

Jejunostomy

The word stoma means opening

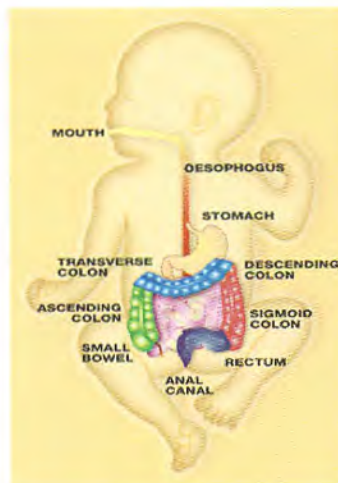
A stoma is required for many different reasons. The surgeon and stoma nurse will explain about the medical condition of the small bowel (jejunum) see diagram, large bowel (colon) or rectum. They will also explain the reason why a stoma is needed and the type of stoma your child will need.

The length of time your child will need a stoma varies according to your child's condition and the surgeon's plan of care. In most cases the stoma will be temporary.

During the operation the surgeon will bring a piece of bowel out onto your child's tummy. This bowel is called a stoma: there can be one or two pieces of bowel which can be together or separate. When you look at the stoma you will see the pink/red lining of the bowel which is stitched in place on your child's tummy. If your child does have two stomas (mucous fistula), one stoma will push poo out of the body and the other will produce mucus. Mucus is

produced by the bowel for lubrication in order to aid the passage of faeces (poo). The mucus fistula enables the mucus to be expelled from the non functioning bowel so that it does not become stagnant. The functioning stoma will have a bag covering it to collect the poo; the non functioning stoma may be covered by gauze and the gauze can be changed as needed.

Diagram of the alimentary tract



Jejunostomy

Jejunostomy

This is an opening into the jejunum which is the first part of the small bowel (see diagram). During the operation the surgeon will bring out a piece of the jejunum onto the child's tummy, which produces watery poo to come out into a bag. The stoma is a pink/red colour similar to the inside of your mouth, when the stoma is touched it does not hurt. The child will have no control of when the watery poo comes out and it can come day and night.

Having a jejunostomy may effect the absorption of food.

Diagram of a jejunostomy

