



Jackie McPhail, Clinical Services Manager Hollister Limited, and Honorary Clinical Nurse Specialist Stoma Care

# dear nurse

# Leakage, Causes and Simple **Steps to Help Prevent Leaks**

No one wants to have leaks. Leakage may affect the peristomal skin. It can also affect quality of life. In this article leakage is defined as leaking of ostomy output beyond the edge of the skin barrier on the pouch. Seepage is defined as ostomy output (urine or faecal) seeping under the skin barrier out from the opening for the stoma but not beyond the edge of the skin barrier.

It is important that the skin barrier is the right fit around your stoma and you have the right formulation for the skin barrier to meet your stoma requirements.



### **Common Causes** for leakage:

- » Skin barrier stoma opening cut too big or too small. Template is incorrect.
- » Weight gain or weight loss resulting in a difference to the topography of the abdomen.
- » Pregnancy as the baby grows in the pre-natal period the abdomen and size of the stoma can alter.
- » Inappropriate skin barrier fit, due to changes to the topography of the abdomen.
- » Peristomal skin not dried sufficiently prior to applying skin barrier.
- » Use of soap or wet wipes on the skin around the stoma, both can leave a residue on the skin and result in a poor adhering skin barrier.
- » Reported faulty pouch.
- » Incorrect storage of appliances that damage the skin barrier.
- » Unsuitable type of skin barrier.

#### Simple steps to help prevent leakage:



#### Find the right fit

- » Ensure you have the right template size for the stoma opening on your skin barrier. Check the size of your stoma. There is a measuring guide in most one-piece stoma pouches or two-piece skin barriers. If you are unsure contact your stoma care nurse to review the template. The size of the stoma varies in the first 4-6 weeks in particular, but if you have lost weight or gained weight, this too can affect the size of the stoma.
- » Do you think you have lost weight or put weight on, and it has affected the abdominal surface? If so, contact your stoma care nurse for an assessment.
- You may have been discharged from hospital on a flat skin barrier, however a convex skin barrier may be a better fit for you in preventing leakages, particularly if you have skin folds or creases that occur around the stoma. Ensure you contact your stoma care nurse for a review.

- » Do you have a hernia or think you have a hernia? then check with your stoma care nurse for the most suitable size of opening for your stoma and the type of skin barrier. A hernia around the stoma is called a parastomal hernia and this is where the abdomen appears to bulge out around the stoma. Having a hernia may increase the size of the stoma opening and affect the peristomal skin.
- where the stoma comes out of the abdomen far more than usual. This may affect the skin barrier's ability to adhere to the peristomal skin. Check that the stoma is bright red/pink and that it is working. A prolapsed stoma may often result in having to increase the size of the opening on your skin barrier to accommodate your stoma. Ensure that your stoma care nurse has examined the prolapse and assessed you.

» Do you have a prolapse? This is

» The skin barrier on your one- or two-piece skin barrier should fit close to the stoma without any skin showing.



## Achieve a secure seal

- » Ensure that the skin is clean and dry prior to applying your next skin barrier/ pouch.
- » Ensure that you apply gentle pressure on the skin barrier immediately around the opening of the skin barrier. Then check the skin barrier is sealed properly at the outer edge all the way around, before applying a hand over the entire skin barrier to achieve a

good seal. You should also check your product's specific Instructions for use, to ensure you are using the skin barrier correctly and storing the stoma products correctly.



» Do you need a convex skin barrier? Check with your stoma care nurse, they can help decide the right depth, flexibility, compressibility, slope, and tension location. Convex skin barriers may apply downward pressure on the skin surrounding the stoma to help the stoma protrude more and make it easier for output to go into the pouch. Or it may provide tension location when the peristomal skin has creases. This will help flatten any creases. Generally, for a soft abdomen firm convexity is required and for a firm abdomen soft convexity is required. The closer the convex skin barrier, and the formulation of your skin barrier is to the base of the stoma, the better the seal it will create. If a good seal is still not achieved, you can try incorporating a barrier ring or seal. Please note that your stoma care nurse can review you for a suitable skin barrier to meet your needs to help prevent leakage.

# Remember keep it simple

» Only use necessary accessory items to ensure a good seal. Barrier wipes may prevent the formulation of your skin barrier adhering to the skin. Check with your stoma care nurse to find out if you are using the right type of skin barrier.

- » Do not apply any creams or lotions on the skin around the stoma, as these can affect the adhesion of the skin barrier. Check with your stoma care nurse if you are unsure.
- » Do not use wet wipes to clean the peristomal skin as they may contain oils and/or citric acid which may cause irritation and prevent your skin barrier from adhering.
- » Just clean the skin with dry wipes in warm water. Ensure that the skin is dry after cleaning.



If when you take the pouch off and you look at the back of the skin barrier you can see that the output has gone underneath the skin barrier but not leaked, you could take a photo if this is excessive, as this may indicate if there is a specific area where the stoma output is finding a gap to seep under. Your stoma care nurse may suggest a barrier ring or seal to help prevent seepage.

Leakage may cause peristomal skin to become sore, broken, and discoloured. due to peristomal moisture associated skin damage, where the stoma output has remained on the peristomal skin and affected the outer layer of the epidermis. Do not put up with leakage or sore skin - make sure you discuss prevent leakage and helps to keep your skin healthy.

