

To obtain further information or help with any skin care questions, contact your

Stomal Therapy Nurse

Name:

Phone:

Hours:

**The information in this brochure has been developed as a general guide only. Any concerns need to be discussed with your Stomal Therapy Nurse or doctor.*

Peri-anal skin care



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Stoma / Wound / Continence

Prepared as a guide by the:
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Level IV Evidence (Expert Opinion)

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PERI-ANAL SKIN CARE

- Peri-anal skin irritation from seepage of mucous or frequent loose stools may be experienced by some patients after surgery and is usually temporary
- After some colorectal surgical procedures however bowel function may take up to 6 – 12 months to establish a pattern
- Particular attention to the peri-anal area is required

Preventing skin irritation

- Keep the peri-anal skin as dry as possible by gentle cleaning and drying after each bowel action
- Use nappy wipes / cleansers (unscented) to clean the peri-anal area after each bowel action
- Avoid vigorous wiping or rubbing
- Only **pat** the skin dry – don't wipe
- Avoid the use of harsh toilet paper and substances that may cause burning or irritation (e.g. some scented soaps)
- For a small amount of seepage, a makeup remover pad folded in half and inserted into the buttock crease against the anus is cost effective
- Apply a barrier cream to the peri-anal area after each cleansing. There are specific creams available for this purpose. Discuss this with your Stomal Therapy Nurse or Continence Advisor

- Using a nappy liner in a pad can prevent frequent pad changes
- Wear cotton underwear rather than nylon
- Certain foods may cause irritation and should be avoided e.g. spicy foods. Discuss this with a dietician, as different foods affect people in different ways
- A variety of foods may be used to reduce looseness and bulk up the stool – see pamphlet *Eating and drinking for the person with a colostomy*
- If the cause of the peri-anal irritation is from diarrhoea or a loose bowel action, you may take an anti diarrhoeal or bulking agent. Discuss this with your doctor

Managing sore / broken skin

- For very painful and sore peri-anal skin use a hand-held shower to cleanse the skin before gently patting drying
- Apply liberal amounts of a zinc based barrier cream (discuss with your GP, Pharmacist or Stomal Therapy Nurse)
- A mild analgesic may be needed

Remember prevention is better than cure!