

Introduction

A loop colostomy is a type of temporary stoma (opening of the bowel onto the skin) made with two ends of large bowel (colon) (see to Figure a), that would be put back together at suitable time. (Figure b)

The Operation

1. The operation is performed under a general anaesthetic.
2. A cut in the skin around the colostomy will be made. Doctor will free up the loops of colon used to make the colostomy and place the loops back inside the abdominal cavity. At the end of the operation, they will close the cut.

Preoperative Preparation

1. Admit 1 day before or on same day of this “elective” operation.
2. Anaesthetic assessment. **Inform your doctors** about drug allergy, regular medications or other medical conditions.
3. Bowel preparation: Low residue diet 3 days pre-op, avoid high roughage food such as vegetables, fruits and cereals. Fluid / congee diet 2 days pre-op. Bowel cleansing agent may be prescribed 1 day pre-op ; clear fluid (non-dairy) allowed.
4. Keep fast for 6 to 8 hours before operation.
5. Empty bladder and change to operation clothes before transfer to operating room.
6. Pre-medication, antibiotic prophylaxis and intravenous line may be required.

Postoperative Instruction

General

1. Mild throat discomfort or pain because of intubation.
2. Mild discomfort or pain over the operation site. Inform nurses if more analgesics are required.
3. Nausea or vomiting are common; inform nurses if symptoms severe.
4. Usually go home 5-6 days after the operation.

Wound care

1. In the first day after operation, patients can have bed bath with caution (keep wound dressing dry).
2. Stitches or skin clips (if present) will be taken off around 10-14 days.

Activity

Early walking and deep breathing exercises help prevent lung infection or pulmonary embolism.

Diet

1. Resumed gradually (fluid, soft and normal) when bowel function returns.
2. Bowel Opening is loose and frequent initially, but will improve with time.

Common Risks and Complications

(not all possible complications are listed)

Anesthesia related complications

1. Cardiovascular : myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism, etc.
2. Respiratory : atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease.
3. Allergic reaction and shock.

Procedure related complications

1. Wound pain / Wound infection.
2. Bleeding (may require re-operation to evacuate the blood clot).
3. Developing a hernia in the scar caused by the deep muscle layers failing to heal. If this causes problems, further surgery may be needed.
4. Anastomotic leak. This is a serious complication that may happen if the join (anastomosis) between the ends of the bowel fails to heal, leaving a hole. Bowel contents leak into the peritoneum, leading to peritonitis (Another operation is needed).
5. Hypertrophic scar and keloid formation (may result in unsightly scar).

Things to take note after discharge

1. Contact your doctor or a nearby Accident & Emergency Department if you find increasing discharge, pain and or redness around the wound.
2. Take analgesics prescribed by your doctor if required.
3. Resume daily activity gradually.
4. Remove the clip or stitches if present and follow up at doctor clinic as scheduled.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome K suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

Reference

1. Circle Health: “Colostomy of loop colostomy” <https://www.bmihealthcare.co.uk/treatments/colorectal-surgery/colostomy-closure-of-loop> (12-07-2023)
2. healthline: “Colostomy” <https://www.healthline.com/health/colostomy> (12-07-2023)

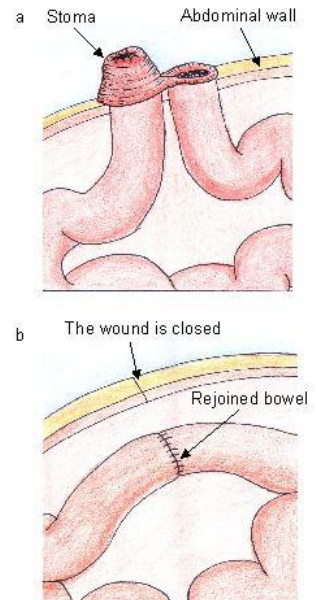


Figure 1

Figure

a. A loop colostomy

b. Closure of a loop colostomy