

UOA MS

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Patient Name:

Special Instructions:

Follow Up:

Ileal Pouch-Anal Anastomosis (IPAA)

Care After

Refer to this sheet in the next few weeks. These discharge instructions provide you with general information on caring for yourself after you leave the hospital. Your caregiver may also give you specific instructions. Your treatment has been planned according to the most current medical practices available, but unavoidable complications sometimes occur. If you have any problems or questions after discharge, please call your caregiver.

The ileal pouch-anal anastomosis (IPAA) procedure creates a reservoir for stool after the colon and rectum have been removed (*colectomy*) due to disease. The operation is a 1 to 3 stage procedure. In the initial stage(s) a J-pouch is created using a portion of the small intestine (*ileum*) in a "J" shape and is connected to the anus (*end of the rectum*). A temporary outside belly (*abdominal*) opening for removing waste (*ileostomy*) may be created. In the final stage, the ileostomy is reversed. After this, waste can move from the small intestine, through the new J-pouch, and out through the anus. Recovery from the final stage of the surgery and adapting to the new J-pouch can take several months or up to 1 year.

HOME CARE INSTRUCTIONS

Everyone recovers at a different pace. Proper self-care will help you recover fully and return to your normal activities. Frequent stools are normal upon discharge following both stages of the procedure. This will taper off over time to about 4 to 6 movements per day. This happens as the pouch stretches out and starts to hold more stool. Follow your caregiver's specific instructions as well as these steps.

After the initial stage of surgery:

- Take it easy. Rest often. Give yourself time to adjust to having the temporary opening (*stoma*) in the abdomen. Give your incisions and new pouch time to heal.
- Follow your caregiver's instructions for monitoring your stoma, proper skin care, odor control, and changing the stoma device.
- Follow your caregiver's dietary instructions. Your caregiver will help you to understand what foods may cause blockage, increase bowel movements, slow bowel movements, and cause skin irritation or gas. Remember these tips:
- Chew your foods thoroughly.

- Gradually introduce new foods one at a time.
- Avoid drinking lots of fluids with your meals.
- Drink plenty of fluids between meals. Drink enough water and fluids to keep your urine clear or pale yellow.
- **Do not** eat high-fiber foods on an empty stomach.
- Eat at regular intervals. **Do not** skip meals to slow your output.
- Take pain or other medicines as directed.
- Record your diet and bowel movements in a chart as directed.
- Continue with Kegel exercises as directed.
- Follow up with your caregiver as directed.

After the final stage of surgery:

- Take it easy. Rest often to give your cut (*incision*) and repairs time to heal.
- Take pain or other medicines as directed.
- Follow a low-fiber diet for 2 to 3 weeks, or as directed. Then, gradually return to a normal diet.
- Eat meals on a regular schedule and chew thoroughly.
- Avoid spicy and gassy foods in the beginning.
- Regular amounts of sodium are okay.
- Increase your potassium through foods such as meat, fish, bananas, and sweet potatoes to prevent or treat diarrhea.
- Avoid an excess of foods high in sugar.
- Take bulking agents or antidiarrheal medicines as directed. These will help to firm up and reduce your bowel movements. You will learn how to control your bowel movements over time with medicine and diet.
- Drink enough water and fluids to keep your urine clear or pale yellow.
- Some nighttime leakage is normal at first. This will improve over time. Wear a pad at night until this problem goes away.
- Continue proper skin care around the anus.
- Use only soft cotton balls with warm water to wipe the anal area.
- Change pads or panty liners frequently.
- Wear cotton undergarments.
- Follow your caregiver's instructions for skin barriers and soothing baths sitting in warm water (*sitz*).
- Avoid spicy foods, coffee, and tea if you experience irritation.
- Record your bowel movements in a chart as directed.
- Continue with Kegel exercises as directed.
- Follow up with your caregiver as directed.

Other things to keep in mind (if they apply):

- You may gradually resume most activities, including sexual activity, as directed. Ask your caregiver about birth control, as medicine may not be absorbed normally.
- Menstrual cycles are commonly disrupted after surgery. You may be off schedule for up to 1 year.
- Always discuss your medicines with your caregiver before taking them.
- **Do not** take laxatives.
- Wear a special medical alert bracelet to alert caregivers that you have had colectomy and pouch procedures.

SEEK MEDICAL CARE IF:

- You are having trouble caring for your stoma or using the ostomy supplies (changing the pouch).
- You have an oral temperature above 102° F (38.9° C).
- You develop chills.

- You are feeling sick to your stomach (*nauseous*).
- You are throwing up (*vomiting*).
- You notice bleeding, skin irritation, drainage, redness, or pain around the anus or stoma.
- You notice a change in the size or appearance of the stoma.
- You have abdominal pain, bloating, pressure, or cramping.
- Your stools do not become firmer.
- Your stool frequency is not as expected by you and your caregiver (too high or too low).
- You have frequent diarrhea.
- You experience sexual dysfunction.
- You experience shortness of breath, fatigue, thirst, dry mouth, or unusual sensations in the limbs.
This is usually related to hydration or diet.
- You have other new symptoms.
- You have questions or concerns.

SEEK IMMEDIATE MEDICAL CARE IF:

- Abdominal pain does not go away or becomes severe.
- You have an oral temperature above 102° F (38.9° C), not controlled by medicine.
- Repeated vomiting occurs.
- Stool is not draining through the stoma or being removed through the anus.
- You have an irregular heartbeat or chest pain.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

FOR MORE INFORMATION:

The J-Pouch Group: www.j-pouch.org.

United Ostomy Associations of America (UOAA): www.ostomy.org.

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