



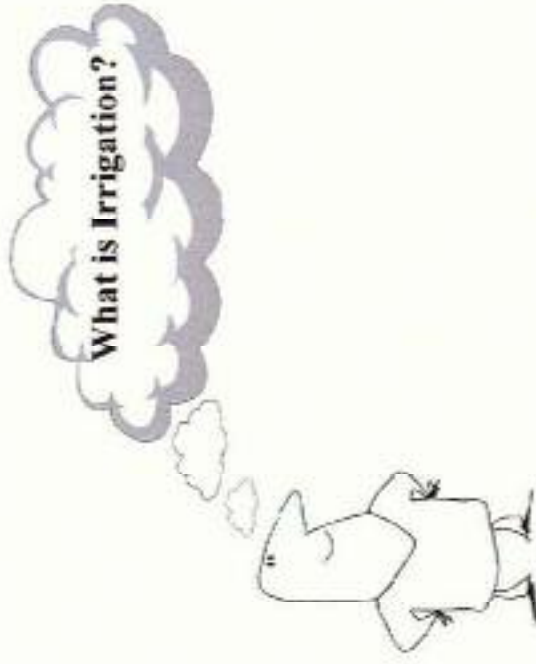
Stoma Care Department

A Patient Guide to Colostomy Irrigation

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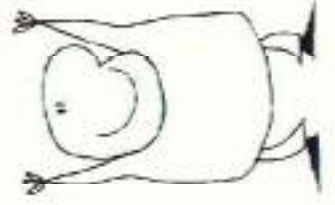
This leaflet aims to provide easy to follow guidelines and information on successful colostomy irrigation for those new to and established in this method of stoma management.



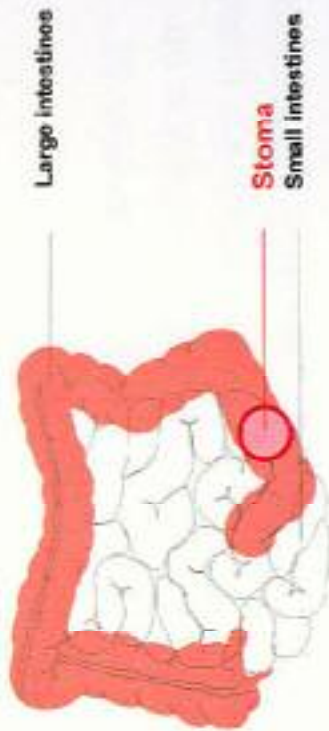
Irrigation is an alternative method of managing your colostomy. Water is instilled through the stoma to wash out waste bowel contents daily or every other day.

If the procedure is carried out properly, no bowel motion should come out of the stoma between irrigations, which means only a small appliance is needed to cover the stoma.

Irrigation can give you control over when your stoma works.



How does Irrigation Work?



- ◆ The bowel normally gets rid of bowel motion (faeces) by the bowel muscles squeezing and relaxing, along with waves of movements called '*peristalsis*' to move the faeces along the bowel until it is passed out through the stoma.
- ◆ Irrigation involves regularly instilling 1/2 to 1 litre of lukewarm tap water into the bowel via the stoma. This stimulates the action of '*peristalsis*' and muscle movements, so a regular pattern of bowel emptying is achieved.
- ◆ This means you can be in control of when your stoma works.

Finding Out about Colostomy Irrigation



It is advisable to discuss colostomy irrigation with your Stoma Care Nurse, as not all people with a colostomy can irrigate.



More importantly, you must get permission from your Consultant Surgeon prior to commencing the procedure.

What are the advantages of Colostomy Irrigation?






- ◆ A feeling of being in control and regained continence.
- ◆ Less worry of appliance leakage, smells and disposal of bags.
- ◆ More confidence in your personal and social relationships.
- ◆ Reduced skin problems associated with leakages and allergies.
- ◆ You can stop irrigation at any time if it doesn't suit you.
- ◆ More varied diet, less wind and constipation.
- ◆ Cost effective. Reusable equipment, easily stored.

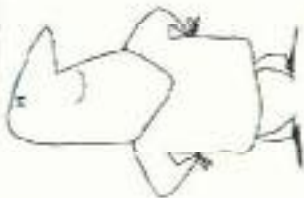


What are the disadvantages of Colostomy Irrigation?



- ◆ The procedure can be time consuming, e.g. 1 hour. This can cause problems in a busy household.
A cartoon illustration of a family of five people standing together. There is a man, a woman, and three children of different ages.
- ◆ You need a regular, unhurried routine to perform irrigation properly.
A cartoon illustration of a person digging a hole in the ground with a shovel. A large black 'X' is drawn over the hole, indicating it is not a good idea.
- ◆ If irrigation is performed over a long period of time, e.g. several years, if stopped the function of the bowel may become sluggish and require regular laxatives.
- ◆ Irrigation is not successful for all people.
A cartoon illustration of a man in a white shirt and grey pants looking at a long, solid red bar. The bar is positioned vertically, and the man is looking at it from the side.

How often do I need to Irrigate?



- ◆ The frequency of irrigating depends on the individual.
- ◆ Generally, you will need to irrigate every 36-48 hours. However, some people need to do it daily.
- ◆ Ask your Stoma Care Nurse for advice on this.



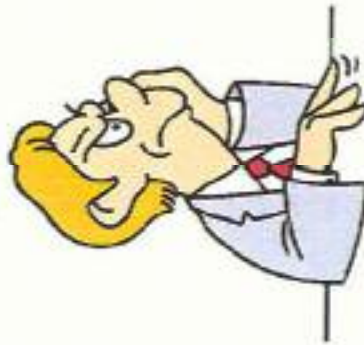
How do I Irrigate?



- ◆ Your Stoma Care Nurse will visit you daily for 5-7 days to teach you the procedure.



- ◆ Gradually, by the end of the week you will be able to perform irrigation on your own.



- ◆ It can take a while to regulate the bowel with irrigation, possibly 4 to 8 weeks.

- ◆ During this time it is advisable to wear your normal appliance until you feel confident that the stoma will not act between irrigations.

Equipment needed

- ◆ Reservoir bag, cone, tubing
- ◆ Irrigation sleeve
- ◆ Jug
- ◆ Lubricating jelly and glove
- ◆ Pegs
- ◆ Disposal bag
- ◆ New appliance or cap



The Irrigation Procedure

- 1 Gather all equipment, connect irrigation kit.
- 2 Remove your appliance or cap and attach the irrigation sleeve.
- 3 Prepare the reservoir bag. Close the clamp on the tubing, fill the bag with 1 to 1½ litres of lukewarm tap water.
If the water is too hot or cold you will experience stomach cramps or difficulty in instilling the water.
- 4 Open the clamp and allow the water to flow along the tubing, ensuring it is clear of big air bubbles.
- 5 Hang the reservoir bag on a hook above shoulder height and place it where you can see it. (You can use a coat hanger to hang the bag over a curtain or shower rail.)
- 6 Either sit on the toilet or stand - whichever you find most comfortable - with the bottom of the irrigation sleeve in the toilet.
- 7 Lubricate a gloved finger (use little finger) and insert it into the stoma to feel the direction of the bowel.
- 8 Lubricate the tip of the cone and insert it into the stoma in the direction you felt the bowel. Hold the cone securely with one hand.
- 9 Open the clamp and allow water to flow steadily over 10 - 15 minutes. Watch the bag and wheel on the clamp to monitor the speed of the water flow.
To begin with use ½ to ¾ litres of water and gradually build up. Your Stoma Care Nurse will guide you on how much water you will need to instil.

10 When the desired amount of water is given or you feel full, close the clamp and remove the cone.

11 Wait approximately 15-30 minutes for complete return of the water and bowel motion. This is helped by massaging your stomach and making sharp coughs.

12 You may like to peg up the irrigation sleeve and flush the toilet regularly to reduce odour whilst the stoma is working.

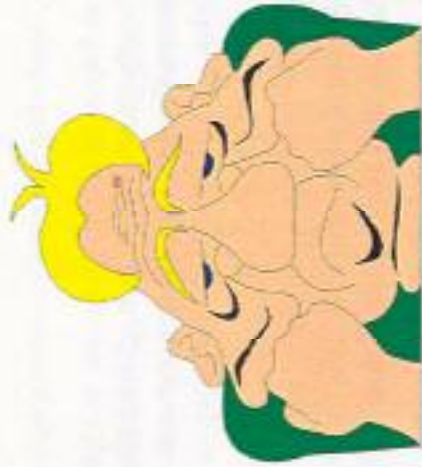
13 After most of the water and bowel motion has returned, rinse out the irrigation sleeve with a jug of water or water left in the reservoir bag. Peg the bottom of the sleeve to the top and continue your normal bathroom routine, e.g. shower or shave.

14 When the stoma has finished acting, remove the irrigation sleeve and dispose of it. Clean the stoma and surrounding skin. Apply new appliance or cap.

That's it!



Common Problems



- ◆ Difficulty inserting the cone
- ◆ Difficulty in instilling water or backflow
- ◆ Abdominal pain
- ◆ Stoma acting between irrigations
- ◆ Bleeding or soreness from stoma
- ◆ Water or bowel motion slow to return or in less quantity than usual

Solutions to Common Problems

- ◆ **Difficulty inserting the cone**
 - You may be too tense
 - Gently insert a lubricated, gloved finger into the stoma to open it up. Deep breathe and try to relax.
- ◆ **Difficulty instilling water / backflow**
 - Cone tip blocked with bowel motion
 - Remove and clear cone tip, then start again.
 - Cone resting against bowel wall or in the wrong position
 - Adjust position of the cone, feel the direction of the bowel through the stoma, with a gloved finger, again if unsure.
 - Insufficient height of the reservoir/water bag
 - Raise the level of the bag to above shoulder height.
- ◆ **Abdominal pain**
 - Water flowing too quickly into the stoma
 - Water flowing too quickly into the stoma causes pressure within your bowel and cramping pain.
 - Stop irrigation until the cramps cease and start again slowly.
 - Temperature of the water is too hot or cold
 - Water that is too hot or cold can cause cramps.
 - Make sure that the water is lukewarm, this can be checked by the temperature control on the water bag.

- ◆ **Stoma acting between irrigations**

- Leaving too many days between irrigations
 - Review the frequency of irrigation. Seek advice from your stoma care nurse. You may need to irrigate daily for a while.
- Hurried or inadequate technique
 - Assess your routine, find the time in the day when you know you will not need to rush. Seek advice from your stoma care nurse on technique.
- Too much water used for irrigation
 - If too much water is instilled into the bowel, it can seep out during the day. Equally, if not enough water is used it can have the same effect.
 - Seek advice from your stoma care nurse.
- Dietary intake
 - Review your food intake as some foods and alcohol have a laxative effect.

- ◆ **Bleeding or soreness from the stoma**

- Trauma from cone insertion
 - Trauma can be caused from being too tense, muscle spasm or the size of the stoma. To relieve tension, deep breathe, use lubricating jelly. Orabase Paste placed on top of the stoma can also ease soreness. Seek advice from your stoma care nurse if symptoms persist.

◆ **Water/bowel motion slow to return**

The bowel is sluggish

Massage your stomach in the direction of the bowel, give some sharp coughs, pull your stomach in. These actions help to stimulate the bowel muscles to squeeze and return the water and bowel motion.

Dehydration

The bowel will naturally absorb water. Less fluid return is a sign that you may need to increase your fluid intake.



Any difficulties with irrigation should be discussed with your Stoma Care Nurse.



When NOT to irrigate



- ◆ If you have a stomach upset or diarrhoea, you must stop irrigating until the diarrhoea has stopped.

- ◆ You may need to stop irrigating temporarily if you undergo hospital investigations such as a colonoscopy, barium enema, an operation or other forms of treatment.

Once you are able to irrigate again, you should then irrigate daily for at least three days or until the stoma does not act between irrigations, before returning to your normal irrigation routine.



Always seek advice from your Stoma Care Nurse if you are unsure when to stop or recommence irrigation.

COLOSTOMY IRRIGATION
is a safe and effective method of
regaining a feeling of
control and continence with your stoma



as long as the procedure is performed correctly
and professional advice is followed



Acknowledgements

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