma since 2007  
From *Life with a stoma*

## SEX AND RELATIONSHIPS

### General hints and tips

Several things may make sex more difficult in the immediate postoperative period.

For example:

- Anxiety or fear about your ability to perform sexually.
- How you feel about your body.
- The worry that the stoma bag might leak.
- The worry that the stoma bag might come off.
- Attempting intercourse before your strength and confidence have returned after the operation.
- Depressed mood, which many people experience following major surgery.
- Medication such as blood pressure medication, anti-depressants, etc.
- Alcohol.
- Chemotherapy and/or radiotherapy.

Understanding, communication and warmth between you and your partner are vital. We cannot read each other's thoughts so it is important to ask questions and talk about needs and desires when it comes to what you like best sexually.

### Hints and tips for making love

- Change/empty the appliance before sexual activity.
- You may like to wear a cover over your appliance to prevent the plastic clinging to your skin.
- Covers can be made in many styles and materials from cotton to sensual satin.
- Sexual activity will not harm the stoma.
- Intercourse via the stoma can be dangerous and is not advisable.
- As long as your appliance is secure, whatever positions you choose should not affect the stoma bag, the cover or dislodge the appliance.
- Do not mistake your partner's concern for rejection.
- Any position that is comfortable for both of you is suitable for sexual activity.
- If needed your Stomal Therapy Nurse can refer you to an appropriate counsellor or appropriate stoma organisation.

## TRAINING AND EXERCISE

Having a stoma should not prevent you from exercising or from being as physically active as you were before your operation. Talk to your doctor/Stomal Therapy Nurse about contact sports or very heavy lifting; apart from that you should be able to enjoy the same type of physical activities you enjoyed before your surgery.

Remember, even light exercise is good exercise - for your heart, your joints, your muscles, your lungs, and for your general sense of well-being.

You will need to allow some recovery time - and walking is a great place to start. Post- operatively, just walking around the house or to the end of your garden is fine. One thing to bear in mind is that there is more to getting back in shape than running a mile or playing a set of tennis. Thirty minutes of walking every day is very good for you.

The benefits of regular exercising are well known – but it is a good idea to talk to your doctor or Stomal Therapy Nurse before starting an exercise programme, especially if you're out of practice, or if you have other medical conditions.

There are lots of easy ways of making yourself stronger each day; you must find the one that is right for you.

### Hints and tips

- Don't overdo it and remember to listen to what your body is telling you (do not try to do too much).
- Most important is to take one day at a time and pat yourself on the back for every accomplishment - no matter how little it might seem!

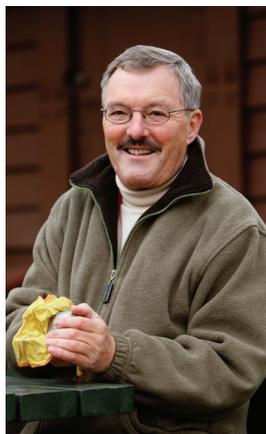


Lene,  
stoma since 1994



*Ask* a friend to join  
you in exercising.

## 3 MONTHS AND BEYOND



Bengt,  
stoma since 2006



*Listen* to your body and  
pace yourself.



*Take* an undisturbed  
afternoon sleep in bed.

At this stage you will find that you have made a lot of progress in your recovery. You will most likely be confident with the care of your urostomy, have resumed your social activities and perhaps started working - you may even have taken a short holiday away from home.

In other words you may be back to your normal way of life.

For those undergoing further treatment these activities may take longer to resume.

If you feel that things aren't going as well as you had hoped, or if you have any type of problem, do not hesitate to contact your Stomal Therapy Nurse or health care professional for advice.

---

## GOING BACK TO WORK

You should be able to resume your previous work within 8 to 12 weeks after surgery. No one at work needs to know about your stoma if you don't want them to. If you wish to tell some of your colleagues about your surgery, plan whom you wish to tell and how much you want them to know.

Before returning to work you may want to discuss with your employer about the possibility of starting work on a part-time basis for the first 2-4 weeks. Most employers are happy to help if they can. Having a stoma should not restrict you in the type or choice of work you do.

### Hints and tips

- Take extra fluid to work to drink during the day.
- Eat regularly during the day at work.
- If you are involved in heavy lifting at work, remember to wear a support belt while lifting.
- If you work on a building site you may want to wear a protecting shield over your stoma (ask your Stomal Therapy Nurse/health care professional).



*Remember*  
to take your spare  
kit with you to work,  
as you may need to use  
this during the day.

## TRAVEL



Liljan,  
stoma since 1992



*Every* successful  
holiday takes planning!



*Remember*  
personal travel insurance  
is essential.

Having a stoma will not prevent you from travelling, whether it is for pleasure or business, home or abroad.

### Travel insurance

Travel insurance is a must when travelling away from home. There are many insurance companies offering travel insurance - remember to declare pre-existing diseases and illness and the fact that you have a stoma. This ensures that you are covered for all eventualities.

Within the EU (European Union) reciprocal agreements are in place to provide you with free emergency health treatment if you become ill. For the most up-to-date information and obtaining the necessary documentation, consult your Stomal Therapy Nurse or local stoma association.

### Ostomy travel certificate

This travel certificate is available from your Stomal Therapy Nurse or local stoma association. The certificate will assist you when going through customs/airport security, if there is a need to explain about your stoma appliances. It has been translated into several European languages, but does not replace European Union reciprocal agreements or private travel insurance.

### When travelling

Always take with you the size, name, order number and the manufacturer's name of your stoma equipment in case of need of replacement. It is also useful to have the telephone number of your stoma equipment supplier with you. Remove your stoma equipment from its boxes and put in clean plastic bags for easier packing.

If you are away for an extended period of time discuss with your Stomal Therapy Nurse or stoma association how to contact a local Stomal Therapy Nurse/local agent/how to get help if needed.

## TRAVEL

Do not forget to have your travel kit readily available at all times (see page 28). Wear clothes that are comfortable and easy to remove when travelling.

### Travel by air, hints and tips

- Always keep your ostomy products with you in your hand luggage, not in your checked-in luggage.
- Remember to cut and prepare your stoma bags/flange/wafer before packing, because scissors must only go in the checked-in luggage.
- Pack twice as much stoma equipment as you would normally use.
- Prior and during travelling do not miss meals. Remember to drink plenty of fluids and be careful with alcohol.
- It is useful to book an aisle seat.
- Think ahead, a meal trolley can make it difficult to get to the toilet.
- Security/seat belts must be used when told to. Try to position the belt below or above your stoma.

### Travel by sea, hints and tips

- Toilet facilities are usually good on ferries. When the sea is rough the toilets can be very busy.
- On cruise liners the facilities usually include medical staff that may be able to help you in an emergency.

### Travel by rail, hints and tips

- Most trains have toilets, you can check first if in doubt.
- Not all trains have buffet facilities so make sure you have plenty of fluid to drink and something to eat with you.



Liljan,  
stoma since 1992



*Always*  
remember  
your travel kit!

## TRAVEL



*Attachments*  
to adjust the tension  
of your seat belt  
are available.

### Travel by road, hints and tips

- There are usually toilets in service areas/petrol stations and most coaches have toilets.
- Do not leave your supplies in the car in hot weather, as the adhesive may start to melt.
- An insulated bag can be useful for carrying your stoma equipment during summer time/hot weather.
- You can connect your urostomy bag to a night drainage bag for long journeys.
- Keep a night drainage bag handy in case of unexpected traffic jams.

### Food and drink

A change in water, either in your own country or abroad, can cause a change in bowel habit.

- Only bottled water should be drunk outside your own country. Check that the bottle seal has not been tampered with by holding the bottle upside down to check for leaks.
- To avoid travellers-diarrhoea be aware of what you are eating and drinking.

The following may cause problems

- Tap water and ice in drinks.
- Cleaning your teeth with tap water.
- Previously opened bottled drinks.
- Raw vegetables and fruits that you haven't peeled yourself.
- Salads.
- Shellfish.
- Cream, ice cream and mayonnaise.
- Buffet food, which has been left out for extended periods of time.
- Meat and fish, unless freshly cooked and piping hot.
- Be aware of inadequately cooked food at barbeques.

Always take Imodium (Loparamide) with you when travelling. If diarrhoea occurs avoid spicy foods and dairy products.

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## TRAVEL

### Swimming

Many people enjoy swimming and there is no reason why having a stoma should stop you from doing this, in either a pool or the sea.

Swimwear for women comes in a variety of styles, designs and colours. Choose one that is suitable for you. For men, the boxer short style has a higher elasticated waist and comes in a variety of styles, colours and designs.

If you plan to be in the water for a prolonged period of time you may want to apply additional adhesive tape around the flange/wafer for added security.

# CHEMOTHERAPY AND RADIOTHERAPY

If your original surgery was for cancer it may be suggested that you need further treatment, such as chemotherapy or radiotherapy.

Chemotherapy drugs destroy cancer cells throughout the body, whereas surgery and radiotherapy are directed to where the cancer has originated.

## Chemotherapy

Chemotherapy works by interfering with cancer cells' ability to grow within the body.

There are different ways of giving chemotherapy, e.g. by drip or mouth. Each course of treatment is specific and will be discussed with you by your oncologist (cancer specialist doctor).

People worry about the side effects of chemotherapy such as nausea and hair loss. There are good treatments for these side effects – you need to discuss this with your cancer specialist doctor.

## Radiotherapy

Radiotherapy works by directing radiation to the area where the cancer still is or has been.

## Hints and tips during your chemo- and/or radiotherapy treatment

- Smoking may reduce the effect of your treatment.
- Remember to drink enough fluid.
- Refer to your post-operative food management advice and/or discuss with your Stomal Therapy Nurse.
- Treatment may cause ulcers and soreness in the mouth and on the stoma.
- Your stoma may change in size and shape during your treatment courses.
- Contact your Stomal Therapy Nurse for any further advice.

# APPENDIX

## Kits

### Spare kit

A spare kit contains:

- A clean new stoma bag or stoma bag and flange/wafer (cut and ready for use)
- Non-woven wipes
- Disposal bag

### Travel kit

A travel kit contains:

- Hook
- Pegs
- Wet and dry wipes
- Hand washing
- Stoma bags
- Wafers/flanges
- Any accessory products you may use

## Support organisations

There are many stoma support organisations, ask your Stomal Therapy Nurse for information and details.

My Stomal Therapy Nurse is: \_\_\_\_\_

Hospital: \_\_\_\_\_

Clinic times: \_\_\_\_\_

Contact details: \_\_\_\_\_







**For more information, call  
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