Building healthier lives

Reversal of loop lleostomy

A loop ileostomy is a temporary stoma which is usually created to protect a join in the lower bowel. Reversal is done through the stoma and rarely requires open surgery. You should expect to be in hospital for a few days after the operation so we can make sure your bowels are working properly before you go home.

Do I need tests before reversal?

Before your loop ileostomy can be reversed, the surgeon must be satisfied that surgery has been successful i.e. that the wound inside has completely healed. Your surgeon may request a gastrograffin or water soluble contrast enema to check that the join in your bowel has healed. This is done by instilling a small amount of fluid enema via your back passage into your bowel. At the end of the procedure this fluid may be passed via your stoma or from your back passage.

A date for your reversal operation will be booked if the join has healed completely. You will receive the date for reversal of the stoma by letter.

What happens when I come into hospital?

You will receive a pre operative assessment the nursing staff will advise you when to stop eating and drinking. Please bring your stoma appliances with you as you will need them up until your stoma has been reversed. You will not need any bowel preparation or special diet beforehand. The anaesthetist will discuss pain relief with you before you go to theatre.

After your reversal you will be able to eat and drink as you feel able, some fluid will be given to you through a drip and will be removed once you are tolerating diet and fluids.

The Colorectal Nurse will see you after your reversal to review your bowel function and answer any questions.

A small wound will be where your stoma was originally sited. Sometimes the wound is left open and packed to allow drainage. The ward staff will arrange dressings by the District Nurse on discharge. You may have dissolving stitches or metal staples which will be removed by the Practice Nurse after 10 days or when the wound has healed.

Bowel Function

At first your bowels may be erratic and unpredictable but gradually things should improve. It can take up to two years to reach a stable bowel function depending on the type of bowel surgery you have had.

Your stool may be more frequent or loose and you may experience an urgent need to go to the toilet. Bowel control is more difficult when stools are loose and you may experience some leakage. Some people also have difficulty telling wind from stool especially in the early stages after reversal.

Information for Patients

A few people will develop constipation but more commonly you may experience difficulty in emptying your bowel from time to time.

Troubleshooting

Thicken up persistent loose stools with a small dose of Loperamide. Specific advice on how to take this is available from the Colorectal Specialist Nurse.

Use fragrance free baby wipes and a simple based barrier cream after evacuation to combat anal itching or soreness due to seepage.

You may need to increase your fibre and fluid intake if you are constipated or have difficulty emptying. Raise your feet up on a small footstool when using the toilet to widen your pelvic floor.

We advise you to contact the Colorectal Specialist Nurses if these simple measures do not help as you may need referring to the Bowel Function Clinic.

Do I need to change my diet?

We advise you initially to avoid very spicy foods or those high in fibre such as cabbage, beans and onions. Large meals may make you feel bloated and uncomfortable.

Then gradually increase the fibre in your diet. With experience you will become aware if you need to avoid certain foods but most people should be able to eat most foods.

Useful Contacts

(24hr answer phone)
0121 424 2730
0121 424 7429
0121 371 4501 colorectalnursingcns@uhb.nhs.uk

Follow us on Twitter @uhbcolorectal

Other useful addresses

Ileostomy Association Birmingham branch: 0121 3552745/07842 555070 Email: Mike Jameson <u>mike.jameson@iasupport.org</u> www.birmingham.iasupport.org

National Association for Colitis and Crohns Disease (NACC) Tel: 01727 830038

Website: <u>www.nacc.org.uk</u>

National Key Scheme From RADAR Tel: 0121 616 2942 Website: <u>www.radar.org.uk</u>

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email patientexperience@uhb.nhs.uk.