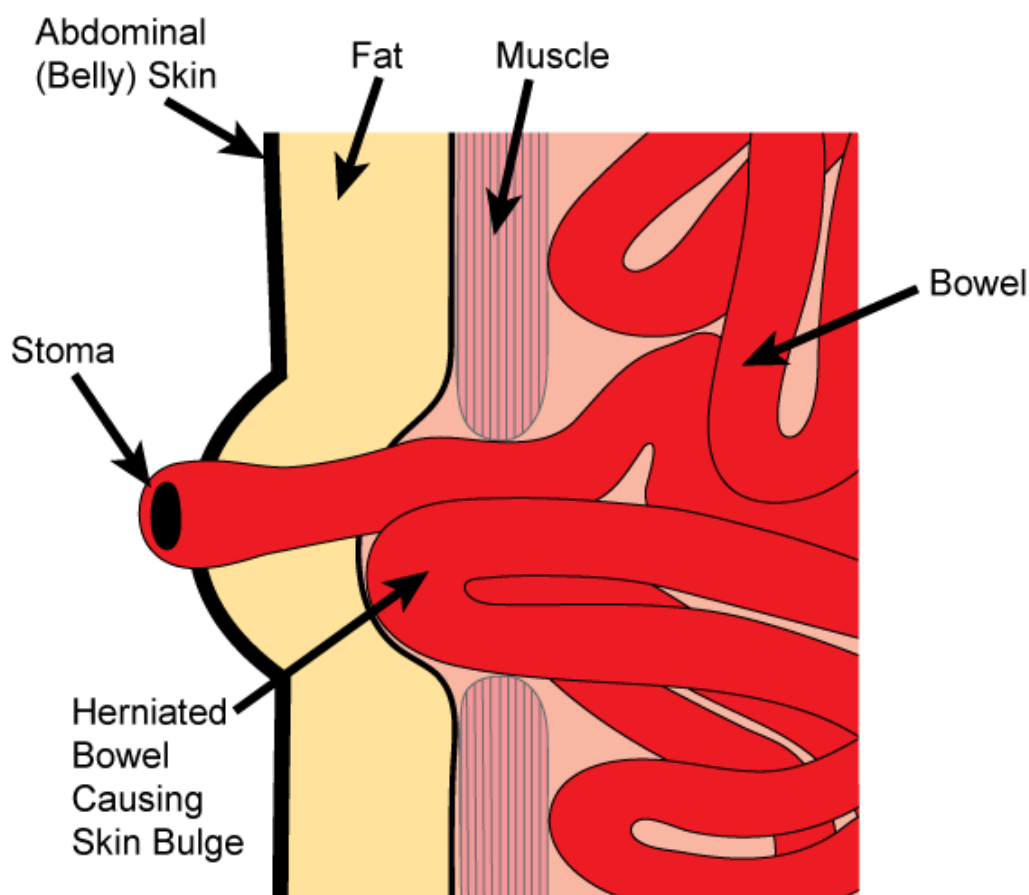


Preventing Parastomal Hernia

What is a parastomal hernia?

A parastomal hernia occurs when a loop of bowel bulges through an opening in the muscle that was made by the surgeon for the stoma to pass through.

Parastomal hernia is one of the most common problems after stoma surgery.



Your medical team is recommending physical therapy and the other measures below to reduce your risk of getting a parastomal hernia.

How can I prevent parastomal hernia?

Hernia prevention involves four components:

1. Avoid heavy lifting and straining for 6 weeks after surgery
2. Do gentle core strengthening exercises
3. Consider using a support garment
4. Avoid gaining excessive weight, as weight gain is a risk factor for hernia

Recommendation #1: Avoid heavy lifting and straining for 6 weeks

- Limit lifting to 10 pounds for six weeks
- Do the gentle core exercises and abdominal wall rehabilitation your physical therapist recommended after surgery (see below), but do not do more strenuous lifting and abdominal exercises for 6 weeks after surgery, while the abdomen is healing.
- Support the part of your abdomen around your stoma when you cough, throw up, or sneeze - using your hand, a pillow, or a folded blanket.
- As you increase your activity level, remember to use good body mechanics. When lifting, place your feet apart (one foot in front of the other, keep your back straight and bend your knees). Keep the object you are lifting close to your body. Your physical therapist can also give tips for getting in and out of bed, the car, etc.

Recommendation #2: Do Gentle Core Strengthening Exercises, starting right after surgery

- A physical therapist in the hospital will teach you basic exercises to help prevent a hernia (see below). Do the exercises daily for the first 6 weeks after surgery. After 6 weeks, you can continue to improve your strength by seeing a physical therapist on an outpatient basis.

Do these exercises to gently strengthen abdominal muscles

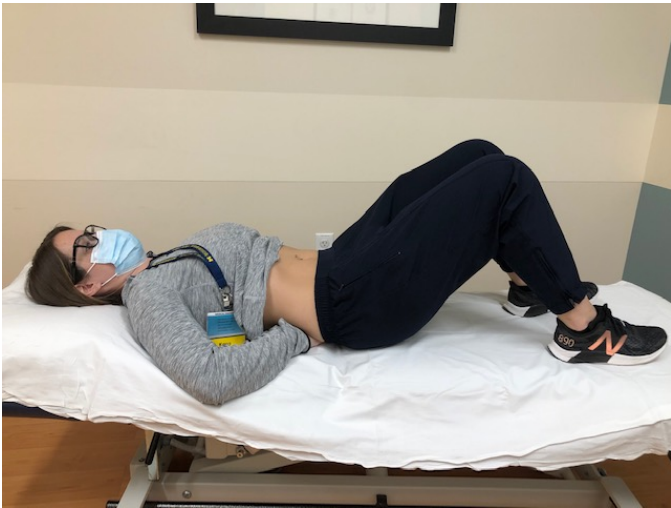
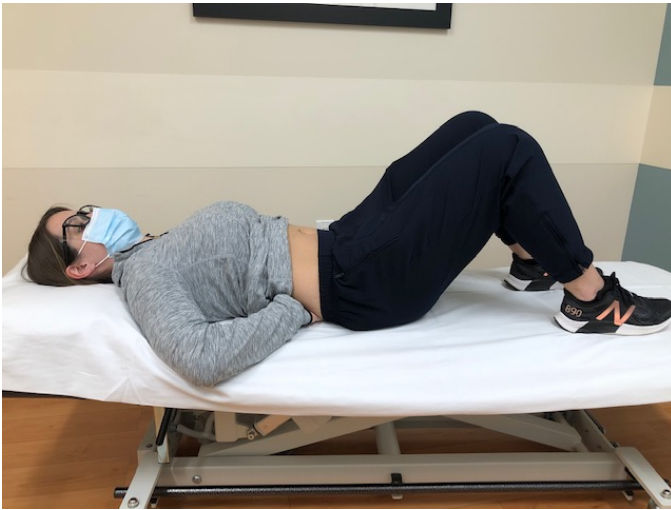
Start slowly with the first two exercises. Stop if you feel pain or discomfort at the location of your incision or your stoma.

1. Pelvic brace



1. Lying on your back with your knees bent, place hands on your lower abdomen.
2. Feel belly rise as you inhale and lower as you exhale.
3. As you exhale, tighten your lower abdominals by pulling the belly button towards your spine and upper abdominals by pulling the rib cage down.
4. Hold this muscle contraction for 3-5 seconds while breathing normally
5. Repeat 5-10 times 1-3 times per day.
6. Progression; gradually work up to holding 10 seconds per repetition and do 3 sets of 10 repetitions once per day.

2. Pelvic Tilt



Starting position: lying on back with knees bent and hands under low back

1. Tighten belly inward and pull rib cage down as performed in pelvic brace exercise
2. Then tilt your pelvis towards your head. You will feel your low back flatten onto your hands if performing correctly.
3. Hold this muscle contraction for 3-5 seconds while breathing normally.
4. Repeat 5-10 times 1-3 times per day.

5. Progression; gradually work up to holding 10 seconds in each repetition and do 3 sets of 10 repetitions once per day.

3. Knee Rolling



Starting position: lying on your back with knees bent and your hands on the lower abdomen



1. Tighten lower abdominals inward towards the spine and pull the upper rib cage down.
2. Maintaining abdominal contraction, lower knees to one side where comfortable then repeat towards the other side.

3. Repeat 5-10 times 1-3 times per day.
4. Progression; gradually work up to 10 repetitions per set and do 3 sets once per day.

Note: Perform all exercises in a pain-free range to tolerance. If you are not able to do so, please consult with your physical therapist.

- **Follow-Up Physical Therapy:** Six weeks after surgery, we want you to see a physical therapist at U of M or in your community for an **Abdominal Wall Rehabilitation** Physical therapy program.

Recommendation #3: Abdominal Support Garment

- Wear a support garment, such as an abdominal binder or a custom-made hernia prevention belt, when physically active. An abdominal binder can be purchased from a medical supply company or online. If you want a custom belt, you may make an appointment with your ostomy nurse for evaluation. There are also support garments for ostomy patients available online.

Recommendation #4: Avoid weight gain

- Weight gain is a major risk factor for getting a parastomal hernia. Avoid weight gain with a healthy diet and daily activity/exercise.

How would I know if I have a parastomal hernia?

Most people with a parastomal hernia notice a bulge around the stoma. Other possible signs are one or more of the following symptoms:

- Abdominal pain or pressure in the area around the stoma
- Hard time passing stool (colostomy or ileostomy)
- Inability to keep a good pouch seal

- Changes in the stoma shape: if it becomes flatter or larger
- Increased skin irritation around the stoma

If you think you have a parastomal hernia, call your health care provider for evaluation. Most parastomal hernias don't require surgery but if you have any of the symptoms listed below, call your surgeon:

- Severe pain in the abdomen in the area around the stoma
- Redness, swelling, or warmth in the skin around your ostomy
- Nausea or throwing up
- No output from the stoma
- Changes in stoma color - if it becomes darker in color (burgundy or black)

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