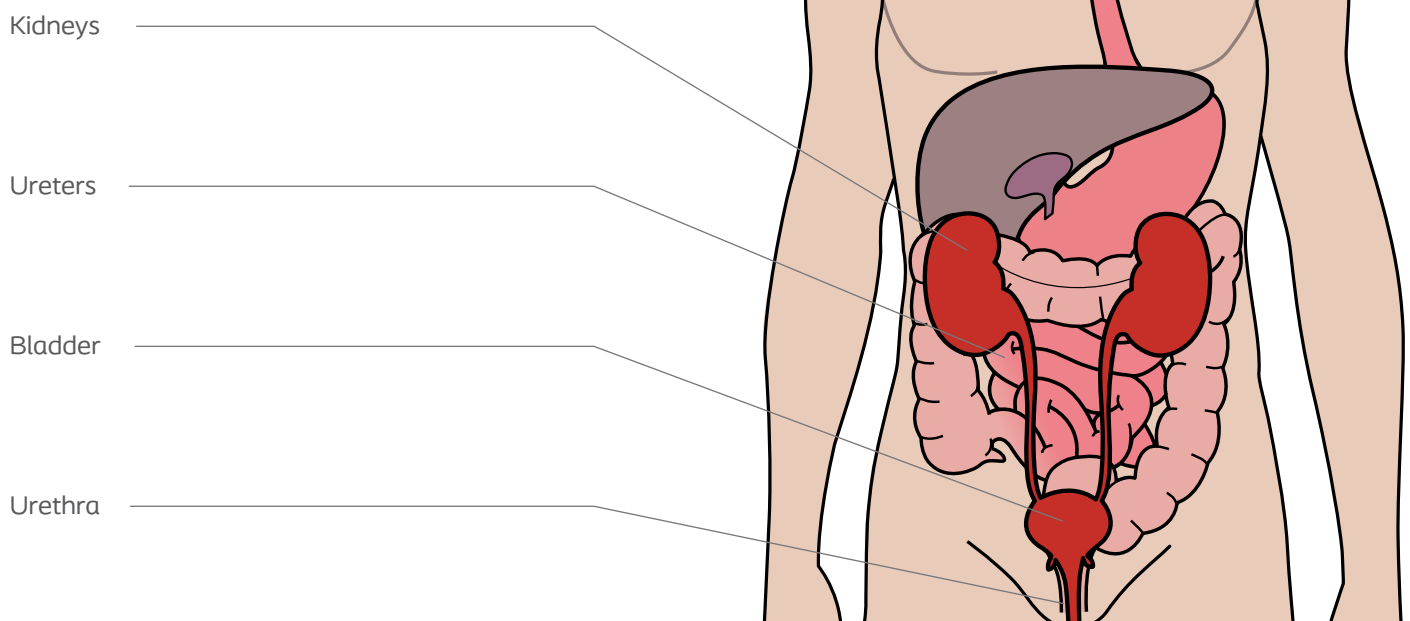
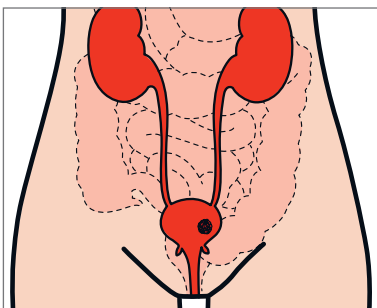


The urinary system



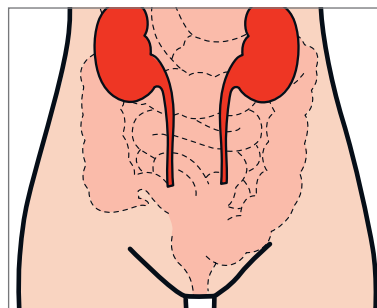
Urostomy

Diseased bladder



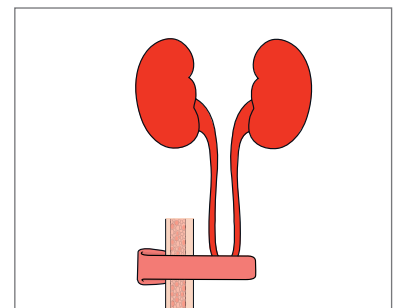
The term 'ileal conduit' is used to describe surgery where part of the small bowel (the ileum) is used to divert urine out of the body, by-passing the bladder.

Removal of the bladder



In many cases, the bladder is removed due to disease or injury, then a short piece of the small bowel is isolated and used to form a spout.

Formation of a urostomy

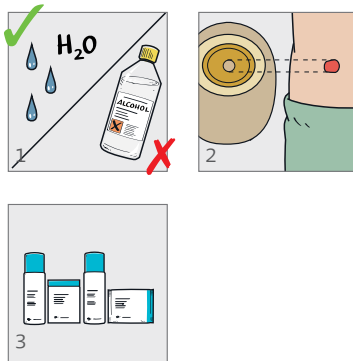


One end of the spout is sealed and the ureters are attached. The open end of the piece of small bowel is brought to the surface of the abdomen to form an approximately 2 cm high stoma (urostomy). The rest of the small bowel is rejoined so the digestive system functions as before.

The right appliance-change routine can improve comfort and security

 Before use, always consult the 'Instructions for Use' document delivered with the products.

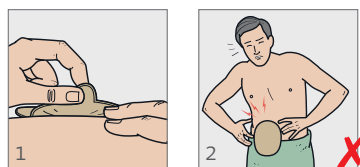
Apply



An effective appliance-change routine starts with making sure you apply your baseplate the right way. Before you apply your baseplate be sure that your skin is clean and completely dry.

1. Clean and dry your stoma and skin gently. Water is sufficient for cleaning.
2. To protect the skin around your stoma from stoma output cut a hole in the baseplate that exactly matches the shape and size of the stoma.
3. For a snug fit around the stoma you might need to use accessories.

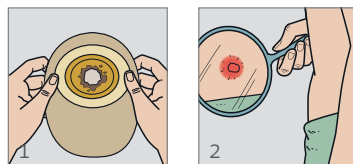
Remove



To protect the skin around your stoma, it's important to remove your appliance in an appropriate way.

1. Pull down the removal tab to loosen the adhesive from the skin. Gently remove the adhesive by rolling it step by step downwards. Apply light pressure on your skin with your other hand.
2. Regardless of your routine you must change your appliance if you feel itching or burning. This may be a sign of leakage under the baseplate.

Check



A quick examination of both the adhesive and your skin will tell you if you have the right routine.

1. Check if the adhesive has eroded and/or there is stoma output on the backside. If so it's likely that the skin around your stoma is irritated.
2. A mirror can be helpful to properly examine your stoma. Compare it to the other side of your abdomen to see if the skin around your stoma looks healthy. See examples below of what to check for.

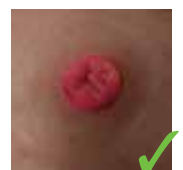
1. Irritation caused by leakage



2. Irritation caused by erosion



Healthy skin



The pictures to the left show severe skin irritations caused by leakage over a long period of time. Both adhesives are clearly eroded after (1) three days wear and (2) after seven days wear.

When worn too long, the adhesive can absorb too much moisture from around the stoma and begin to disintegrate or erode. As a result, stoma output can come into contact with the skin and cause irritation. Irritated skin is not normal and it is best prevented by following the right routine. Both these cases indicate the individuals need to change more often to enable their skin to heal and to avoid further skin damage.

Life's more comfortable with the right appliance-change routine

Your appliance-change routine depends on many factors and it's important to remember that having a stoma need not affect your quality of life. The length of time between changes will vary for each individual. To keep the skin around your stoma healthy make sure you get in to the right routine: Apply – Remove – Check.