

TYPES OF OSTOMIES

Ostomy Association of Austin

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Definition

- Ostomy is a surgical opening for discharge of body wastes; usually a diversion of the bowel or bladder.
- Colostomy--large bowel (colon)
- Ileostomy--small bowel (ileostomy is the most common site)
- Urostomy or Ileal conduit--bladder; 6-8" of the ileum is used as the conduit

PEOPLE OF ALL AGES HAVE OSTOMY SURGERY



Famous People

- Farrah Fawcett
- Dwight Eisenhower
- Rolf Benirschke (former NFL football player)
- Bob Hope
- Tip O'Neill

How Many People Have an Ostomy?

- Over 500,000 in US
- Estimated 1.2 million in the world.
- Close to equal number of Colostomy, Ileostomy and Urostomy



3 major reasons for ostomy

- Disease process--cancer, ruptured diverticulum, ulcerative colitis, Crohn's
- Trauma--crush injury, gunshot, penetrating injury
- Congenital Defect--imperforate anus

Definition

- Not all conditions containing the term “ostomy” are surgically created:
- Nephrostomy Tube: Inserted under fluoroscopy in radiology. Consists of a percutaneous tube being inserted through the back into the kidney to permit drainage of urine when the ureter (tube going to the bladder) is blocked.

Characteristics

- Type of stoma
- Location/skin terrain around the stoma
- Size
- Peristomal skin condition
- Budded, flat, retracted, prolapsed

STOMA POSITION AND CHALLENGES FOR POUCHING



Photo courtesy of Coloplast



Photo courtesy of Coloplast

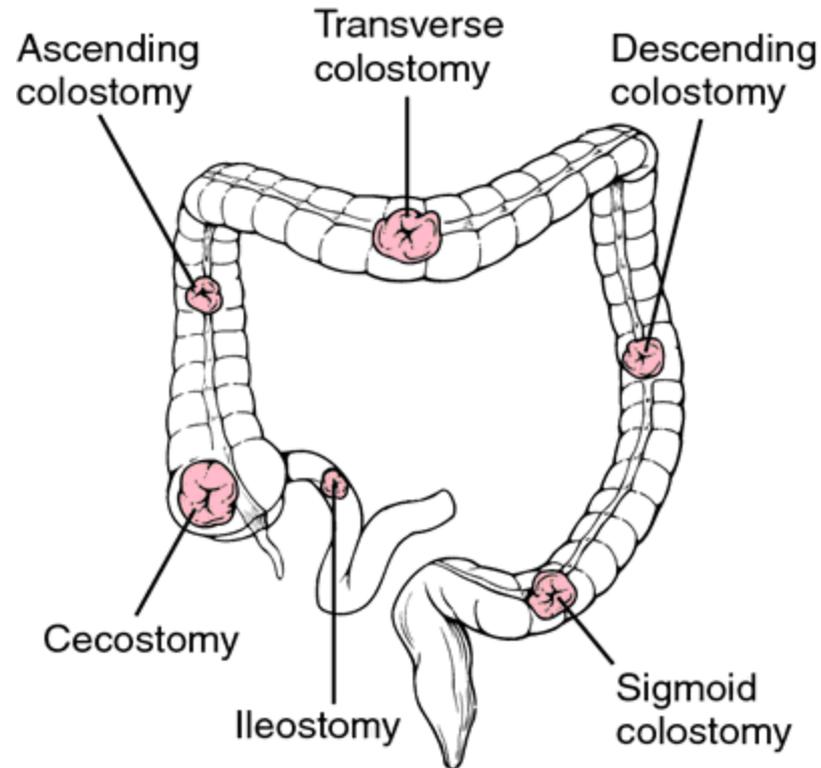


Photo courtesy of Coloplast

LANDMARKING STOMA PLACEMENT IS IMPORTANT FOR SATISFACTION AND RETURN TO ACTIVITIES



COLOSTOMY



Colostomy

- No special diet
- output is determined by the location in the colon
 - ascending colon--watery
 - transverse colon--mushy
 - descending colon--formed
 - sigmoid colon--formed

ILEOSTOMY

Diagram #2

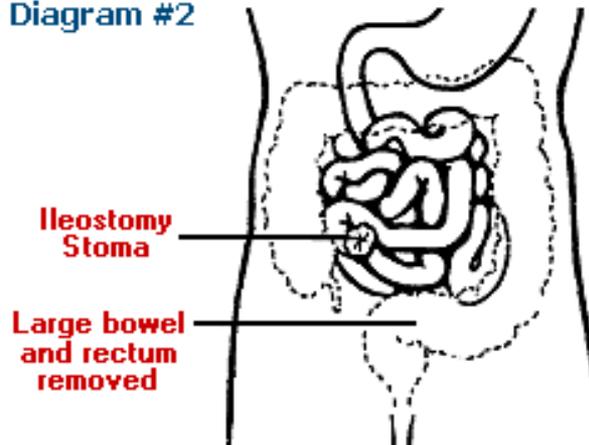
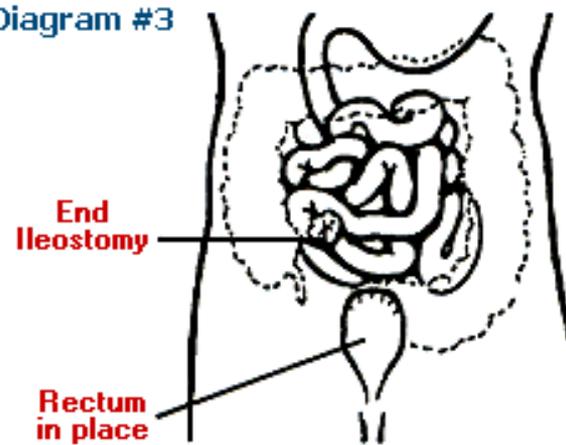


Diagram #3



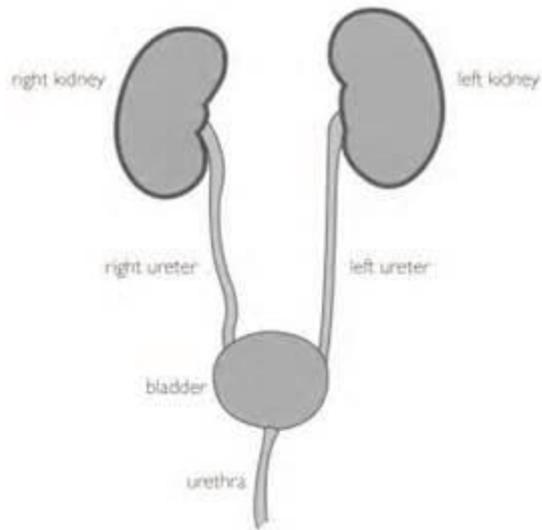
Ileostomy

- Low residue-low fiber diet needed to decrease the chance of a food blockage
- Must drink 2 - 3 liters of fluid a day to ensure they do not dehydrate
- Output is liquid, at best thick liquid
- Normal output for 24 hours is about 1 liter
- Must check pouch frequently and empty when 1/3 - 1/2 full

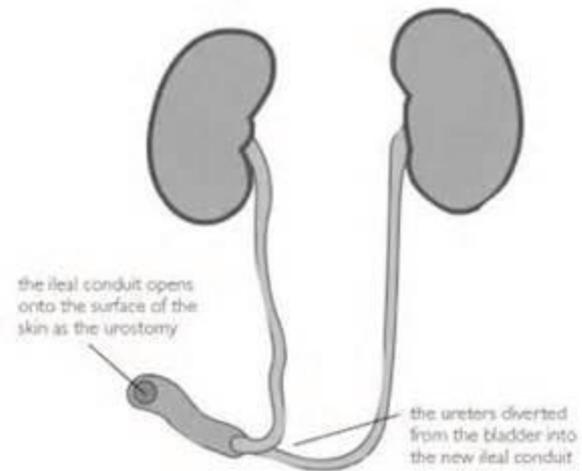
J-pouch/S-Pouch w/Ulcerative Colitis

- 2 or 3-step surgery to complete.
- Person will have a temporary ostomy, usually an Ileostomy.
- A segment of the end small bowel (Ilieum) is used to form a new rectal pouch. This must heal before it can contain stool, thus a “Diverting” ostomy is necessary to allow for this healing to take place.

UROSTOMY aka ILEAL CONDUIT



Before surgery



After surgery

Urostomy (Ileal Conduit)

- No special diet.
- Piece of small intestine is used as the conduit.
- There will be mucus in the urine.

Important Care Tips with Urostomy

- Rinsing the pouch daily to reduce bacteria in the pouch/decrease risk of kidney infection
- Rinsing/cleaning the overnight drainage bag
- Be aware that certain foods cause urine to have a strong odor

Questions?