UROSTOMY

A urostomy is an opening (the stoma) made by an operation to divert the continuous passage of urine.

Characteristics of the urine

The urine must be light yellow, clear and may present some mucous. This happens when a part of the intestine is used to form the stoma in surgery.

Hygiene

Due to the characteristics of the urine and its permanent contact with the stoma, good hygiene in accordance with the indications of the manual is necessary.

Devices

You can use a 1-piece or 2-piece device, specially designed for people who have had a urostomy.

The devices specifically designed for urostomy differ from the other, namely:

• They are provided with a valve or tap which enables the emptying of the pouches whenever they are at half of its capacity.

• The outlet valve at the bottom of the pouch can be connected to a night pouch to enable a larger collection of urine overnight.
Urostomy pouches are provided with a non-return valve designed to prevent backflow of urine when the patient is in bed and risk of infection.

Whether a 1-piece or 2-piece device is chosen, the pouch must be changed every three days, if there is no leakage or infiltration of urine.

**Nutrition**

As referred to in the manual, a varied and healthy diet must be followed. However, it is recommended:

• To eat food rich in vitamin C, such as oranges, tangerines, strawberries and vegetables. Vitamin C makes urine more acid, preventing risk of infection, bad odour and formation of crystals.

• To drink 2 litres of liquids per day (water, tea and natural juices) to ease functioning of the kidneys and prevent complications.

It is important to be aware that:

• the stoma may retract within the abdominal wall (retraction);

• the stoma may protrude more than normal outside the abdominal wall (prolapse).

• a protuberance (hernia) may appear around the stoma caused by weakness of the abdominal muscles or excessive force;
• the stoma might become very narrow, which makes the passage out of urine difficult (stenosis).

• crystals might appear close to the stoma, which make the application of devices difficult and cause pain. In this case, the stoma and surrounding skin must be cleaned with a solution of half water and half vinegar.

In any of the above cases, you must consult a stoma care nurse or doctor.