

PARASTOMAL HERNIAS

When a stoma is brought out to the surface of the abdomen it must pass through the muscles of the abdominal wall, thus a potential site of weakness is immediately created. In the ideal situation, the abdominal wall muscles form a snug fit around the stoma opening.

However, sometimes the muscles come away from the edges of the stoma thus creating a hernia-stoma where there is no muscle.

Factors that can contribute to causing a stoma-hernia to occur include coughing, being overweight or having developed an infection in the wound at the time the stoma was made.

The development of the stoma-hernia is often a gradual phenomenon, with the area next to the stoma stretching and becoming weaker with the passage of time. The weakness, or gap, means that every time one strains, coughs, sneezes or stands up, the area of the abdomen next to the stoma bulges, or the whole stoma itself protrudes as it is pushed forward by the rest of the abdominal contents behind it.

As with all hernias the size will increase as time goes by. Stoma-hernias are rarely painful, but are usually uncomfortable and can become extremely inconvenient. They may make it difficult to attach a bag properly and sometimes their sheer size is an embarrassment as they can be seen beneath clothing.

Although a rare complication, the intestine can sometimes become trapped or kinked within the hernia and become obstructed. Even more seriously, the intestine may lose its blood supply, known as strangulation. This is very painful and requires emergency surgery to untwist the intestine and prevent the straightened part of the bowel from being irreversibly damaged.

Regardless of inconvenience or pain, hernias are defects in the abdominal wall and should not be ignored simply because they might not hurt.

There are surgeons who advocate that small stoma hernias that are not causing any symptoms do not need any treatment. Furthermore, if they do not need treatment it should not be by operation in the first instance but by wearing a wide, firm colostomy / ileostomy belt. This is probably true with small hernias, in people who are very elderly and infirm or people for whom anaesthetic would be dangerous (*serious heart or breathing problems, for example*). Operative repair of the stoma hernia may be given serious consideration to improve the quality of life, prevent progressive enlargement of the hernia with time make it easier to manage the stoma.

As always and as with all medical questions regarding your stoma it is advisable to contact your Stomal Therapy Nurse who can then refer you on further if need be.

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