

The ABCs of Stoma

What is stoma?

A colostomy (or ileostomy) stoma is an **artificial opening** made in the colon (or small intestine) to **divert faeces and flatus** out-side the abdomen where they can be **collected in an external appliance**. Depending on the purpose for which the diversion has been necessary, a stoma may be **temporary or permanent**.

THIS IS A Stoma

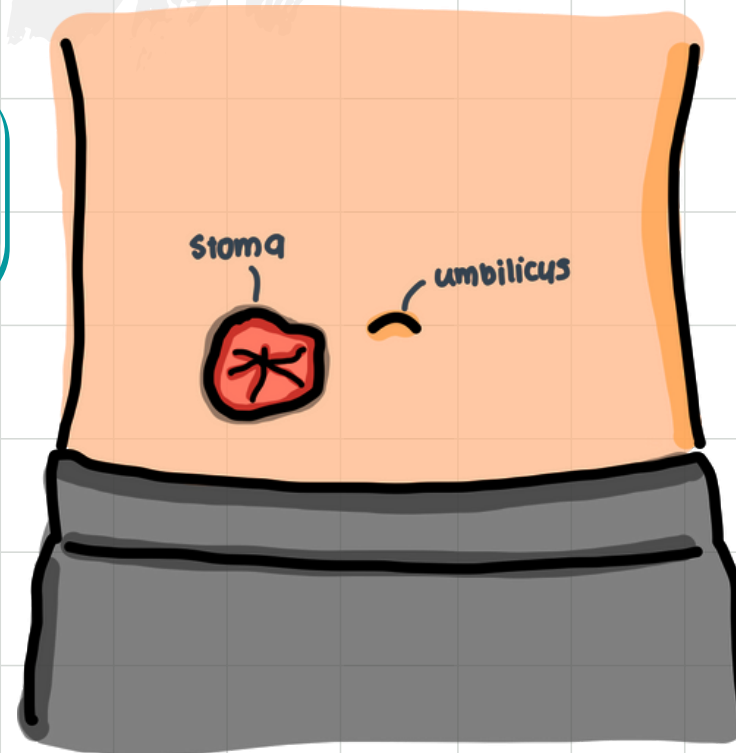
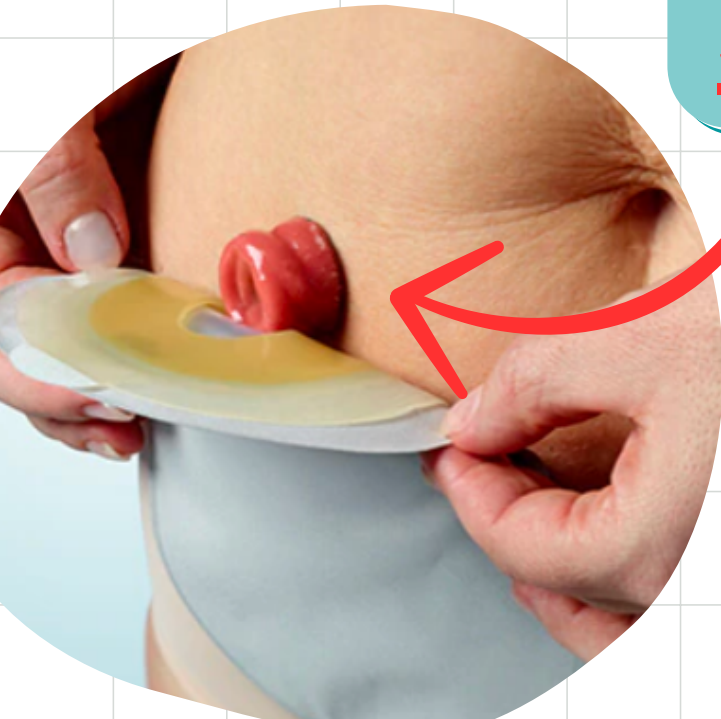


Figure shows a schematic diagram of stoma

COLOSTOMY (ileostomy) TYPES

1 Loop Ileostomy

Definition :

Loop ileostomy is often used for defunctioning a low rectal anastomosis / an ileal pouch

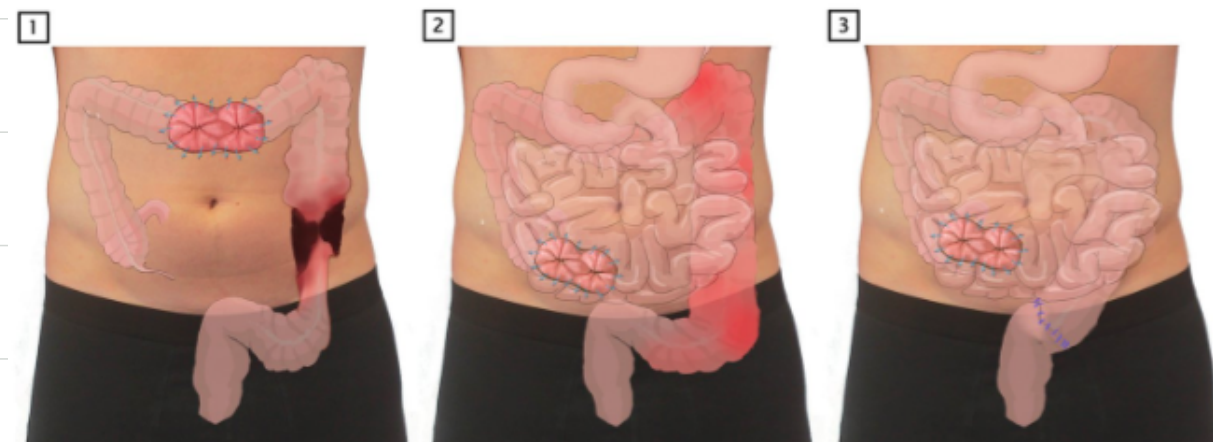
Information

1. A **knuckle of ileum** is **exteriorized** through a skin trephine in the right iliac fossa
2. **Incision** is made in the **distal part of the knucle**, and then **pulled over the top** to more **proximal part to creat a spout** on the proximal side of the loop with a flush distal side sitll in continuity.

Allows near perfect **defunctioning** but possible **restoration** of continuity (taking down the spout and reanastomosing partially divided illeum)

Advantages:

Advantages of a loop ileostomy over a loop colostomy are the ease with which the bowel can be brought to the surface and the relative absence of odour.



- Care is needed when the ileostomy is closed, so that the **suture line obstruction does not occur**.
- Closure of a loop ileostomy can be a technically challenging procedure, particularly if there are **dense adhesions resulting from previous surgery**

Definition :

An End ileostomy is formed after a subtotal colectomy without anastomosis, when it may later be reversed or may be permanent after a panproctocolectomy.

Information:

1. The ileum is normally brought through the rectus-abdominis muscle.
2. The use of **sprout** was originally described by Bryan Brooke; this should project some **2-4cm** from the skin surface. A disposable appliance is placed over the ileostomy so that it is a snug fit at skin level.

Careful attention to the terminal ileal mesentery should be taken ensure that it is not too bulky.

More information:

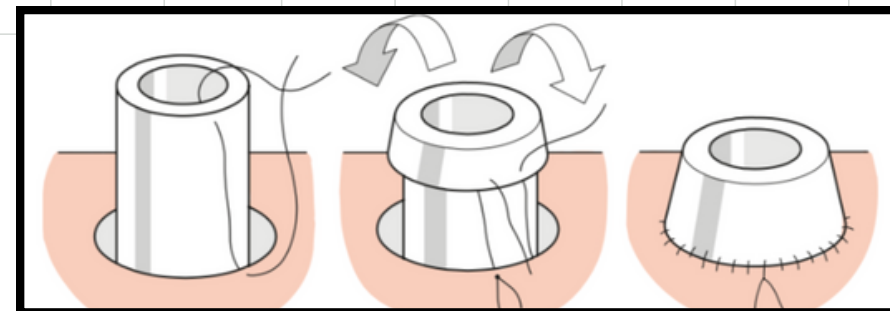
- There may be an **"ileostomy flux"** while the ileum adapts to the loss of the colon.
- While ileostomy output can amount to **4 - 5 litres per day**, **losses of 1-2 litres are more common**. A **consistent ileostomy output** in excess of **1.5 litres** usually **associated with dehydration and sodium depletion in the** absence of intravenous therapy.
- stools thicken in a few weeks and are semisolid a few months. The help, skill and advice of the stoma care nurse specialist are essential

Advantages:

Modern appliances transformed stoma care.
Therefore, skin problems are unusual.

Complications:

Prolapse, retraction, stenosis, bleeding, fistula and parastomal hernia.



Ileostomy formation. Surturing the free extremity of the proximal ileum to the skin edges after eversion to form a spout (after Brooke).

3 Transverse Colostomy

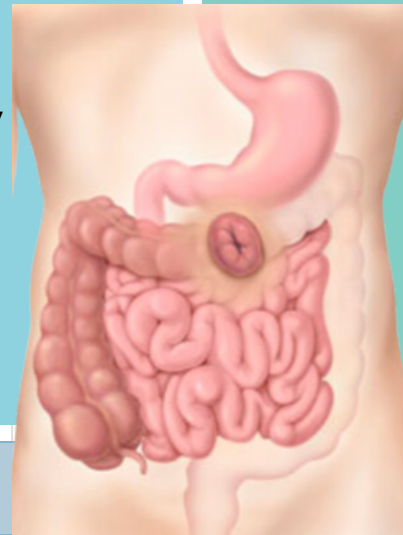
Definition :

A Transverse Colostomy is done where the colon goes across the top of the abdomen. The stool in this area is usually soft. This is because it has not gone through much of the colon yet, and still contains a lot of water.

Types of Transverse colostomy:

Loop colostomy

Creates a stoma through which stool exits. In this type, the **colon stays connected to the rectum**. As a result, patients will sometimes pass stool or gas through the rectum.



Single - barrel colostomy

Removes the colon below the colostomy.

This includes:

- The **rectum**
- **Anal opening**

This type of colostomy is **permanent**.

Double - barrel colostomy

Divides the colon into **2 ends** that form **separate stomas**. Stool exists from one of the stomas. Mucus made by the colon exits from the other. This tpe of transverse colostomy is the **least common**.



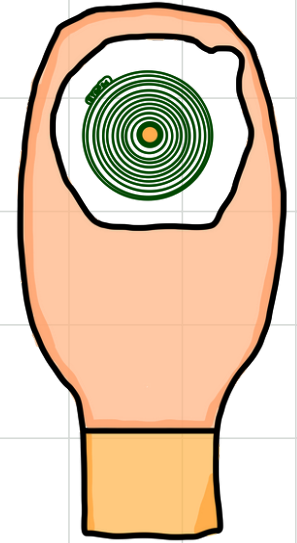
Stoma Bags and Appliances

Stoma output is collected in disposable adhesive bags.

Ileostomy appliances:

Drainable bags

- left in place for 48 hours , while colostomy appliances are simply changes 2 or 3 times each day.
- A wide range of such bags are currently available. Many now incorporate an adhesive backing, which can be left in place for several days.



In most hospitals, a stoma care service is available to offer advice to patients, to acquaint them with the latest appliances and to provide the appropriate psychological and practical help.

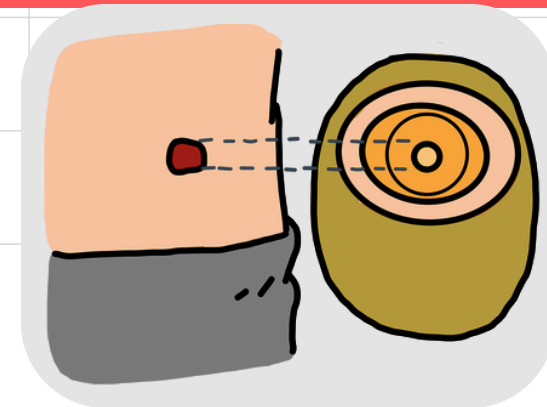
Complications

Stoma complications are **underestimated and common**.

Complications:

Skin irritation	Prolapse
Retraction	Ischaemia
Stenosis	Fistulation
Bleeding	Parastomal hernia

Occasionally, these may require surgical revision. Sometimes, this can be achieved with an incision immediately around the stoma but on occasion reopening the abdomen and freeing up the stoma may be necessary.



Repairing parastomal hernias

- technically challenging and has high recurrence rate (simple suture)
- require: transfer to opposite site of abdomen / insertion of prosthetic material within abdominal wall around the stoma

Answers for insta quiz

Do check out our Insta
@ SIGMUM.CSJB to try out our question and test your knowledge!

Question 1

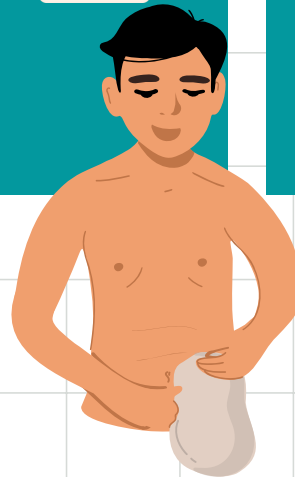
B. End ileostomy

A. Loop ileostomy

E. Double-barrel Colostomy

D. Single-barrel Colostomy

C. Loop Colostomy



Question 2

A. Loop ileostomy

Question 3

B. Apply a barrier cream to the irritated skin

Question 4

B. To divert feces and flatus outside the abdomen

