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EAUN26

London, GB

14-16 March 2026

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A stomanurse's nightmare - unforeseen complications after parastomal hernia repair

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Conflict of Interest Disclosure

I have no potential conflict of interest to report

The problem

Patient admitted 14/2/2025 to urology ward following complications with existing urostomy after attempted parastomal hernia repair - dehiscence of the wound and ostomy lost under skin flap, holding on the fascia. Catheter inserted into ostomy to divert urine.

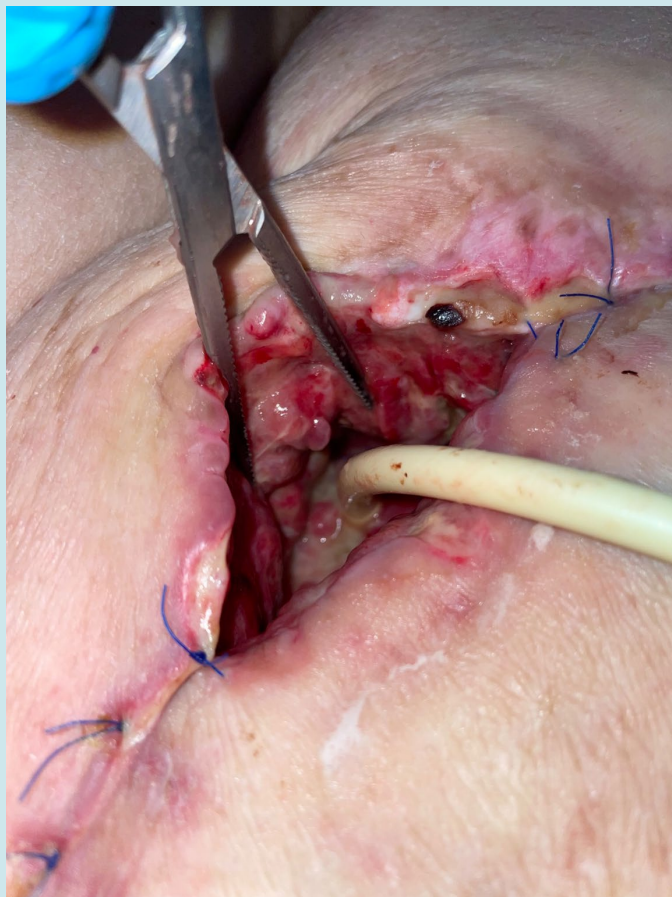


Wound and ostomy care

- Massive secretion - impossible to stand and move for the patient, skin around wound macerated ➡ ostomy system with hydrocolloid strips
- Cavity filled with Actisorb - to prevent infection, absorb secretion, start granulation from the inside



4 days later - not much improvement



5 days later



10 days post admission - turnaround point, drain and sutures extracted, granulation visible, cavity clean



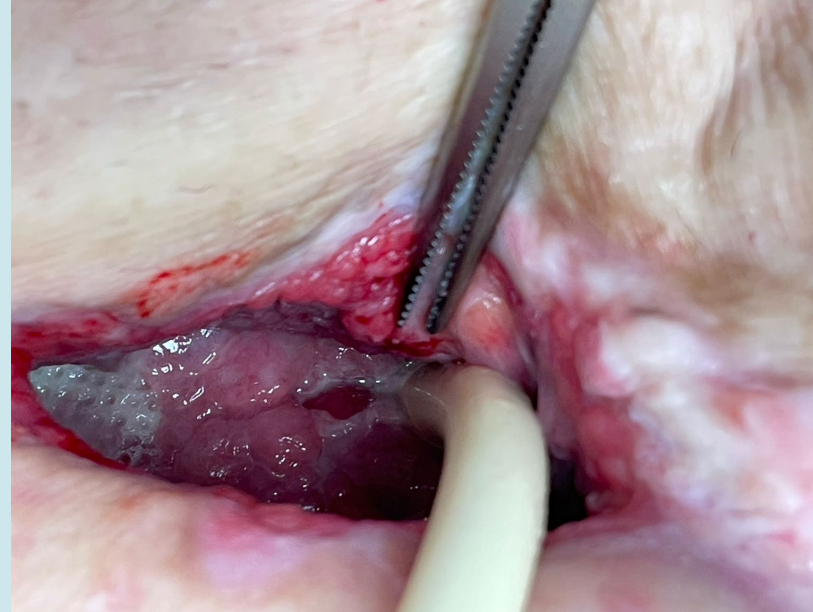


7/3/2025 three weeks post admission - treatment unchanged, daughter educated about catheter flush and ostomy bag changes

12/3/2025 one month from admission, the patient is discharged home with outpatient visits for dressing changes every other day

1st outpatient visit 2 days after discharge

- Change of treatment - skin is closing so the cavity needs to start closing too - Promogran matrices to promote granulation, patient education about need for increased protein intake



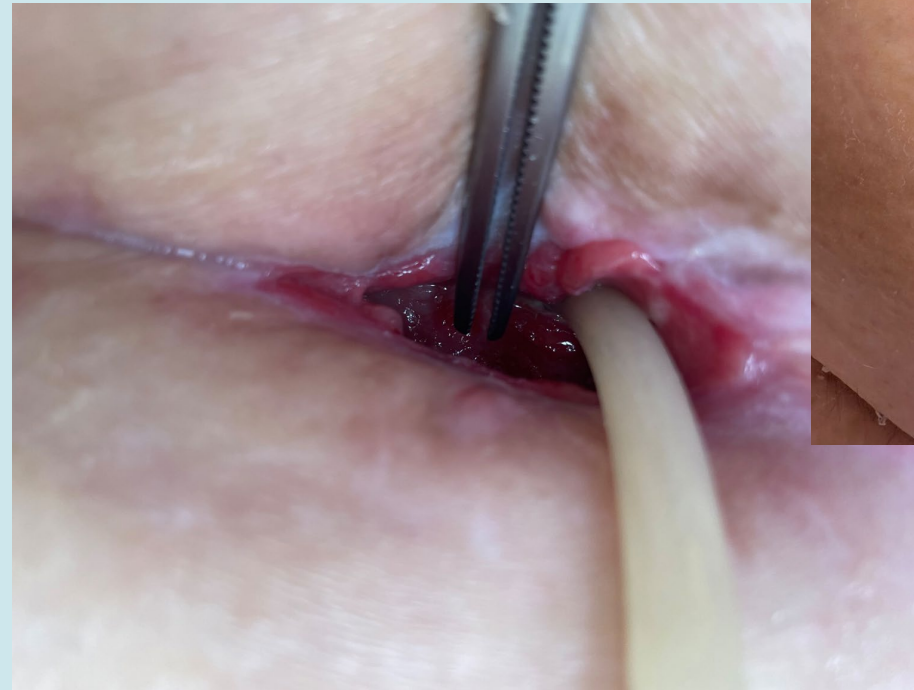
14/3/2025

24/3/2025 - skin closing
faster than the cavity,
change of catheter with
central opening - guide
wire to help with cath
change



Almost healed?

12/5/2025 - canal for the catheter is formed, wound is almost closed, cavity filled, skin around the wound healed to a scar, only using ostomy system and catheter flushes



Few months later...

30/9/2025 - the scarred skin tissue around the canal is getting irritated - no change in treatment or materials, no visible reason, all tests negative



And now?

Since september it got a lot worse, and then a bit better, this photo was taken on 6/2/2026, the skin is healing again, but the scarring takes time to form, bag changes needed everyday, gel with hyaluronic acid before the application of ostomy bag

BUT the patient is satisfied, has no leaks, no pain.



Thank you for your attention!

