Case 1: Parastomal hernia with flush stoma

A parastomal hernia may create a bulge on the abdomen. When convexity is clinically indicated, a firm rigid convex barrier may pose the potential for pressure related skin damage.

A flexible soft convex barrier may be an appropriate solution.

Case 2: Firm abdomen with pressure injury from use of firm rigid convexity

Pressure ulcers may be more likely when a firm convex barrier is pressing against the skin for a prolonged period of time, especially with the addition of an ostomy belt.

A flexible soft convex barrier may provide the correct fit while removing the cause of pressure.

Case 3: Stoma located in a crease

A firm rigid convex barrier may not conform to the abdominal contours and “pop off” when used in a creased area.

A flexible soft convex barrier may be considered a more appropriate fit.

Case 4: Stoma located in abdominal folds

Abdominal folds can compromise the seal of the barrier. A convex shape can enhance the barrier fit.

A flexible soft convex barrier may match to the correct depth of the folds, conform to the abdominal contours and provide less peristomal pressure.

Case 5: Stoma height less than 20mm (2cm)

A stoma that does not protrude above the skin may cause leakage problems under the skin barrier.

A flexible soft convex barrier may provide the right depth of convexity to help with stoma protrusion.

Case 6: Immediate post-op stoma with firm distended abdomen and off-centered lumen at risk for mucocutaneous separation

A mucocutaneous separation may occur as a result of poor healing, infection, or excessive tension at the mucocutaneous junction.

A flexible soft convex barrier may help achieve a correct fit with less pressure at the base of the stoma.

Case 7: Loop stoma

The distal limb (arrow) of a loop stoma may discharge mucous which can undermine the barrier seal.

A flexible soft convex barrier may help provide the right fit with less pressure around the stoma to minimize undermining.

Case 8: Pyoderma gangrenosum

Trauma to the peristomal skin may initiate and aggravate a pyoderma gangrenosum ulcer. Efforts should be made to alleviate pressure and friction.

A flexible soft convex barrier may provide less pressure than firm convexity.
OSTOMY CARE TIPS

Where a Soft Convex Skin Barrier May Improve Fit

References:


For product questions, sampling needs, or detailed clinical questions concerning our products in the US, call 1.888.808.7456. In Canada call 1.800.263.7400.

Routine follow-up with your healthcare professional is recommended.

Prior to using any ostomy products/accessories be sure to read all product inserts and labels.

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