

# **Urostomy**Patient Information Booklet

Information is available in alternate formats upon request

## **Your Health Care - Be Involved**

- Be involved in your health care. Speak up if you have questions or concerns about your care.
- Tell a member of your health care team about your past illnesses and your current health condition.
- Bring all of your medicines with you when you go to the hospital or to a medical appointment.
- Tell a member of your care team if you have ever had an allergic or bad reaction to any medicine or food.
- Make sure you know what to do when you go home from the hospital or from your medical appointment.

Patient safety is very important to the Queensway Carleton Hospital and this information is provided to patients/families to help inform you of your essential role in your own safety.

The information contained in this booklet is not specific medical advice, nor a substitute for medical advice. For your safety, it is advised that you speak with your doctor and healthcare team about your particular health care needs.

Protect Yourself! Clean your hands frequently and ask your health care providers and visitors to do the same. Clean Hands Saves Lives.

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# A New Beginning Learning to Live with a Urostomy

## Introduction

Welcome to the Queensway Carleton Hospital.

This booklet has been prepared by Nursing and Medical Staff at the Oueensway Carleton Hospital to give you a better understanding of your ostomy, how it functions and how you should care for it.

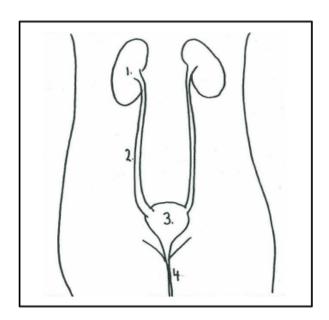
You may be experiencing a variety of feelings regarding your ostomy. Learning to live with an ostomy may seem like a great undertaking for now, but with time, patience and teaching you should be able to resume your normal life style.

There are many resource people available to assist you and your family in the hospital. When you are discharged from the hospital follow-up care is available from community services. Further support and assistance is available through the United Ostomy Association.

As you read through this booklet you will probably have questions and concerns. Please make a note of these and they can be discussed with your Doctor and nurses.

# Your urinary system and how it works

Your urinary tract is made up of two kidneys, two ureters, one bladder and one urethra. The kidneys, about five inches long are bean shaped and located just above the hip bone, towards the back of the body. Urine is a waste product produced by the kidneys. A narrow tube called a ureter connects each kidney to the bladder. Urine passes through these tubes and is stored in the bladder until you are ready to eliminate it. A small tube called the urethra drains the urine from the bladder.



- 1. Kidneys
- 2. Ureters
- 3. Bladder
- 4. Urethra

# What is a Urostomy?

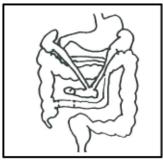
When the bladder is diseased or is injured and must be removed, another exit for urine must be made surgically. This is called a urostomy. A small piece of bowel is removed from your intestine. After removing this piece, the two ends of the intestine are rejoined and the digestive system will continue to work as before. The piece removed is closed at one end and the ureters are connected to it. The other end is brought out through an incision made on the abdomen. This piece of bowel is then rolled back like a cuff and sewn to the skin. This is the opening or stoma of the urostomy. The stoma is mucousy and reddish-pink in colour and is similar to the tissue that lines your mouth. The stoma is flexible and soft and is not sensitive to touch or pain, but has many blood vessels and may bleed slightly when rubbed. Urine is constantly being produced. When your bladder is removed, your storage area for urine and voluntary control is lost. Since this piece of bowel cannot

store Urine, it will drain most of the time, therefore a pouch or appliance must be worn at all times to collect the urine. The piece of bowel used is lined with cells that will still produce mucous so there will be a small amount of mucous on your stoma and in your urine.

# **Types of Urostomies**

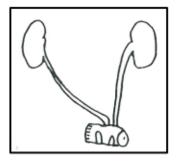


- 1. Stomach
- 2. Colon
- 3. Small Intestine
- 4. Ileum
- 5. Rectum



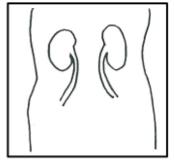
#### 1. Ileal Conduit

The ureters are attached to a piece of small bowel (Ileum).



#### 2. Colonic Conduit

The ureters are attached 10 a piece of large bowel (colon).



#### 3. Ureterostomy

One or both of the ureters are brought out to the skin.

# **Your Appliance**

## What is a Urostomy Appliance?

There are many different types of urostomy appliances of all shapes and sizes, but the basic care remains the same. A urostomy appliance consists of a skin barrier, which is placed around the stoma to protect the skin and a pouch which collects the urine. The appliance can stay in place for four to seven days. The pouch should be emptied when it is half-full.

## When do I change my appliance?

A good time 10 change your appliance will be first thing In the morning, as there is less urine draining at that time. Reasons to change it are: leaking, itching or burning sensation around to stoma or within the four to seven day time period that you have set for yourself. Try to anticipate leakage by inspecting your appliance once or twice a day.

## How do I change my appliance?

Caring for your urostomy will become part of your daily routine. Since urine drains continuously, collect all your supplies - pouch, skin barrier, pencil, scissors and paper tape if needed, and prepare them before removing the old appliance.

- 1. On the back of the skin barrier, draw an opening 1/8 of an inch larger than the stoma.
- 2. Cut the skin barrier out following the pattern you have traced. Run finger in circular motion around the inside of skin barrier to remove sharp edges.
- 3. Empty the contents of the appliance you have on at present, while sitting on the toilet.
- 4. Remove the old appliance gently and throw out the skin barrier. The bag can also be thrown out or it can be rinsed out and hung up to dry.
- 5. After removing the appliance you may have a shower or just wash the stoma and skin around it with water. Be sure to remove any remaining paste. Soap may be used but must be rinsed off carefully. Dry the skin thoroughly and inspect It for any irritation or redness. Skin irritation can be caused by urine leading onto the skin or by incorrect fitting of the appliance. Shave the area around the stoma with an electric razor if it is necessary. Creams, lotions and powders should not be used under the skin barriers because they could Interfere with it sticking to the skin.

- 6. Hold skin barrier over the centre of the stoma opening and place it down around the stoma. Press down on the adhesive. Rub your finger around the inside part of the skin barrier to help it to adhere to the skin. If there is any redness around the stoma, make sure that the area Is covered with the new skin barrier. This will help the area to heal.
- 7. Attach the pouch to the ring of the skin barrier. The pouch fits over the skin barrier and attaches to it in a "tupperware" like fashion. Usually it is easier to start at the bottom edge and run your finger upwards in a circular motion until the pouch is attached.
- 8. Paper tape should be applied around the edge of the skin barrier if not pre-taped to prevent the edges from curling up.

## How do I clean my pouch?

Your pouch should be washed daily.

- 1. Remove your pouch gently, leaving the skin barrier in place around the stoma.
- 2. Clean the stomach and skin barrier with water.
- 3. Reapply fresh and dry pouch.
- 4. Soak old pouch with a solution made up of one part vinegar and three parts water. Do not soak for more than half an hour. Rinse the pouch well and hang it up to dry. This pouch will then be ready to use the next day.

#### How do I empty my pouch?

Empty the pouch when half-full.

- 1. Sit on the toilet with pouch between your legs.
- 2. Release the stopper and empty the urine into the toilet.
- 3. When the pouch is empty, wipe the stopper with toilet paper and close it. Then wash your hands.

## Will I need to empty my pouch during the night?

You can connect your pouch to a bedside drainage appliance for the night. You will be able to sleep longer because it will keep your pouch empty. You should keep the tubing of this appliance free of kinks and the drainage bag should be pinned to the lowest part of your bedside. Be sure to clean your pouch, tubing, and drainage bag in the morning, using the vinegar solution.

#### Can I bathe or shower?

You can have a bath or shower with or without your appliance. Soap and water is good for the skin and stoma. If you leave your appliance on, be sure to dry it completely so it does not cause skin irritation.



# **Urostomy Diet**

## Do I need a special diet?

No, but it is important to eat a well-balanced diet. You should drink at least eight to ten glasses of fluids every day. This will help to avoid urinary infections and unpleasant odours.

#### How can I control the odour?

Today most ostomy appliances are made to be odour resistant. Normally urine has a slight odour which is noticed when emptying the pouch. Ways to control the odour include:

- drink eight to ten glasses of fluids each day.
- clean and rinse your pouch and night drainage appliance with vinegar solution each morning.
- change your appliance regularly to prevent leaks.
- empty your pouch when it is only half-full.
- make sure the tap on the bottom of your pouch is kept clean and dry.
- eating asparagus will cause an unpleasant odour which will be noticed only when emptying the pouch.

## Will medications affect my Urostomy?

Always check with your physician before taking any medication. They are absorbed in the digestive tract so they will not affect your urostomy. Some may change the colour and odour of your urine.

#### What about physical activities?

You will be able to return to your previous level of activity with time. It will take at least six to eight weeks to recuperate. During this time avoid activities such as lifting, vacuuming, gardening, exercises: sports, etc. Contact sports and heavy lifting should be avoided for six months.

## Will I be able to go swimming?

Your usual appliance can be worn for swimming. It is best to empty your pouch beforehand. The pouch will not show under certain types of swimwear as patterned suits for women and boxer trunks for men. Be careful when diving from poolside, because the force of the water can loosen your appliance.

#### What about sexual activity?

Resumption of sexual activity often takes time. Many fears and anxieties can be alleviated through open discussions between you and your partner.

As a result of surgery, some impairment of sexual activity may occur. If you or your partner have any other concerns or questions please consult your physician.

#### Will I be able to wear the same clothes?

Most people can wear the same clothing. Ostomy appliances are light weight and should not be noticed under your clothing, especially if the pouch Is emptied on a regular basis. Pouch covers are available. They are made from a soft comfortable fabric which keeps the plastic away from your skin. Tight belts should not be placed directly over the stoma.

#### Will I be able to travel?

Always remember to keep some supplies with you In your hand luggage. It is always with you In case you need to change your appliance while travelling and luggage can be lost. Before you leave, the United Ostomy Association can give you information about where supplies can be bought in the area you are visiting. If you plan to camp, be sure to sleep on a raised cot so that your night drainage bag will be able to hang properly.

## What can I expect when I go home?

Before discharge from the hospital your nurse will make the necessary arrangements for home care follow-up in the community. Your ostomy supplies will be ordered and a list of suppliers In your area will be given to you. Further support and assistance Is available through the United Ostomy Association and Clinics which are run by Enterostomal Therapists. Make a follow-up appointment with your surgeon.

#### When can I return to work?

Most people are able to return to work after surgery. However, remember It will take at least 6 - 8 weeks before resuming such activities as vacuuming, lifting, golfing and general exercises. Your body will let you know when you are ready to return to your previous levels of activity.

## Are there any financial resources in the community?

Some financial assistance may be available from the following:

- Extended Health Care Plans
- Provincial Medical Plans
- Disability Pension Recipients
- Veterans
- Canadian Cancer Society may offer assistance if the ostomy Is a result of cancer.
- Some local United Ostomy Association Chapters may offer assistance.
- Other local community associations.

# **Glossary**

**Appliance:** Equipment worn over your stoma which consists of:

a pouch which will collect the draining urine.

a skin barrier which adheres the pouch to your skin and protects it (the skin) from the urine.

**Colon:** The large bowel or intestine.

**Enterostomal Therapist:** 

A nurse who has additional training in the care of patients with a stoma.

**Ileum:** The last portion of the small bowel or intestine.

**Stoma:** The open part of the bowel that is brought out onto

the abdomen. It is reddish-pink in colour.

**Urostomy:** An alternate way for urine to leave the body which

must be made surgically.

**Kidney:** Where the urine is made.

**Bladder:** Where the urine is stored.

United Ostomy Association:

A non-profit organization consisting of people with ostomies.

It is with a great deal of appreciation and gratitude that Oueensway Carleton Hospital acknowledges the following individuals, without whose guidance and support the booklet would not have become a reality:

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# Mission, Vision & Values

#### **OUR VISION**

Trusted as one of Canada's most caring and innovative health partners, fostering vibrant, healthy communities

#### **OUR MISSION**

To provide high-quality, compassionate and coordinated care for the people and communities we serve.

#### **OUR VALUES**

- Collaboration
- Accountability
- Innovation
- Respect

## **Our Cornerstone Programs are:**

- Acute Rehabilitation
- Childbirth
- Critical Care
- Emergency
- Geriatric
- Medicine
- Mental Health
- Surgical

