

# ARE YOU SQUEEZING?!!!

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## INTRODUCTION

There are approximately 41,000 people diagnosed with bowel cancer each year with 34% of those having cancer in the rectum. Sphincter-preserving surgery takes place in up to 80% of the patients with rectal cancer and subsequently the incidence of those patients having a change in bowel habit is as high as 90%.

Patients also have bowel surgery for many other reasons, including Crohns disease, ulcerative colitis, continence issues as well as traumatic injuries and other conditions, with a high proportion of those patients requiring a temporary stoma for a period of time. Colorectal and stoma care nurses have always given patient information as part of their role and sphincter exercises form part of that patient information.

## AIM

Unfortunately, patients can now be overloaded with information from many different routes along their journey and I realised that sphincter exercise leaflets came low on the list of priorities for patients following major surgery. There are many leaflets currently available for patients which describe how to do pelvic floor/sphincter exercises and these are often included in patient discharge packs that are routinely given to patients when they go home. Verbal information explaining the importance of doing these exercises in readiness for the reversal of the stoma is also given. However I am mindful that patients have too much to think about in the early days of discharge to remember to do sphincter exercises.

I wanted to devise an easy way to remind patients to do these exercises that didn't involve a leaflet and that could be effective and discreet.

## SOLUTION

With the help of the Salts Healthcare marketing team, we devised a door hanger that contained my verse and instructions that are hopefully fun and easy to remember. The door hanger can be placed in a bathroom or bedroom or on a wardrobe door, indeed anywhere the patient will see it daily to use as a prompt. It can be kept in a place that is away from visitors, friends or family members that may not know the nature of the surgery, therefore keeping things private.

These door hangers are freely available from Salts Healthcare and can be used for all patients, not just for people with a stoma awaiting reversal and can be used in bowel dysfunction clinics amongst other departments.

## OBTAINING SQUEEZE DOOR HANGERS

Please contact your local Salts Healthcare Territory Manager or call your local Salts Medilink Customer Care Centre on

**Freephone 0800 626388**

## REFERENCES

[www.cancerresearchuk.org/cancer-info/cancer](http://www.cancerresearchuk.org/cancer-info/cancer) [accessed 14th August 2014]

Burch, J. (2005) Exploring the conditions leading to stoma-forming surgery. British Journal of Nursing. 14 (2) pp94-98

Royal College of Nursing (2002) Caring for people with colorectal problems. London

Skalla, K., Bakitas, M., Furstenberg, C., Ahles, T., and Henderson, J. (2004) Patients' need for information about cancer therapy. Oncology Nursing Forum. 31 (2) pp313-319

# SQUEEZE

Repeat this cycle 4 times, please. Then you will hold your stool with ease!  
5 times a day would be the best. Squeeze for 5, then have a rest.  
If you do a daily squeeze, controlling your bowel will be a breeze.

**S**queeze your sphincter muscle for 5 seconds, as if trying to stop wind escaping. Relax for 5 seconds, then repeat the cycle 4 more times.

**Q**uick, pulsing squeezes are also effective

**U**se your sphincter, not your eyebrows!

**E**very day - for best results

**E**asy to do but easy to forget

**Z**zzzz. You can do these while in bed - before you go to sleep or when you wake up

**E**ssential exercises to improve control after reversal of your stoma



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