Living with a Colostomy

Information for colostomates and their carers

Freephone helpline: 0800 328 4257
Dedicated to Colostomates and their Carers

Our thanks go to:- Mr Robin Phillips - Consultant Surgeon, Di Jones - Clinical Nurse Specialist, Stoma Care and Jeanette Berry - Clinical Nurse Specialist, Stoma Care for their advice in compiling this booklet.

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Becoming a friend...

A ‘Friend’ is asked to make a regular commitment of £12.00 (or more) to the Association each year, either by standing order, cheque or postal order. This will ensure that we are able to continue to produce four issues of Tidings per year - full of the latest news, product information, hints and tips and real-life stories from other colostomates.

This regular payment will ensure that there is always a helping hand for those who need it, now and in the future - including some colostomates yet to be born. There are many thousands of adults and children, who, now and in the years to come, will receive a life saving colostomy.

Membership is fully confidential. All our members’ names and addresses are protected by the Data Protection Act and are never given out to anyone.

We operate a 24hr helpline, and have the training and ability to give practical help, support and encouragement. However, the advice we give is strictly non-medical.

Visit www.colostomyassociation.org.uk
The Colostomy Association is a registered charity that represents the interest of people with a colostomy. We provide support, reassurance and practical information to anyone who is about to have a colostomy, or already has a colostomy.

We really can make a difference... our findings show there are approximately 60,000 colostomates living in the UK and with over 6,400 permanent colostomy operations being performed each year - we need to be here for them!

The Association provides assistance to those who are new to living with a colostomy as well as those who have been colostomates for many years.

• We publish our own informative leaflets and booklets plus a quarterly magazine called “Tidings”, written by colostomates for colostomates. Your contributions are always welcome. Do you have a story or anecdote to tell? Travel tales, hints and tips – whatever – we look forward to hearing from you. Remember ordinary people can achieve extraordinary things which can serve as encouragement and incentive to us all.

• We have over seventy volunteers throughout the UK who are all colostomates willing to make personal visits to offer support. We attend hospital open days, and offer a twenty-four hour helpline.

• Our website reflects all of the above, and more! Importantly, we are involved in ongoing consultations with the National Health Service on your behalf and will keep you informed of issues that may affect you.
It is almost certain that early on you will be told of our existence and will be given a copy of our booklet. You will receive a high standard of professional care from doctors, hospital nurses, as well as the stoma care nurse, during the time you are under medical care.

We on our part have to be experts in living with a colostomy and that experience is available to you through personal contact with our national teams of volunteers, and through our phone and helpline services.

Our contact with you remains strictly private and confidential, and you will be a friend for life. That means you can contact us at any time with a problem, no matter how big or small or to simply obtain reassurance and information.

How to contact us

- Website:  [http://www.colostomyassociation.org.uk](http://www.colostomyassociation.org.uk)
- E-mail:  cass@colostomyassociation.org.uk
- By post:  Colostomy Association
  15 Station Road
  Reading
  Berkshire RG1 1LG
- Telephone:  0118 939 1537
- Freephone:  0800 328 4257
How we are organised

We have a small headquarters with staff who are trained and responsible for the administration of the association. Our office hours are from 9am–5pm Monday-Fridays. You can call our Helpline Freephone 0800 328 4257, at any time and we aim to have a colostomate available to talk to you.

A helpful range of advisory literature is also readily available on request.

Covering the country are a number of experienced contact volunteers who are often asked to visit patients before their colostomy surgery, and afterwards in hospital, usually at the request of the stoma care nurse. Home visits by the volunteers can also be arranged at your request.

We attend manufacturers’ open days/exhibitions where you can come along and see what stoma bags, accessories and services are available. It’s a wonderful opportunity to meet and share with other colostomates. Be sure to come and visit us at our stand. We’d love to meet you.

Many stoma care nurses also organise events of this kind, including open days where you can come and learn more about your colostomy, in a friendly atmosphere, and discuss any problems you may have or just enjoy the company. We give these events our full support.
Living with a Colostomy

Care and After-care

Being able to see or speak to someone who is an expert at living with a colostomy provides living proof that it is possible to return to a full and active life with the same quality as others.

The stoma care nurse

Stoma care nurses are qualified nurses who are specially trained to look after and care for patients with a stoma, so along with the surgeon, ward staff and your family you will be well supported during your stay in hospital.

Your stoma care nurse will continue to care for you when you go home. In the early days she may visit you there to check all is well, and see that you are managing your colostomy. She will also advise you about the outpatient’s clinic to attend if you are having problems. However long you have your colostomy there will always be a stoma nurse to help you.

Throughout our literature we refer to the stoma care nurse as female. However we are pleased to acknowledge that many more male nurses are choosing this specialist field.
**After the operation**

On coming round from your surgery you may find a number of tubes attached to your body. This is perfectly normal.

- A drip may be placed in your arm to give you fluids or blood, to build up your blood supply after surgery.

- A naso-gastric tube may be passed up your nose into your stomach, to keep it empty and prevent you feeling sick, though this is not always the case.

- A catheter may be passed into your bladder to drain off urine.

- One or two tubes into your abdomen or rectum will drain excess fluids from the wounds, to help them heal more quickly and prevent bruising and infection.

- Pain control (analgesia), will be discussed with you prior to your surgery by the pre assessment nurse/anaesthetist. Often an epidural line into your spin is suggested although other forms of post operative pain control may be offered.

- You will be wearing your first colostomy pouch over the stoma. Don’t panic, this bag is often much larger and different to the ones you will eventually use at home. It is transparent and drainable sometimes with a clip or clamp at the bottom. This allows the nurse to examine the stoma, and for the contents to be drained away without disturbing the bag.
Colostomy management

Learning to look after your colostomy

Whilst in hospital your stoma care nurse will assess your appliance needs, measure your colostomy and make sure that the bag fits snugly around the stoma to avoid leakage and sore skin.

You will be shown how to change your bag and how to look after your skin. Your stoma care nurse will also show you how to cut the right size hole from a gauge chart or template which you will take home and will discuss your prescription needs, bag disposal and how to obtain further supplies.

Stoma bags and accessories - how do I decide what stoma bag suits me?

Your stoma care nurse will help you to decide what best suits your needs immediately after your operation. As you progress at home you will soon discover that there are very many different types of stoma bags available, such as one-piece, two-piece, bags with flushable liners, stoma caps etc.

You may want to change to an alternative and your stoma care nurse will explain what is available and where samples can be obtained.

We also provide a list of companies who give a free sampling service, but you should consult your stoma care nurse for advice before changing to a new product.

There is a wide range of accessories available to help make life as comfortable as possible. These include girdles, support belts, deodorisers, wipes, skin protective wipes, lotions and creams, adhesive removers, stoma paste, rings, disposal bags, underwear, swimwear etc.
Changing the bag

It is a good idea to begin to establish a routine for changing the bag. As you get used to your stoma you may find that at certain times of the day it is more active than others – such as shortly after a meal. Don’t choose this time to change the bag but select a time when it is relatively inactive – perhaps first thing in the morning. Here is a simple guide to the changing routine.

• Check you have everything you need: water, soft wipes, a new bag and a plastic disposal bag.

• If you are using a drainable bag open the closure at the bottom and drain the contents into the toilet before removing it. To do this you can sit well back on the toilet seat, although some people find it easier to kneel or bend over the toilet.

• Now remove the old bag, working slowly and gently from the top to the bottom.

• If you are using a closed bag there are several alternatives available to you. Your stoma care nurse will advise on the best option for you.

• Wash the stoma and surrounding skin with warm water. Don’t use harsh solvents, soaps or disinfectants.

• Use the soft absorbent wipes to dry the area (soft kitchen roll is ideal).

• Fit the new bag, making sure that it is secure all the way around.

Periodically, when changing your bag, check the size of the stoma with the guide provided with your bags to make sure that you are still using the correct size.
Colostomy management

Obtaining supplies

An initial supply of bags will be given to you before you leave the hospital, together with your prescription information card giving full details of all your requirements. Take the card along to your GP who will retain the details on your medical records and issue prescriptions in future. You can either take your prescription along to your chemist, post it to your supplier delivery company, or order online and have your supplies delivered direct to your door.

Remember: always allow sufficient time to send your prescription and never leave yourself short of supplies. Most delivery companies will obtain prescriptions on your behalf.

The Colostomy Association does not process prescriptions, does not stock supplies and does not show partiality to any supply company or manufacturer.

Will there be any costs?

All patients who have a permanent colostomy are exempt from prescription charges irrespective of age. However, an exemption certificate form FP92A must be obtained from the family health services authority. Contact your GP/local health authority.

A temporary colostomy is not exempt from prescription charges. For future supplies of products it may be more cost effective to obtain a pre-paid certificate for prescription charges. Men and women aged 60+ are automatically exempt from prescription charges.
Disposal of used bags

Once it has been emptied and removed, the bag should be sealed inside a plastic bag and put in the dustbin. Don’t try to flush it down the toilet as it will cause a blockage. Some local authorities provide a collection service for clinical waste i.e. used bags. Bags with flushable liners are also now available and your stoma care nurse can give you more information on these.

Irrigation - A different approach

Once you are fit and well you may hear about irrigation which is an alternative to wearing a colostomy bag all the time, it is a way of keeping the bowel clean by washing water through it every day or every other day. However, it is not an option for all colostomates, as some medical conditions or types of stoma mean that this process is not suitable. You must seek the advice of your consultant surgeon or stoma care nurse. Never attempt to do this by yourself. For more information contact us on our Helpline - Freephone 0800 328 4257 for a fact sheet.
Early days at home

Coming home from hospital

When you first come home from hospital you may feel a bit emotional and need to gain confidence before mixing with others. Initially you may not want to go out because your stoma is making unpleasant noises and is behaving erratically.

This is perfectly normal in the early days. Due to the fact that the bowel takes time to settle down after the surgery, your abdomen may be tender to touch, which can make changing your bag difficult. All of this will improve with time. You may like to talk things over with someone who has a colostomy, if so please pick up the telephone and give us a call. We can help each other.
At home

Once at home, you may have to alter arrangements as you settle in to the new daily routine of managing your colostomy. Set aside the time you need, perhaps more time to begin with, especially in the bathroom.

Be patient with yourself and others. It will take less time as your strength and ability increase. Remember to give yourself a pat on the back for each new accomplishment.

Take time out

Taking a bath or shower is such a great way of relaxing and feeling fresh and clean, especially after activity, and this can be done either wearing a bag or not. No water will enter or harm your stoma.

• Try to avoid using bath preparations with oil in them as these can leave oily residue on the skin and prevent the bag from sticking properly. Make sure your skin is clean and dry before fitting the bag. (Using protective skin wipes can help as they leave a protective film on the skin).
Road to recovery

Your recovery will take at least three months, although there are no fixed rules. We are all individuals but with the after-effects of surgery you should rest when you feel tired. Although exercise is important, initially just taking short walks out in the fresh air will help you gradually build up your strength again (Some suggested exercises are included within this booklet). Avoid over-exerting yourself and be careful not to lift heavy things. Remember, you have had major surgery and your abdominal muscles are weaker. It may be advisable to wear a support belt or girdle – seek the advice of your stoma care nurse or consultant surgeon. If you are unsure or worried call us to talk through any concerns you may have. Freephone 0800 328 4257.

One step at a time is the rule. Keep your mind interested in events and don’t hide away. Stay in contact with your family and friends but excuse yourself when you feel tired. They will understand.

Bear in mind that having a stoma alone isn’t a disability unless you let it become one. You can live a full and active life with a colostomy. The only thing that will stop you is your own attitude.
Getting back to normal

Do I need different clothes?

You will normally be able to wear the same clothes and underwear as you did before. However, if your colostomy is very high up on your waist this can be a problem, but help is at hand. High waisted trousers for men can be obtained at several outlets. Some men prefer to stop wearing belts and feel more comfortable wearing braces. For the ladies there is a wide choice of flattering clothes and swimwear in the high street. There are also specialist providers to whom your specialist can direct you. For more information contact us on Freephone 0800 328 4257.

Will I be able to return to my job?

Once you have fully recovered, and providing there are no other medical implications, there is no reason why you should not return to the job you did before you had your colostomy. Your doctor will advise you when you are fit enough.

If your work is strenuous and involves lifting heavy weights, or is work that puts a strain on the abdominal muscles, you should first seek advice about wearing proper support belts/girdles. Initially, information can be obtained by contacting us on Freephone 0800 328 4257. It is advisable, where possible to contact your stoma care nurse to be measured.

After surgery it’s normal to feel tired more quickly even if you are not doing strenuous work.

Will my driving be affected?

Once you are well enough to drive you may find the seat belt is uncomfortable across your stoma. If this is a problem try fitting a “Klunk Klip” to the seat belt. These can be obtained from most high street car accessory stores, or on line. The Klip is attached to the inertia-reel of the seat belt preventing it from constricting your colostomy.
Can I travel at home or abroad?

Having a colostomy should not prevent you from travelling at home or abroad, whether it is for business or pleasure. The only difference is that you should plan ahead and prepare a little more than before.

For a comprehensive guide on travel, both within the UK and abroad, please contact our Helpline on Freephone 0800 328 4257.

Can I return to sports and exercise?

As mentioned earlier, walking is excellent exercise and a good starting point after your operation. Other than physical contact sports, there are virtually no restrictions. If in doubt check with your stoma care nurse who may suggest a stoma guard if your sport is more strenuous. Thousands of colostomates are enjoying a huge range of activities such as golf, sailing, cycling, swimming, as well as more down to earth pursuits like gardening and rambling.

Can I go swimming?

The answer is “Yes – you certainly can go swimming”. Here are a few suggestions to help you feel more confident:

- You may like to try wearing a smaller stoma bag under your swimming costume or trunks as these can be more discreet.

- If you are worried about damaging your stoma whilst swimming, although this is unlikely to happen, you could try wearing a stoma shield. Your stoma care nurse will be able to advise you or alternatively you can contact us on our Helpline – Freephone 0800 328 4257.
Gentle exercise is an important aspect of getting better after an operation. During your stay in hospital you will gradually be able to do more until you are fit enough to go home. However it is important that you should continue to progress when you are at home.

Why is exercise important?

Exercise improves the circulation and so helps the healing process. It can make you stronger, and help you do more without feeling weak and breathless. It will also stimulate your appetite.

The exercises included in this information booklet are similar to gentle Pilates exercises.

Currently, although there is no research to support that these exercises will prevent you developing a parastomal hernia, they may be effective in strengthening the muscles (known as core muscles), which support the stoma. A hernia can occur when the abdominal muscles are weak; strengthening the muscles may help to prevent this.

• Check with your stoma nurse, GP or surgeon regarding the most appropriate time for you to start the exercises.

• It is better to do a little often. Overdoing it in the early days may slow down your recovery.

• You may feel that your wound is gently pulling as you exercise. This will not do you any harm.

• Do not do any exercises that cause you a lot of pain.
Read through these pages a couple of times before you try any of the exercises.

• It may be helpful when first undertaking them to ask your partner or a friend to read the exercises out to you as you try each one.

• Make sure that you are comfortable before you start. Never exercise just after you have eaten, or if you are unwell.

• Do not worry if you can only achieve some of the exercises; any gentle exercise is better than none at all.

• These exercises can be repeated daily. Some of them can even be done when you are sitting watching the television!

The following exercises encourage core strength. They work deeply increasing the strength of the back and stomach muscles, reducing back problems and potentially the risk of post-operative hernia.

They can be performed on the bed, lying on a thick mat so that your spine is gently cushioned, or sitting on a chair.
1 Pelvic Floor Exercise

- Sit tall and evenly on a hard chair, (use a cushion if necessary), with your feet on the floor hip distance apart.
- Breathe deeply expanding your rib cage and try and sit up a little taller.
- As you breathe out gently squeeze the muscles around your bottom (anus), and at the same time think of drawing up the muscles of the vagina or between the scrotum and anus. This is known as “engaging” your pelvic floor. Try to keep the spine and pelvis still and shoulders relaxed.

TIP: These muscles can often be located by sucking your thumb! (Or when you try and stop yourself from passing urine). Repeat x 5.

2 Arm Raises

This exercise can help reduce tension in the neck and shoulders.

- Remain seated with your buttocks even on the chair, making sure your feet are firmly on the ground.
- Breathe in and sit a little taller.
- Breathe out, engage your pelvic floor muscle and gently raise your right arm. Keep the elbow slightly soft and the shoulder blade set down your back.
- Breathe in and return the arm to your side.

TIP: Do not lean to the side as you raise your arm. Keep sitting tall. Repeat each arm x 3.
Exercise following stoma surgery

3 Pelvic Tilts (Use a thick mat on the floor or lie on the bed)

- Lie on your back, with your knees bent and feet on the floor. Try to keep the natural shape of your spine so that you will probably have a small gap under your lumbar region, just enough to fit half a hand underneath.
- Breathe in and try to relax the upper body.
- Breathe out, gently engage the pelvic floor muscle, and then start to slowly curl your lower spine off the mat, one vertebra at a time, increasing the arch in your back.
- Breathe in at the end of this pelvic tilt.
- Breathe out, draw up the pelvic floor and flatten your spine down one vertebra at a time.

TIP: Do not attempt to come up too high. Keep hold of the pelvic floor while moving.

4 Leg lifting (do not undertake this exercise for 8-12 weeks post surgery or until you feel comfortable).

- Lie on your back as above, keeping the natural shape of your spine and your pelvis very still.
- Breathe in, expanding your rib cage.
- As you breathe out, draw up the pelvic floor, bring one knee up towards you so you have a right angle at your hip and knee.
- Breathe in, in this position.
- Breathe out, draw up the pelvic floor and slowly return the foot to the floor.

TIP: Do not put pressure on the foot that remains on the floor. Keep your core muscles working?
Repeat each leg x 3.
5 Knee Rolls

- Lie as above with your arms out to the sides.
- Breathe in.
- Breathe out, draw up the pelvic floor and gently roll your knees a little way to one side. Do not allow the knees to drop to the floor.
- Breathe in, in this position.
- Breathe out; draw up the pelvic floor, and think of using your abdominal muscles to bring the knees back up.

**TIP:** Keep both shoulders blades on the floor.
Repeat each side x 3.

6 Kneeling (do this exercise on the bed or use a thick mat on the floor)

- Kneel on all fours, making sure your knees are below your hips and your hands are under your shoulders. The elbows should not be locked and the back should be flat.
- Breathe in to the ribcage.
- Breathe out, draw up the pelvic floor, and try and lift your tummy towards your spine.
- Breathe in and release.

**TIP:** Try and keep your pelvis and spine still.
Repeat x 3.
7 Calf Raises

- Stand tall, keeping your shoulders relaxed and your arms down by your sides.
- Breathe in and push up on to your toes.
- Breathe out, engage your pelvic floor, and slowly lower yourself down.

TIP: Try not to lean forward. Think of rising up in a straight line. Repeat x 5.

8 Standing Side Bend

- Stand tall, keeping your arms by your side, and your shoulders relaxed.
- Breathe in, and think of standing taller.
- Breathe out, and draw up the pelvic floor. Gently lean to one side without pushing the hips out, sliding your hands down the outside thigh.
- Breathe in, and come back up to standing.
- Repeat to the other side

TIP: Do not lean forward; imagine you are between two parallel walls. Repeat each side x 3.
9 Relaxation

- Lie down on your back with your legs outstretched. Have your legs outstretched. Allow the toes to drop to the sides. Have your arms palms up just a little way away from your body and relax the body into the mat. Take your breathing deep into the tummy, and just allow sometime for your muscles to relax.
LIVING WITH A COLOSTOMY

What should I eat?

By the time food reaches the colon, it has been almost completely digested, so having a colostomy does not mean you will have to change what you eat.

It is not necessary to follow a special diet (unless you have been advised to do so by your doctor for another specific medical condition). Try, as far as possible, to eat a diet containing a variety of items from all the food groups illustrated in the following diagram. This will ensure that your body receives all the essential nutrients (protein, carbohydrate, fat, vitamins and minerals) it needs.

Healthy Diet Options

- **Fruit** • **Vegetables**
  Choose a wide variety

- **Meat** • **Fish and Alternatives**
  Choose lower fat alternatives whenever you can

- **Fatty and Sugary foods**
  Try not to eat these too often and, when you do, have small amounts

- **Bread** • **Other cereals and Potatoes**
  Eat all types. Choose high fibre kinds whenever you can

- **Milk and Dairy Foods**
  Choose lower fat alternatives whenever you can

Helpline
Freephone: 0800 328 4257
available to you 24 hours
Should I eat more fibre and less fat?

Bear in mind that, although current advice is to eat more fibre and less fat:

- Too much fibre (e.g. pulses and bran based cereals) may cause wind or loose motions.

- If you are trying to regain lost weight, it may be better to use full fat milk and cheese, rather than semi-skimmed or skimmed alternatives.

Are there any foods colostomates should avoid?

We are all different. Some colostomates can eat anything. Others have found, by experience, that it is best to avoid certain foods. If you have persistent problems try keeping a food diary you my find it helps.

If you suspect a food causes problems, try it at least three times, separated by an interval of at least a week, before eliminating it altogether.

If you find you are cutting out most of the items in any one of the food groups, shown in the diagram, then it is advisable to seek individual dietary advice. Your GP can refer you to a state registered dietician.
Often it’s not what you eat!

General Guidelines

The questions most frequently asked by colostomates are about wind, diarrhoea and constipation.

Wind
Beans, peas, onions, leeks, unripe banana, potato which is cooked then cooled (e.g. in potato salad and Shepherds Pie) contain a type of sugar and starch that can escape digestion and enter the colon, where they are fermented to produce gas. It may also help to avoid foods which are high in fibre or contain unmilled grains and seeds. Beer and fizzy drinks may also increase the amount of wind.

Diarrhoea
Very spicy foods and large amounts of lager and beer can irritate the lining of the digestive system and cause frequent loose motions. These effects can be reduced by eating spicy dishes in small quantities with plenty of rice, pasta or potatoes and never drinking alcohol on an empty stomach. Pure fruit juices and some fruits and vegetables may cause diarrhoea in some people.

Constipation
Eating more fibre-containing foods can help to prevent constipation. Try to increase the amount of fibre by choosing wholemeal (rather than white) bread or pasta, wholegrain cereals or more fruit and vegetables. It is best to make these changes gradually to avoid problems with wind. Fibre acts by absorbing water to make motions softer, so it is very important to drink plenty of fluids, at least six to eight glasses a day.
The consistency of your stoma output doesn’t only depend on the type of food you eat. Water is absorbed from undigested food as it passes along the colon. If a large section of the colon has been removed, then your stoma is likely to work more often and the output to be fairly liquid, or of a toothpaste consistency. If most of the colon is still intact, then motions will be more formed and less frequent.

Don’t assume that food is to blame for the way your stoma behaves. There may be some other reason.

**Wind may be due to:-**
- Eating in a hurry
- Meals at irregular times
- Going for long periods without food

**Diarrhoea may be the result of:-**
- A stomach bug
- Stress or an emotional upset
- Antibiotics

**Constipation may be due to:-**
- Not drinking enough fluid
- Not getting enough exercise
- Some medicines e.g. certain painkillers or antidepressants (check with your doctor or pharmacist)

This information is intended as a general guide. You should seek medical advice if you experience persistent alteration in your stoma functioning, or if you develop new digestive symptoms.
Making the decision to talk about your colostomy

To tell or not to tell? It is most important to preserve your relationship with family and friends and to form new friendships. Only you can decide who you should tell; the decision is up to you. Obviously you would need to involve your partner and you may feel more comfortable telling your children together. Please remember, having a colostomy has not changed who you are, you are still the same person you were before surgery. It may take some time to come to terms with your altered body image, just remember help is at hand. If you would like to talk to someone who has a colostomy call our Helpline on Freephone 0800 328 4257.

Marital relationships are especially important. Your partner knows you have had surgery, and may be afraid of hurting you. To cherish your relationship you will need to sit down and talk about how you both feel. Patience and understanding will be required by both of you. Think of how you can adapt to any weakness in stomach muscles using pillows or positioning. Be prepared to seek help from your stoma care nurse or a professional counsellor, if you feel you need to.

Will it affect my sex life?

Your surgeon can explain if any sexual impairment is likely and how this can be overcome. Obviously he will do everything possible to avoid affecting the sex organs through surgery. Impotence may occur which may or may not be permanent. There can be nerve damage to the male sex organs, and scarring or narrowing of the vagina causing discomfort for a woman during intercourse. Discomfort can be temporary or in some cases may be permanent. Medical help and advice can be sought. Should you experience any such problems do not be embarrassed to discuss them with your surgeon or stoma care nurse. Most people with a stoma can enjoy a healthy sex life.
Helpful groups and organisations

Beating Bowel Cancer
39, Crown Road, St Margaret’s, Twickenham, Middlesex TW1 3EJ
Contact:
Tel: 020 8892 5256
Fax: 020 8892 1008
Specialist Bowel Cancer Nurse Advisory line: 020 8892 1331 (Tues 9:30am-5pm and Fri 9am-1pm).
Website:
www.beatingbowelcancer.org

Benefits Enquiry Line
General information on illness, disability and carer benefits.
Contact:
Freephone: 0800 882200

Cancer Bacup
3 Bath place, Rivington Street, LondonEC2A 3JR
(Cancer information)
Contact:
Freephone: 0808 800 1234
Website:
www.cancerbacup.org.uk

Cancer Research UK
PO Box 123, Lincolns Inn Fields, London WC2A 3PX
Contact:
Tel: 0207 009 8820.
Fax: 0207 269 3100.
Website:
www.cancerresearchuk.org

Carers National Association
20/25 Glasshouse Yard, London EC1A 4JT
Contact:
Tel: 020 7490 8818
Fax: 020 7490 8824
E-mail: info@ukcarers.org
Carers line: 0345 573 369 advice for carers at the cost of a local call

Colon Cancer Concern
9 Rickett Street, London SW6 1RU
Contact:
Info-line: 08708 506050
Fax: 020 7381 5752
E-mail:
info@coloncancer.org.uk
Website:
www.coloncancer.org.uk
Admin line: 020 7381 4711
(To answer your calls about issues such as symptoms, tests, treatments and ways in which you can help yourself stay healthy against colorectal cancer.)

Continence Foundation
The Continence Foundation, 307 Hatton Square, 16 Baldwin Gardens, London EC1N 7RJ
(Preferably enclosing a large S.A.E).
Contact:
Tel: 0845 345 0165
Mon–Fri 9:30am-1pm
E-mail:
tincare@continencefoundation.org.uk

Crossroads Association
(caring for carers)
10 Regent Place, Rugby, Warwickshire CV21 2PN
Contact:
Tel: 0845 450 0350
Fax: 01 788 565 498
E-mail:
communications@crossroads.org.uk

Ileostomy & Internal Pouch Support Group
National Office, Peverill House, 1-5 Mill Road, Ballyclare, Co Antrim BT39 9DR
Contact:
Freephone: 0800 018 4724
Fax: 028 9332 4606
E-mail:
ia@ileostomypouch.demon.co.uk

Impotence Association
PO Box 10296, London SW17 9WH
Contact:
Tel: 020 8767 7791

Incontact
United House, North Road, London N7 9DP
Contact:
Tel: 0870 770 3246
Fax: 0870 770 3249.
E-mail: info@incontact.org
Website: www.incontact.org

Incontinence
National Advisory Service for parents of children with a stoma (NASPCS)
51, Anderson Drive, Valley View Park, Darvel, Ayrshire KA17 ODE
Contact:
Tel: 01560 322024

National Association for Colitis and Crohns (NACC)
4 Beaumont House, Sutton Rd, St Albans AL1 5HH
Contact:
Information line: 0845 130 2233.
NACC in-contact support line: 0845 1303344.
Disability living allowance support line: 0845 130 2233
E-mail: nacc@nacc.org.uk
Website: http://nacc.org.uk
Admin line: 01727 830038

National Key Scheme (NKS) from RADAR
Unit 12, City Forum
250 City Road, London. EC1V 8AF

Urostomy Association
Central Office, 18, Foxglove Avenue, Uttoxeter, Staffordshire ST14 8UN
Contact:
Tel: 0870 7707931
Fax: 0870 7707932
E-Mail:
uoa@centraloffice.fsnet.co.uk

Macmillan Cancer Support
89 Albert Embankment, London SE1 7UQ
Contact:
Cancer line: 0808 808 2020
Mon-Fri.9am/6pm
E-mail:
cancerline@macmillan.org.uk
Website:
www.macmillan.org.uk
Living with a Colostomy
Information for colostomates and their carers

15 Station Road
Reading
Berkshire
RG1 1LG

Tel: 0118 939 1537
Freephone: 0800 328 4257
E-mail: cass@colostomyassociation.org.uk

For more information visit...
www.colostomyassociation.org.uk

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