



How to Handle Abdominal Skin Irritation Problems

By,
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Preface:

This information is presented in non-medical lay terms to help those new to living with an ostomy determine what steps can be taken to address skin problems when adjusting to having an ostomy. The writer is not a medical professional, but is experienced in the care necessary to solve problems that are common when learning to live with an ostomy. In the course of this compilation of information, some conditions will be discussed and potential solutions reviewed, but the person involved must assess the situation and determine which method can be used to solve their particular problem and execute accordingly. It is also important to recognize when a Wound Ostomy Care Nurse (WOCN) is required to resolve a problem.

It is not uncommon for new ostomates to encounter skin problems as they adjust to having a stoma to care for after surgery that results in a permanent or temporary Colostomy \ Ileostomy. Skin that prior to has only been in contact with undergarments is now subjected adhesives that are used to attach a pouch collection system. The problem is further compounded by the need to find a pouch system that works for the individual's personal body configuration and the condition of the skin surrounding the stoma. For the inexperienced, the stoma is the outlet that has been formed from the Colon or upper digestive tract and routed through a hole cut in the abdomen to expel body waste for those without rectal function. Leakage during the adjustment period can compound the process of finding a pouch system that will work for the individual involved.

Objective:

To help people become acclimated to living with an Ostomy and to learn the skin care necessary to permit them to lead a normal life! Providing tips that will allow the new ostomate recognize when a problem exists and what solutions to try in an effort to quickly resolve the issue.

Skin Condition:

In order to successfully learn to live with Colostomy or Ileostomy, it is critically important to keep the skin surrounding the stoma in good condition free of any kind of irritation or infectious outbreak. Any indication of skin irritation should be dealt with immediately to avoid escalating the problem to a painful level. The content of fecal matter is highly acetic and contact with body skin can quickly evolve into a serious rash or infection. Any problem that develops should be quickly cared for to avoid the development of serious issues that may require professional medical attention.

The area of abdominal skin surrounding the stoma, if left unattended, can quickly develop into a problem requiring the services of a WOCN (Wound Ostomy Care Nurse) professional and last for days or weeks to achieve resolution. If your skin becomes itchy under the wafer, this is the first indication that the wafer should be changed due to the body waste breaching the adhesive connection to the body. Leakage will follow the itching and skin irritation is the next problem that will surface. At this point the pouch should be changed with the following care given the surrounding skin.

- a.) Clean the skin well with a pure soap like Ivory that does not have any kind of crème in it; or use an appropriate skin cleansing solution (I personally use Williams Lectric Shave which is available in most pharmacies). If there is body hair in the area, it should be shaved.
- b.) Examine the skin to be certain all residual adhesive has been removed and the surface is dry and ready to accept the new pouch system. If necessary, use a hair dryer to prepare the skin for acceptance of the new wafer or skin barrier. In the event there is any skin irritation present, follow the steps below before applying a new wafer.

1. Clean the skin as noted above and apply a dust on coat of medicated powder.

2. Using a tissue dampened with Lectric shave and wipe ONLY the area surrounding the skin irritation to be sure the residual powder is removed.
3. Using a no sting skin barrier like 3M Cavilon, dab a coating ONLY on the area that is irritated and allow it to dry thoroughly (use a hair dryer if necessary). This step seals in the medicated powder in the area of the skin irritation.
4. The pouch system may now be applied and should be carefully pressed to the abdomen to assure all surfaces of the wafer are securely attached.

d.) During the following wear period (3 to 5 days) the skin should heal, under normal conditions, so the next wafer application will be normal (see note below if irritation is not healed and continues).

Note: If the skin irritation is still present at the next wafer change, follow steps 1 through 4 above repeating until the skin is fully healed. If the problem persists, you may require professional assistance.

New ostomates are very likely to develop skin irritation problems until the skin adapts to the constant application of the skin barrier and the ostomate becomes experienced in the application process. The longer one wears a pouch the tougher the skin becomes but failure to observe careful care can lead to a problem for any ostomate.

Skin Barriers (wafers):

There are a variety of skin barriers (wafers) that can be used to attach the pouch system to your abdomen and each pouch manufacturer has their own variation of material and method of connection for one and two piece systems. Most of the one piece systems attach to the abdomen with an adhesive and there are also adhesive free systems that use a belt to hold the pouch to the body. Security belt loops are provided on many of the pouch systems to permit a small belt to provide greater security and prevent the pouch from coming off the body under certain strenuous activities. Research the available products to find one that best suits your personal needs. I was unable to find a suitable system that met my personal hygienic needs so I designed the EZ-Clean System with a built in cleansing mechanism with disposal directed into the toilet. The objective was not to have to deal directly with body waste.

There are also skin barriers that have what is called **convexity** to facilitate a more secure attachment in the area surrounding the stoma. Convexity on the skin barrier constitutes a raised area about two inches in diameter and raised to a mound that applies greater pressure to the area immediately surrounding the stoma to accomplish a more intense seal. This application is well suited for ileostomies which have a more liquid output with higher acidity that is inclined to leak if a good seal is not achieved because they flow constantly and must be emptied every few hours.

In some cases it may be necessary to use a skin barrier to help heal an irritation that is persistent and requires a Hydrocolloid material that is gentle to the skin. I have found it is possible to modify most skin barriers to accommodate the EZ-Clean Pouch which is constructed with a hypoallergenic foam skin barrier (wafer). In such cases, the skin barrier can be attached before hand to the EZ-Clean Pouch and the system applied as a unit. It is also possible to apply them separately to achieve the same result. If you need specific help you can call or e-mail the writer at the address below for assistance with a particular problem.

To successfully live with a Colostomy or Ileostomy it is imperative that you become familiar with the care necessary to keep the skin surrounding the stoma in clean irritation free condition. Doing so will eliminate leaks, odor and allow you to lead a very normal life. The key to early success with your pouch system is having awareness of the problems that can occur and knowing how to quickly resolve them to avoid their reaching a critical treatment stage. I have had a Colostomy for nearly 7 years and share my experiences in the hope that doing so may help new ostomates avoid problems and adjust to living their life with a stoma in as normal a way as is possible. I am personally “Dedicated to Improving Ostomy Lifestyle” for those who must learn to live with a pouch waste collection system.

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