



Basic Ostomy Skin Care

A Guide
for Patients
and Health Care
Providers



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Basic Ostomy Skin Care

People who have a stoma often share many of the same questions and concerns. This best practice document provides answers to some of the common questions that people ask about the day to day care of the stoma and the surrounding skin. The answers are directed to the person who has a stoma but may also be helpful for the nurse as a teaching tool.

People with a stoma often worry that their skin may become irritated from the stool, urine, or pouching system. It is important to treat the skin gently, protect it from stool, urine, and chemicals, and use products correctly to decrease the chance for skin problems.

The basic rule is to keep it simple.

Understand the reasons for doing what you do. Follow your Wound, Ostomy, Continence (WOC) nurse or health care provider's recommendations and the directions from the product manufacturers. When fewer products are used on the skin, there is a smaller chance for developing skin problems.

If you have questions about the information in this document, problems with leakage, or skin problems around the stoma, contact your WOC nurse or your health care provider.

Table of Contents

Caring for Yourself

How often should I change my pouching system?	3
When is a good time to change my pouching system?	3
How do I remove my old pouching system?	4
How do I clean around my stoma?	4
What should I do with my soiled supplies after I change my pouching system?	5
Can I get my pouching system wet?	6
What are some ways to keep my skin from getting irritated?	8
I have sensitive skin. Will the skin barrier irritate my skin?	9
How can I prevent infection?	9
If there is a small leak under my barrier, is it okay to patch it with tape or paste?	9
How can I prevent leakage?	9
I perspire a lot. How can I get the pouching system to stick better?	10
What can I do to remove hair around my stoma?	10

Ostomy Care Products

Should I use a skin sealant?	10
Should I use adhesive remover?	11
Do I need to use a skin barrier paste?	11
What are ostomy adhesives?	12
When do I need to use skin barrier powder?	12
What kind of skin barrier is best?	13
Glossary	13
References.	13

Caring for Yourself

How often should I change my pouching system?

- How often you will need to change your pouching system depends on the type of stoma, the location of the stoma, and the kind of drainage from the stoma. There are three basic types of ostomies. Urostomies are for urine, colostomies are for drainage of the large bowel and ileostomies are for drainage of the small bowel. Using the right type of pouching system and putting it on the right way will also affect how long you can wear it. Wear time may be affected by other factors such as activity level, body shape, and perspiration.
- Many pouching systems are made to be worn for three to seven days. However, there are some pouching systems that are made to be changed every day. The type of pouching system you think is best for you is a personal decision. However, issues of reimbursement from Medicare or your private insurance company may influence this decision.
- Contact your WOC nurse or health care provider if you are changing your pouching system more often than expected or suddenly more frequently than your normal wear time.

When is a good time to change my pouching system?

- Choose a day and time that is best for you. Try to pick a time when you won't be disturbed and when your stoma is not putting out a lot of drainage.
- The best time to change the pouching system is different for everyone. For most people, the stoma is less active before eating or drinking in the morning. Some people will do their care while they take their bath or shower. Other people may choose to do their care at the end of the day or at least two hours after a meal.

How do I get my old pouching system off?

- Take your time when you remove your pouching system. You do not want to rip it off because this may hurt your skin. Try to remove it in the direction your hair grows.
- Loosen and lift the edge of the pouching system with one hand and push down on the skin near the skin barrier with the other hand. You may find it helpful to start at the top and work down to the bottom so you can see what you are doing, which would also allow the pouch to catch any drainage.
- Some people use warm water to remove the pouching system and other people may use adhesive remover. If you use adhesive remover it is very important to wash off all the adhesive remover from your skin with soap and water and dry the skin completely before you put on your new pouching system.
- Sometimes your skin may look pinker, redder or darker right after you take off your pouching system. This should fade away in a few minutes.

How do I clean around my stoma?

- To clean the skin around your stoma, all you really need to use is warm water and a washcloth, or good quality paper towels. The use of gauze or gloves is not necessary and can be expensive.
- It is not necessary to use soap to clean around your stoma. But if you prefer to use soap, use a very mild soap. Avoid using soaps and cleansers with oils, perfumes, or deodorants since these can sometimes cause skin problems or keep your skin barrier from sticking.
- Rinse the soap off the skin around your stoma very well because the residue may keep your skin barrier from sticking and may also cause skin irritation.

Basic Ostomy Skin Care

- If you are using paste, it may be easier to remove the paste before you wet the area. Some people may use adhesive remover. Do not worry if a little bit of paste is left on your skin.
- Always dry your skin well before putting on your new pouching system.
- Sometimes you may see a small amount of blood on your cloth. The stoma tissue contains small blood vessels and may bleed a small amount when cleaned. Any bleeding that does not stop should be reported to your health care provider. The stoma has no nerve endings, so you are not able to feel, if you are rubbing too hard. Therefore, use a gentle touch when cleaning around the stoma, do not scrub.
- Do not use alcohol or any other harsh chemicals to clean your skin or stoma. They may be irritating to your skin.
- Do not use moistened wipes, baby wipes or towelettes that contain lanolin or other oils, these can interfere with the skin barrier sticking and may irritate your skin.
- Unless recommended, do not apply powders or creams to the skin around your stoma because they can keep your skin barrier from sticking.

What should I do with my soiled supplies after I change my pouching system?

- Put your soiled pouching system into a plastic bag and throw it away in your household garbage. It is recommended to empty your pouch into the toilet first.
- For odor control with disposal when away from home, carry one to two plastic storage bags in a pocket or purse.
- If you used soft paper towels to wash your skin, you can throw them away with your pouching system in your household garbage.

- If you used washable items such as a washcloth to wash your skin, they may be washed with your household laundry.
- Some people who wear a two-piece pouching system choose to remove the pouch to empty it and then attach a clean one. They may decide to rinse out the soiled pouch and reuse it later.
- Some people use reusable (can be used over and over again) pouching systems. If you use this type of pouching system, follow the cleaning instructions from the manufacturer.
- If you use a clamp to close your pouch, remember to save it. Carry an extra clamp with you in case it breaks
- If you wear a urostomy pouch, the connector for use at bedtime should be saved and used again.
- The clamp and connector should be washed with soap and water.
- Wash your hands after taking care of your ostomy. You do not need to wear gloves.

Can I get my pouching system wet?

- Yes. You can shower, bathe, swim or even get in a hot tub with your pouching system on. It is a good habit to empty the pouch before showering, bathing or other water activities.
- You can bathe or shower every day. On the day you plan to change your pouching system you can either leave it on or you can take the whole thing off to take your bath or shower.
- Some people may choose to shower or bathe without their pouching system. Because the stoma has no muscle, urine or stool may drain from your stoma while showering or bathing.

Basic Ostomy Skin Care

- Water won't hurt your stoma or go inside you. If the water pressure is strong do not let it hit your stoma directly. Only use a gentle spray of water on your stoma.
- Check your pouching system before and after water activities. If you are in the water for a long time the pouching system may start to loosen up from your skin. Some people may find it helpful to wait an hour or so after changing their pouching system before swimming.
- Pouching systems are waterproof. However, you may feel more secure if you wear an ostomy belt or put tape around the edges of your skin barrier when you are in the water.
- Some people will secure the edges of the skin barrier with waterproof tape. Other people prefer to use paper tape and then wipe the paper tape with a skin sealant to make it more waterproof. If you have sensitive or fragile skin, the use of paper tape may be gentler on your skin than a waterproof tape. If you do put tape around the skin barrier edges do not remove the tape after water activities. Removing the tape may cause the skin barrier to loosen.
- Some people wear tight 'biking style' shorts to keep their pouch close to the body and help keep it from 'floating'.
- Gas filters do not work after they get wet. Therefore, it is best to protect the filter with waterproof tape before water activities.
- After bathing or swimming, you may use a towel or a hairdryer on the coolest setting to dry the tape and cloth packing of the pouching system to prevent skin irritation from wetness.

What are some ways to keep my skin from getting irritated?

- The best skin protection is a well-fitted and comfortable pouching system. Your WOC nurse or health care provider will help you choose the system that works best for you.
- The opening of your skin barrier should be no more than 1/8 inch away from the edge of your stoma unless otherwise instructed by your WOC nurse or health care provider.
- Measure your stoma once a week for the first 6 to 8 weeks after your ostomy surgery. Your stoma shrinks while it is healing and you need to keep measuring so you can make sure that the opening in the skin barrier is the right size for your stoma. Remeasure your stoma if any irritation develops between the stoma and skin barrier wafer.
- It is helpful to hold your skin smooth as you put your pouching system on to avoid wrinkles that may lead to leakage.
- Check your skin and the back of your skin barrier each time you change your pouching system. You can use a mirror to check your skin under the stoma. Look for any places where stool or urine may have leaked under the skin barrier and onto your skin. When you apply your next pouching system these areas may need some extra reinforcement with skin barrier strips, rings or paste. There are a variety of “paste” products available. Your WOC nurse or health care provider will advise you when this is recommended.
- When you have a stoma that drains urine or loose stool you may want to consider using an extended wear skin barrier because it will give your skin added protection. Ask your WOC nurse or health care provider for help with selecting an extended wear skin barrier.

Basic Ostomy Skin Care

I have sensitive skin. Will the skin barrier irritate my skin?

- If your skin is sensitive, it is helpful to tell your WOC nurse, or health care provider. A skin patch test may be necessary to see if you have any reaction to the different skin barriers and tapes. For the most part, the ingredients in the skin barriers do not cause skin irritation. If you are having a “reaction” to the skin barrier or tape, most of the time you will see skin changes that match the shape of the product. Inform your WOC nurse or health care provider so they can determine the cause of the irritation and recommend another product if needed. Itching or burning under the skin barrier may indicate that you have leakage, a skin rash, or a skin infection. You need to remove your pouching system as soon as possible to check your skin for any irritation.

How can I prevent infection?

- The stoma is your bowel. It is protected by mucus so stool or urine won't hurt it. A stoma rarely becomes infected. The most important thing is to protect the skin around your stoma. A correct fitting pouching system is the best way to prevent an infection of your skin.

If there is a small leak under my skin barrier, is it okay to patch it with tape or paste?

- Always change your pouching system at the first signs of leakage.
- Do not try to patch the pouching system with tape or paste. A leak under the skin barrier should not be fixed. Leaving a leaking pouch on can cause skin irritation.

How can I prevent leakage?

- Always empty your pouch before it is half-full.

- Release gas before the pouch gets too full. If you have a lot of gas, you may want to consider using a pouch with a vent or filter.
- There are some medications that may be used to reduce gas. Check with your WOC nurse, health care provider or pharmacist to learn more about these medications.

I perspire a lot. How can I get the pouching system to stick better?

- You can dust the skin with an ostomy skin barrier powder to help absorb perspiration. Then dab skin sealant on top of the powder so the pouching system will stick to the skin.
- There are additional ostomy adhesives available in sprays, wipes, skin cements and tapes.

What can I do to remove hair from around my stoma?

- Some people shave with an electric razor while some dry shave with an ostomy skin barrier powder using a safety razor. Other people may use a safety razor and shave with mild soap and water. If a person decides to use shaving foam it is important to avoid foam that has moisturizers or perfumes that may irritate the skin or keep the pouching system from sticking to the skin. Always wash the skin well with water after shaving.
- Shaving or clipping excess hair around the stoma in the direction of hair growth may limit skin irritation.

Ostomy Care Products

Should I use a skin sealant?

- A skin sealant, sometimes called barrier film, does not have to be used. The sealant puts a plastic like coating on the skin. It comes in the form of sprays, wipes, and gels.

Basic Ostomy Skin Care

- A skin sealant may help if you have skin that tears easily, have problems with leakage, or are using an ostomy skin barrier powder. Some people who have dry or oily skin find that their pouching system sticks better when they use a skin sealant.
- Most skin sealants contain alcohol and if the skin has an open area the sealant will cause a burning feeling when applied. Alcohol-free (non-sting) skin sealants are available.
- A tip for use: Make sure the skin sealant dries completely before putting the pouching system on your skin.

Should I use adhesive remover?

- Remember the basic rule that you do not want to use too many products on the skin. So if the pouching system can be gently removed with water then you do not need to use adhesive remover.
- Do use adhesive remover if you have skin that tears very easily. Sometimes people will use adhesive remover to prevent a build up of sticky residue on their skin. Adhesive remover often contains alcohol and feels oily.
- A tip for use: After using adhesive remover always wash well with water and a mild soap to remove the oily coating on the skin. Then rinse the skin well with water and dry completely.

Do I need to use a skin barrier paste?

- Ostomy skin barrier paste is used as caulking to fill in gaps and creases. It will help even-out the skin surface around the stoma. This way the paste helps to make a better seal with the pouching system and prevent leakage.
- You do not need to use paste if the skin around your stoma is smooth, you are getting a good fit with your pouching system, or you are not having any problems with leakage.

- Paste often contains alcohol and will cause a burning feeling if used on open skin.
- Tips for use: Apply the paste around the opening cut in the skin barrier, unless instructed otherwise. Use only a small bead of paste, like putting toothpaste on a brush. Let the paste sit for one minute (this gives the alcohol in the paste the chance to evaporate). Do not spread the paste. Do not use too much paste. When trying to remove paste from the skin let it dry a little first. Do not worry if a little bit of paste is left on your skin.

What are ostomy adhesives?

- Ostomy adhesives like cements and sprays can have a latex or an acrylic base. They are used to increase the stickiness between the pouching system and the skin. Adhesives are NOT USED very often. When possible use latex-free products.
- Tips for use: Only a light, even coating of an adhesive should be used. Give the adhesive time to dry completely before putting on the pouching system. It is important to follow the manufacturer's directions. Many adhesives need to dry for three to five minutes. This helps to decrease the chance of chemicals hurting the skin.

When do I need to use skin barrier powder?

- Ostomy skin barrier powder is used to dry a raw, weepy area on the skin. You only need to use powder if you are having a problem with your skin.
- Tips for use: Only a light dusting of an ostomy skin barrier powder should be used. Many people will dab or spray a skin sealant over the powder before putting their pouching system on to help it seal better.

Basic Ostomy Skin Care

What kind of skin barrier is best?

- Some skin barrier wafers are called standard wear and others are extended wear. Your WOC nurse or health care provider will tell you what kind is right for you. In general, a standard wear barrier is used when the stool is semi-formed or formed. An extended wear barrier is usually used when a stoma drains urine or when a stoma drains stool that is loose or liquid. The extended wear barrier does not break down like a standard wear barrier, when it comes in contact with loose to liquid drainage.

Glossary:

Pouching system: A device worn over your stoma, that acts as a reservoir for the urine or stool that empties out of the stoma. There are many different pouching system choices.

Skin barrier (wafer): A solid square or round piece of adhesive material that is used to protect the skin from urine and stool.

WOC nurse: A nurse with specialized training in caring for people who have wounds, stomas, and/or bladder and bowel problems.

References:

Bryant, R., Rolstad, B. (2001). Examining Threats to Skin Integrity. *Ostomy Wound Management*, 47(6), 2001.

Erwin-Toth. Peristomal Skin Care. Retrieved from www.cdfa.org/medcentral/library/surgery/skincare.htm

Frequently asked questions. Retrieved December 10, 2001, from www.ostomyworld.com

Hampton, B., Bryant, R. (1992). *Ostomies and Continent Revisions: Nursing Management*. St. Louis. Mosby.

Hess, C. (2000). Skin Care Basics, *Advances in Skin & Wound Care*, 13, 127-129.

Jeter, K., Lutz J. (1996). Skin Care in the Frail, Elderly, Dependent, Incontinent Patient. *Advances in Wound Care*, 9, 29-34.

Nursing Diagnosis: Actual/Risk for impaired tissue integrity. Retrieved November 20, 2001, from www.harcourthealth.com

Removal. Retrieved December 10, 2001, from www.ostomyworld.com

Skin is skin, regardless of where it is. Retrieved December 10, 2001, from www.ostomyworld.com

Turnbull G. Ostomy Care. Retrieved November 20, 2001, from www.ccfa.org/medcentral/library/surgery/ostom.htm

Wound, Ostomy, and Continence Nursing Education Program. (1997).

Ostomy and Continent Diversions Module. (2nd revision). Atlanta, GA: Emory University.

Wound Ostomy and Continence Nurses Society. (1998). *Guidelines for Management: Caring for a Patient with an Ostomy*. Laguna Beach, CA: Author.

Note: Another good source of information is product literature from ostomy manufacturers.

**If you do not know who the
WOC nurse is in your area please
visit The Wound Ostomy
Continence Nurses (WOCN)
Society Web site, www.wocn.org,
to conduct a search in your area.**



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Ostomy and
Continence
Nurses
Society®

WOCN National Office
15000 Commerce Parkway
Suite C
Mount Laurel, NJ 08054
888-224-WOCN
wocn_info@wocn.org
www.wocn.org

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