



What's on your Tummy, Emil?

Stoma Care in Infants

Changing the Pouch



Prepare the new pouch in a calm atmosphere. Using the cutting guide from the stoma nurse, cut the holes to the exact size so the wafer fits close to the stoma root.



Make the wafer as pliable as possible by warming it in the waistband of your clothing. This ensures maximum skin adhesion – also in the numerous skin folds of the child's groin.



To create a relaxed atmosphere during stoma care, make sure the baby is well fed and you may begin with a bath. Don't worry – the pouch will not fall off in the water!



If you take plenty of time, your child will normally not find wafer removal uncomfortable. A slight redness of the skin may be evident.



Cleanse the skin around the stoma with warm water. Use a soft cotton cloth or pad.



Be sure to remove any adhesive remaining from the old pouch, and to wash well around the stoma.



This is easiest if there are two present, as pouch application is most successful when the child lies quietly at full length. Begin by applying the pouch around the stoma.



Ensure that the wafer adheres properly at all corners, so you know it conforms to all the skin folds of the groin.



Drainable pouches can remain in place for 2-3 days.

Necrotizing enterocolitis (NEC)

In NEC, there is poor blood supply to the intestine.

Analatresia/Anorectal malformations

Analatresia is a congenital abnormality. The anus is lacking, or may be positioned higher than normal.

Hirschsprung's disease

In Hirschsprung's disease, faeces build up in the intestine due to the distal intestinal wall's lacking of ganglion cells.



After drying, begin removing the used pouch.



Gently press some cotton gauze against the skin while you carefully remove the wafer.



Warm bathwater makes the wafer pliable and eases removal.



Dry the skin thoroughly with a soft cotton towel or facecloth.



If there is any slight redness, you can prevent irritation by applying a product such as Dansac Skin Creme.



When you are certain the skin is entirely dry, put on the new pouch.



Remember that if you are thorough in changing pouches and stoma care, your child will normally not experience discomfort from the pouch on its stomach, and will soon be actively exploring the world at hand.

Reversing a stoma

In most cases, a stoma can be returned to the intestinal tract within 2-6 months.



Four months after his first operation, Emil's stoma was returned to his intestinal tract which now functions normally. The only reminder are the scars on his tummy.

Facts about Emil:

Emil was born 3 months prematurely at 27 weeks – one minute after his twin sister – at the State University Hospital in Copenhagen.

Immediately after birth, he was transferred to the Neonatal Department and put in an incubator. His progress was good, he gained weight, and began producing stools.

Five weeks after birth, Emil had a series of aggressive infections that were treated with penicillin.

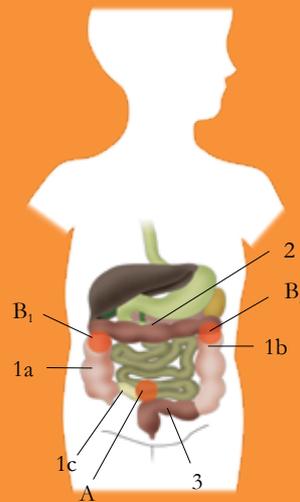
He had obvious abdominal pain, and lower respiration rates. The diagnosis was acute NEC

(necrotizing enterocolitis)

necessitating emergency surgery.

An ileostomy (A) was formed for instant relief. It was also necessary

to remove two pieces of Emil's small and large intestines (1a,1b and 1c). The transverse section of the large intestine (2) was retained in the hope that it would be able to regenerate and resume its functions. For this reason, two drainage stomas were formed - one at each end of the colon transversum (B₁ and B₂). The remaining section of the large intestine was constricted above the rectum (3).



During the final operation, the transverse section (2) was removed. The small intestine was then led directly to the remaining 7-8 cm above the rectum (from A to 3).

One month later, Emil's stools are entirely normal in colour and consistency. He has successfully caught up with life.

The pictures in this brochure show an entirely normal pouch-change sequence in Emil's home. The photo series was taken approximately two months after stoma surgery.