

Managing Your **Urostomy**



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The person featured on the cover is an urostomate and wears Hollister New Image products.

Your Urostomy

This booklet can help you understand and manage your urostomy. It is important to remember that you are not alone. Every year thousands of people have urostomy surgery. For some, it is a lifesaving event. It may be performed to repair an injury or remove a tumor. Whatever the medical reason for your surgery, it's natural to have questions and concerns.

The purpose of this booklet is to answer some of your questions and to ease some of your concerns about living with a urostomy.

This booklet is provided to you by your health care team. It supplements information given to you by your doctor and your Wound, Ostomy, Continence (WOC) Nurse or ET Nurse – a nurse who specializes in ostomy care. When you have questions, write them down on page 13. You should discuss these questions with your doctor or WOC Nurse.

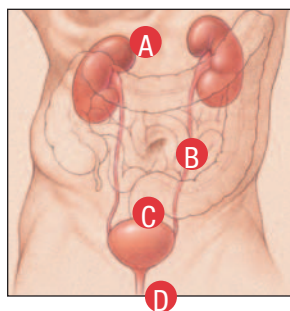
About Your Urostomy

Before your surgery

Determining where the stoma will be placed on your abdomen is a very important part of the preparation for your surgery.

Generally, an ileal conduit stoma is located on the abdomen in what is called the right lower quadrant. It's an area just below your waist, to the right of your navel – or belly button. The stoma for a colon conduit is oftentimes located in the left lower quadrant.

Before your surgery, your WOC Nurse and your surgeon will determine the best location for your stoma. Ideally, the stoma should be placed on a smooth skin surface. It should be located so you can see it easily and take care of it yourself.



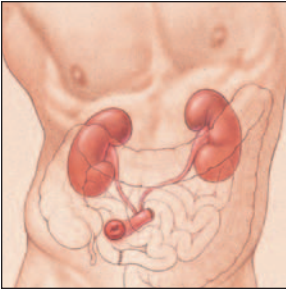
- A: kidneys
- B: ureters
- C: bladder
- D: urethra

The urinary system

The human urinary system begins with the kidneys. The kidneys are two “bean shaped” organs located just above the waistline, toward the back.

Urine or liquid waste flows from the kidneys through two narrow tubes called **ureters** and collects in the **bladder**. The flow of urine is fairly constant. A **sphincter** muscle allows the bladder to store urine until it is a convenient to empty the bladder, or urinate.

When a person urinates, the sphincter muscle relaxes, and urine flows out of the body through a narrow tube called the **urethra**.



In a urostomy, the bladder and urethra have been removed or bypassed.

What is a urostomy?

A urostomy is a surgically created opening usually on the abdomen. A urostomy allows urine to flow out of the body after the bladder has been removed. A urostomy may also be called a urinary diversion.

When a person has a urostomy, urine is no longer eliminated through the urethra. Instead, it is eliminated through the urostomy.

Because a urostomy does not have a sphincter muscle, you have no voluntary control over when to urinate. Instead, you wear a **pouch** to collect the urine.

Types of urostomies

Your surgeon may select one of several methods to create the urostomy, or urinary diversion. The most common method is called an ileal conduit.

To create an ileal conduit, the surgeon removes a short segment of the small intestine (ileum). This short segment of intestine will be used as a pipeline – or conduit – for urine to flow out of your body.

The few inches that the surgeon removes for the ileal conduit will not affect how the intestine works. The surgeon reconnects the intestine, and it continues to function just as it did before.

Your surgeon closes one end of the conduit, inserts the ureters into the conduit, and brings the open end of the conduit through the abdominal wall. This new opening in your abdomen is called a stoma.

Another type of urinary diversion is called a **colon conduit**. A colon conduit is formed in much the same way as an ileal conduit with one major difference. To construct a colon conduit, the surgeon uses a short segment of the large intestine (**colon**).

There are other types of urinary diversions. You should know what type you have. If you don't, ask your surgeon or your WOC nurse.



The stoma

- Not painful
- Always red and moist
- May bleed easily

The stoma

The stoma is always red and moist – somewhat like the inside of your mouth. It should not be painful.

The stoma may also bleed easily, especially if it is hit or rubbed. This type of minor, temporary bleeding is normal. If the bleeding continues, or if the urine from the stoma is bloody, you should contact your WOC Nurse.

You may have small tubes called **stents** that were inserted during surgery. These will be removed several weeks after surgery.

The skin around the stoma is called the **peristomal skin**. The peristomal skin should be as healthy as the skin on the rest of your body. The most important thing you can do to keep your peristomal skin healthy is to wear ostomy products that fit well and stay in place.

Each stoma is unique. Chances are, your stoma will look different from someone else's. Your stoma will probably be swollen after surgery; it may take several weeks for the stoma to shrink to its permanent size.

Urine from a urostomy

Urine will begin flowing from your stoma immediately after surgery. At first, the urine may have a slight reddish color. However, after a few days, the urine will return to its normal color.

If you have either an ileal or a colon conduit, you will see **mucous** in your urine as the urine collects in your pouch. The mucous comes from the segment of intestine that was used to form your conduit.

Urostomy Pouching Systems

Two-Piece System

One-Piece System



You can choose between Hollister one- and two-piece urostomy pouching systems. Each has its advantages.

One-Piece System

In a one-piece system, the **skin barrier** is already attached to the pouch. This means the one-piece is easy to apply. You just peel and stick.

Two-Piece System

A two-piece system is the most versatile. It comes with a skin barrier that is separate from the pouch. The pieces snap together with a flange, a part which looks like a plastic ring. It is easy to unsnap the pouch and discard the pouch as often as you like.



All urostomy pouches have a drain valve at the bottom of the pouch so urine can be drained quickly when you empty the pouch.

Drain Valve

Your urostomy pouch has a drain valve at the bottom of the pouch, so it can be emptied as needed. During the day, most people find it necessary to empty the pouch about as often as they would normally go to the rest room.

Bedside Collector

At night, a length of flexible tubing can be attached to the drain valve on your pouch. This allows the urine to flow into a bedside collector while you sleep. Many people find a bedside collector preferable to getting up during the night and emptying the pouch.



Routine Care of Your Urostomy

When your doctor says it is appropriate, you can resume your normal activities. You will get used to your Hollister pouch system and develop a schedule that fits your lifestyle. Here are a few guidelines for successful care of your urostomy.

- Empty your pouch when it is one-third to one-half full.
- Replace the skin barrier, the waxy part that sticks to your skin, every three to seven days.
- If you use soap, make sure your soap doesn't contain oils or lotions that can interfere with adhesives.
- Rinse your skin with water, and dry it completely before you apply the new pouch.
- After you apply your skin barrier, hold it against your body for 30-60 seconds. The pressure and warmth help activate the adhesive.
- If you wear a two-piece system, try putting your skin barrier on at an angle, making a diamond shape, for a smoother fit.
- You can shower or bathe with your skin barrier and pouch in place, or you can remove them before bathing. Water will not harm or flow into your stoma.
- If your skin becomes red and sore, or your pouch is not staying in place, be sure to see your doctor or ostomy nurse.
- Use a night drainage system (or get up regularly during the night to empty your pouch).

Managing Your Urostomy

Lifestyle Tips

- Drinking plenty of water each day is the best way to prevent urinary tract infections.
- Eat a balanced diet.
- Eating beets will turn your urine a reddish color. This is temporary, and is no cause for alarm.
- Asparagus and seafood may cause odor.

Skin care

It is very important for the skin around the stoma to remain healthy and free of irritation. The peristomal skin should look just like the skin elsewhere on your abdomen. To prevent skin irritation or other skin problems, you should have a skin barrier and pouch that fits properly.

Each time you remove your skin barrier and pouch, look carefully at your peristomal skin. If you notice any swelling, redness, or rash, you could have irritated skin. Sometimes – but not always – irritated skin is painful. If the problem persists or gets worse, be sure to contact your WOC Nurse.

Bathing or Showering

With a urostomy, you can shower or bathe just as you did before. Soap and water will not flow into your stoma or hurt it in any way. You may shower or bathe with your pouch on or off – the choice is yours. Soap residue can sometimes interfere with how well the skin barrier or adhesive sticks to your skin, so choose a soap or cleanser that is residue-free.

Diet and fluids

For most people, a urostomy has very little effect on diet. Chances are, you will have to increase the amount of fluids you drink. To keep your kidneys functioning properly – and to prevent urinary tract infections – you should drink plenty of water each day.

Of course, each person's needs are unique. If you have any questions about diet or fluids, check with your doctor, your WOC Nurse or a dietitian.

Odor

Odor is a major concern for people who have had ostomy surgery. Fortunately, today's urostomy pouches are made with odor-barrier film, so odor from the urine is contained within the pouch.

Some foods and nutritional supplements can cause your urine to have a strong odor as well as some medications can affect the odor of urine.

Preventing urinary tract infections

People with urinary diversions can develop urinary tract infections, and this can lead to kidney problems. Some warning signs of a urinary tract infection include:

- dark, cloudy urine
- strong-smelling urine
- back pain (where your kidneys are located)
- fever
- loss of appetite
- nausea
- vomiting

If you notice any of these symptoms, contact your doctor or your WOC Nurse.

Maintaining Your Lifestyle

Lifestyle Tips

- When flying, pack your ostomy products in your carry-on bag.
- Pre-cut your products so you will not need to carry scissors in your carry-on bag.
- Fasten the seat belt above or below your stoma.
- Store your ostomy products in a cool, dry place.
- Plan ahead. Know where to contact a local WOC Nurse when traveling.

Lifestyle Tips

- Empty your pouch before swimming.
- You may add tape to the edges of your skin barrier before swimming.
- You may need to change your pouch more often if you wear it in a hot tub or sauna.

Clothing

After urostomy surgery, many people worry that the pouch will be visible under their clothing. Some people think they won't be able to wear "normal" clothes, or that they will have to wear clothes that are too big for them. You should be able to wear the same type of clothes you wore before your surgery. In fact, today's pouches are so thin and fit so close to the body, chances are no one will know you're wearing a pouch – unless you tell them.

The pouch can be worn inside or outside your underwear, whichever is more comfortable. Women can wear panty hose or girdles. Choose a patterned swim suit, instead of one with a solid color.

Returning to work and traveling

As with any surgery, you will need some time to recover. Be sure to check with your doctor before returning to work or starting strenuous activity.

Once you've recovered from the surgery, your urostomy should not limit you. You should be able to return to work or travel just about anywhere. When you travel, take your urostomy supplies with you. Take more than you think you will need. If you need to buy supplies while traveling, you will find that urostomy products are available from select medical or surgical retailers throughout the world.

Activity, exercise and sports

A urostomy should not prevent you from exercising or from being physically active. Other than extremely rough contact sports or very heavy lifting, you should be able to enjoy the same type of physical activities you enjoyed before your surgery.

People with urostomies are able to swim, water ski or snow ski, play golf, tennis, volleyball, softball, hike, sail, or jog just as they did before their surgery. Heat and moisture can reduce the wear time of the pouching system.

Lifestyle Tips

- Empty your pouch before having sexual relations.
- Sexual activity will not hurt you or your stoma.
- You may wear a small pouch or stoma cap during sex.
- A beige pouch or pouch cover can help hide the pouch contents.
- Intimate apparel can hide the pouch and keep it close to your body.

Sex and personal relationships

Because urostomy surgery is a body-altering procedure, many people worry about sex and intimacy, and about acceptance by their spouse or loved one. For people who are dating, a big concern is how to tell someone about the urostomy.

Supportive personal relationships can be major sources of healing after any type of surgery. The key, of course, is understanding and communication.

Urostomy surgery affects both partners in a relationship, and it's something to which both partners must adjust, each in his or her own way. Let your partner know that sexual activity will not hurt you or your stoma. If you have concerns about your emotional adjustment after surgery, be sure to talk about them with your doctor or WOC Nurse.

If you are concerned about having children, you will be happy to know that after a satisfactory recovery, it is still possible for a woman who has a stoma to have children. Some men have become fathers after having urostomy surgery. If you have questions about pregnancy, be sure to ask your doctor or your WOC Nurse.

Follow Up Care

Following surgery: discharge information

Your WOC Nurse can help you keep a record of your surgery and recommend the right products to maintain the health of your urostomy.

Type of ostomy: _____

Date of surgery: _____

Stoma size and shape: _____

Recommended pouching system: _____

Other recommended products: _____

Other suggestions: _____

You can get your ostomy products through the following retailer(s):

Retailer Name: _____

Retailer Address: _____

Phone: _____

Retailer Name: _____

Retailer Address: _____

Phone: _____

Your WOC Nurse: _____

Phone: _____

Ostomy Supplies

Ostomy products are specialized supplies that are not available through all pharmacies. You may choose to use mail order supply companies or purchase through a local retailer.

Select ostomy supplies are covered by private insurance plans, military benefits, Medicare and Medicaid. Check with your carrier to find out your level of coverage and if you must use a specific supplier.

If you need assistance in finding a supplier for Hollister products, contact us at 1-800-323-4060.

Call your WOC Nurse if you notice any of the following problems listed below:

- Any sign of urinary tract infection:
 - dark, cloudy urine
 - strong-smelling urine
 - back pain (where your kidneys are located)
 - vomiting
 - fever
 - loss of appetite
 - nausea
- Skin irritation
- Urine crystals on or around your stoma
- Recurrent leaks of your pouch or skin barrier
- Warty, discolored skin around your stoma
- Excessive bleeding of your stoma
- Blood in your urine
- A bulge in the skin around your stoma
- A stoma that appears to be getting longer

Questions to ask my doctor or my WOC Nurse:

Other questions related to living with an ostomy:

Resources

Organizations that provide information

Your doctor and your WOC Nurse are very important resources. An annual physical with your doctor is something that should definitely be a part of your routine. It's also a good idea to have an annual checkup with your WOC Nurse.

For more information and a free catalog, contact Hollister Incorporated.

Hollister Incorporated

2000 Hollister Drive
Libertyville, Illinois 60048
1-800-323-4060
www.hollister.com

If your hospital does not have an WOC Nurse on staff, contact the Wound, Ostomy, and Continence Nurses Society, a professional organization. They can help you find an WOC Nurse close to where you live.

Wound, Ostomy, and Continence Nurses Society (WOCN)

4700 W. Lake Ave
Glenview, IL 60025
888-224-WOCN (Toll free)
866-615-8560
www.wocn.org

Another important source of information and support is the United Ostomy Association (UOA) an organization of people with ostomies. There are chapters of the UOA in nearly every major city in the country, and there is a national conference each year.

United Ostomy Association, Inc. (UOA)

19772 MacArthur Blvd., Suite 200
Irvine, CA 92612-2405
(800) 826-0826
www.uoa.org

Additional Resources

American Cancer Society (ACS)

1599 Clifton Road NE
Atlanta, GA 30329
1-800-ACS-2345
www.cancer.org

Crohn's & Colitis Foundation of America, Inc. (CCFA)

National Headquarters
386 Park Avenue South, 17th floor
New York, NY 10016-8804
800-932-2423
www.ccfa.org

You can get more educational materials and product information from Hollister. Ask your WOC Nurse or call Hollister Incorporated at:

Hollister Incorporated

2000 Hollister Drive
Libertyville, Illinois 60048
1-800-323-4060
www.hollister.com

In Canada:

Hollister Limited

95 Mary Street
Aurora, Ontario L4G 1G3
1-800-263-7400

Glossary

Bladder	The bladder is where urine is stored prior to voiding (urination).
Colon	Another term for the large intestine or last portion of the gastrointestinal tract
Colon conduit	An ostomy (surgical opening) created in the colon, part of the large intestine.
Mucous	A sticky thick fluid that looks like cloudy material in the urine. This is normal to see in the urine from an ileal or colon conduit.
Peristomal skin	The skin are around the stoma.
Skin barrier	Part of the pouching system; it protects your skin and adheres to your pouch
Sphincter	A muscle that surrounds and closes an opening. An ostomy does not have a sphincter.
Stents	Small tubes that may be inserted during surgery. They come out of your stoma and drain into your pouch. They are temporary and will be removed by your doctor or nurse.
Stoma	Another term for ostomy, a surgically created opening.
Ureters	Narrow tubes that drain urine from your kidneys to your bladder.
Urethra	The narrow tube from the bladder through which urine drains from your body.
Urinary diversion	General term for a surgical procedure to reroute the urinary system. Also called a urostomy.