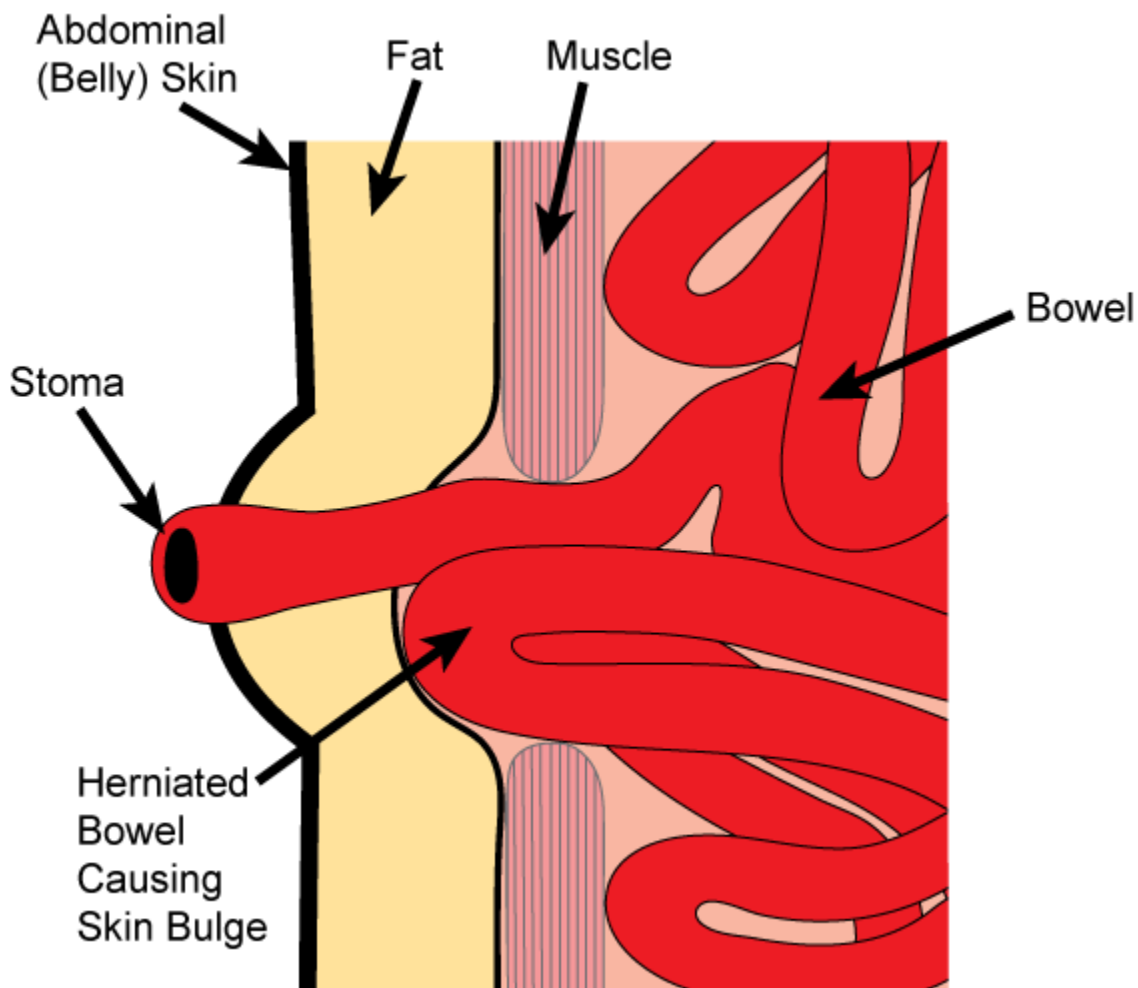


Preventing Parastomal Hernia

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.



How can I prevent parastomal hernia?

Hernia prevention includes four components:

1. Use good body mechanics and avoid heavy lifting and straining for 6 weeks after surgery.
2. Do gentle core strengthening exercises.
3. Consider using a support garment.
4. Maintain a healthy weight. Obesity is a risk factor for parastomal hernia.

Recommendation #1: Use good body mechanics when you move. Avoid belly (abdominal) strain including heavy lifting for 6 weeks.

- Limit lifting to 10 pounds for 6 weeks.
 - When your doctor allows you to begin lifting (which is usually 6 weeks after surgery) follow the instructions starting on page 10 of this handout.
- Support the part of your belly (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.

Log-rolling when getting out of bed:



Start with knees bent lying on your back.



Begin to log roll onto your side keeping hips and shoulders in line and knees together.



Once sidelying, place bottom arm at your side with elbow bent to prepare to push yourself up.



Prop yourself up by pushing through bottom forearm and elbow.



As you push up through forearm and elbow begin to lower legs off of table.



When sitting have feet firmly planted on floor with hands on surface you are sitting on.

Getting in/out of car:



Begin by standing with backside of you facing seat of vehicle.



Place one hand on dash board and other on seat then bring one foot up onto floor of vehicle or step board. If not SUV just back up to seat and sit down.



Push up through your foot and hands until your bottom is on seat.



Once your bottom is on seat of vehicle push yourself further back through both feet and use hands as needed for additional support.



Keeping hips and shoulders in line together rotate body into vehicle.



Once in vehicle make sure back is adjusted to keep you upright and you are at appropriate distance to reach foot pedals.

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.

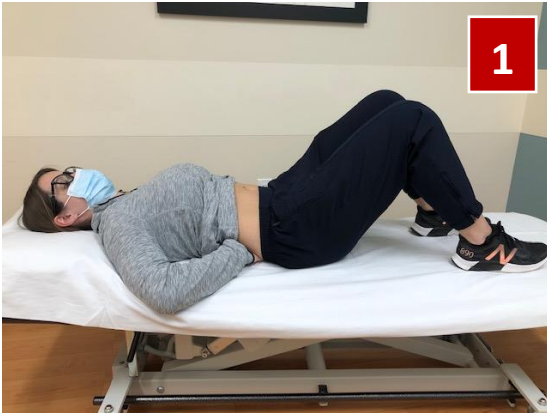
Pelvic brace



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.

Pelvic Tilt

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



Tighten belly inward and pull rib cage down as performed in pelvic brace exercise.



Then tilt your pelvis towards your head. You will feel your low back flatten onto your hands if performing correctly.

1. Hold this muscle contraction for 3-5 seconds while breathing normally.
2. Repeat 5-10 times 1-3 times per day.
3. Progression; gradually work up to holding 10 seconds in each repetition and do 3 sets of 10 repetitions once per day.

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:** 6 weeks after surgery, we want you to see a physical therapist at Michigan Medicine or in your community for an **Abdominal Wall Rehabilitation** Physical therapy program.

Recommendation #3: Wear an abdominal Support Garment

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

Appendix 1: Lifting instructions.

Do not start lifting before your doctor allows, which is usually 6 weeks after surgery.

Golfer's lift technique when lifting light objects:



Start by standing with feet comfortably apart (typically shoulder width).



Place hand on stable object. Bring one leg back to provide counter support as you lean forward bending from hip. Make sure to keep back straight.



Continue bending forward until you can reach light object to pick up from floor.



Support of arm on object maintained during lift to reduce strain on back.

Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

Authors: Samantha Hendren MD, Jennifer Shifferd PT, Jane Theriault RN CWON
Illustration: Aki Yao

Reviewers: members of the Ostomy Steering Committee
Plain Language reviewer: Ruti Volk, MSI, AHIP

Patient Education by [Michigan Medicine](#) is licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International Public License](#). Last Revised 1/14/2022