Abdominal Perineal Resection (APR) with Colostomy

Information for patients and families

Read this information to learn:

• What an APR with colostomy is
• How to care for yourself after surgery
• What problems to watch for
• Who to call if you have any questions
What is an APR with colostomy?

During an APR, your surgeon removes the lower part of your large bowel, your rectum and anus through cuts made in your abdomen and perineum (skin between your anus and genitals).

A colostomy is an opening made during surgery. Your surgeon brings out a loop of your large intestine onto the surface of your skin. This is called a stoma. The waste (stool) and gas from your intestine passes out of the opening (stoma). Your stool and gas will be collected in a pouch that sticks to your skin around the stoma.
How can my family be involved in my care?

We encourage your family to be involved in your care. Things they can do include:

• share information
• help you make decisions
• come with you for tests
• learn about and help with your care

It’s very important that your family also take care of themselves. Your family may become very tired while you are in hospital. The nurse may ask your family to take a break. This may mean they go home for a rest.

The visiting hours at the hospital are flexible. There is a rest period in the step down unit from 2:00 to 3:00 pm daily. Only 2 people may visit at a time. (Visitor restrictions may be in effect. Please check current hospital policy).

Please check with your nurse or dietitian before anyone brings food in for you.

How do I care for myself once I return home?

Activity

For the first week or so, you will feel tired and weak when you get home. It’s important to rest, but don’t stay in bed all the time.

Get up and do mild exercises like walking around the house or taking short walks outside.

You may need to restrict some activities or daily routines during the first few weeks after your surgery. Your health care team will let you know if there are movements you shouldn’t do for a while.
As you get better, you will be able to start your regular daily activities.

**Lifting**

*Don’t do any heavy lifting, carrying, pushing or pulling for 6 weeks.*

- These activities include things like vacuuming, carrying heavy groceries or shoveling snow.

You may lift up to 10 pounds (about 5 kilograms).

- Lifting more than this may put stress on your incision and cause a hernia to develop around your stoma.
- Wearing underwear made with elastic material that rises above your stoma can help support that area.

Your surgeon will tell you when you can begin regular activities.

**Incision (cut)**

Your incision shouldn’t need any special care. Take a look at your incision each day and check for signs of infection. Call the nurse navigator (see phone number at end of this pamphlet) if your incision:

- becomes more swollen or red
- becomes more painful
- is warmer to the touch
- has pus (yellow or white liquid) coming out of it

**Showering or bathing**

You can shower or bathe with your pouch on or off. Use a natural soap without a lot of oil or other things that could irritate your skin. Let the water run over your incision. Pat your incision and pouch dry with a clean towel. Don’t rub.

**Pain**

You will have some pain from your incision. Use your pain medicine as you need it. It will take away most of your pain so you can rest and take part in your care.
As you heal, you will need less medicine. You will receive a prescription for pain medicine before you go home from the hospital. Your stoma or the skin under your pouch should not be painful.

**Medicines**
During your hospital stay, your medicines may change. We will give you prescriptions for your medicines before you leave the hospital. Please review these with your nurse, surgeon or pharmacist before you leave. You can talk to your family doctor if you have any questions. It is important to speak to your family doctor first about taking any medicine you were on before your surgery.

**Colostomy**
The enterostomal nurse will meet with you to talk about how to manage and care for your colostomy. They will also answer your questions and give you supplies before you go home.

You can get more information about managing your colostomy in your “Life After Your Colostomy” booklet.

**Food and nutrition**
You don’t need to follow a special diet unless your doctor or dietitian recommends one. But, good nutrition is important for building your strength. It will help your wounds heal and prevent infection.

Over time, you will notice that some food produces more gas. You can find more information in your “Life After Your Colostomy” booklet.

**Constipation or diarrhea**
If you become constipated, try eating more foods with fibre (for example, vegetables, fruits and bran) and drinking more water. Talk to your doctor if this doesn’t help or if the problem gets worse.

You may also have diarrhea if you become ill with a stomach virus. Treat this
the same way you would before your surgery. You can find more information about this in your “Life After Your Colostomy” booklet.

**Driving**
Don’t drive until you are no longer taking pain medicine. This can take about 2 to 3 weeks. The pain medicine may make you drowsy, making it unsafe to drive.

**Returning to work**
At your follow-up appointment, you and your surgeon can talk about returning to work. Together, you can decide what is best for you.

**Sex**
Having a colostomy doesn’t mean you can’t be sexually active. You can start to have sex again when it’s comfortable for you. Talk to your surgeon or Enterostomal Therapy nurse about how the surgery may affect your sexual activity.

**Travel**
You don’t have to avoid travel because of a colostomy. Remember to pack all or enough of your colostomy supplies for any trip you take. If you are travelling by airplane, pack extra colostomy supplies in both your carry-on and checked bags.

**When will I have my follow-up appointment?**
You will have a follow-up appointment with your surgeon about 3 to 6 weeks after surgery. If you don’t have an appointment for a follow-up before leaving the hospital, call your surgeon’s office. Call to arrange the appointment during the first week you are home.

Please bring your health card (OHIP) to your follow-up appointment.

**Important:** Call the nurse navigator if you have any problems with your pouch leaking or if the skin around your stoma is irritated.
What problems should I watch for?

Please call the nurse navigator if:

- you have a fever higher than 38 °C or 101 °F
- you have severe nausea or vomiting
- you can’t keep anything down, even liquids
- you are unable to pass stool or gas from your stoma (opening in your body) for 48 hours
- there is an unusual change in the size, shape or colour of your stoma
- you have redness, swelling, odour, pus or increasing pain around your incision
- bright red blood doesn’t stop passing from your stoma
- you have pain or trouble urinating
- you have stomach pain and it doesn’t get better after taking pain medicine

Please call if you have any other concerns. You can also see your family doctor. After hours or in case of an emergency, go to the nearest emergency department.
Who can I call if I have any questions?

Nurse Navigators
Phone (Toronto Western Hospital): 416 262 2691
Phone (Toronto General Hospital): 416 262 1992

General Surgery Clinic
Phone: 416 340 4800 ext. 8060

Toronto General Hospital
Phone: 416 340 4800

Clinical Nurse Specialist, Enterostomal Therapy Nurse:

Toronto General Hospital
Leslie Heath
Phone: 416 340 4800 ext. 4399
Debra Johnston
Phone: 416 340 4800 ext. 7209

Toronto Western Hospital
Alexis Truax
Phone: 416 603 5800 ext. 2937

Princess Margaret Cancer Centre
James Smith
Phone: 416 946 4501 ext. 2447

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