

Exercise and Physical Activity After Stoma Surgery: Best Practice Recommendations



Providing personalised and empowering advice as well as practical interventions for exercise and physical activity to all individuals having stoma surgery should be an essential part of the stoma pathway

OVERARCHING PRINCIPLES

Everyone needs personalised advice—one size does not fit all

Specific core rehabilitation should be standard for everyone

Exercise is safe and essential—focus on the can do

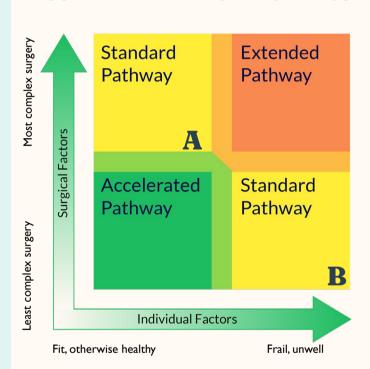
Set people up for better quality of life with a positive mindset

EXPASS BEST PRACTICE RECOMMENDATIONS

- Actively promote the health benefits of exercise and physical activity for each individual preparing for and recovering from stoma surgery and for those living with a stoma.
- Develop in partnership with the individual a personalised recovery and exercise pathway for each person.
- Promote, when possible, appropriate physical prehabilitation to prepare each individual for stoma surgery.
- Encourage and support timely postoperative mobilisation and movement appropriate for each individual.
- Recommend suitable abdominal and pelvic floor exercises for all individuals having stoma surgery and living with a stoma.
- Involve and educate, where appropriate, relevant professionals to support each individual, specifically with exercise and rehabilitation.
- Encourage and support each individual, after appropriate physical rehabilitation, to return to or commence their chosen daily activities, lifestyle, and occupation.
- Encourage and support active (including athletes) individuals, after specific physical rehabilitation, to return to orcommence their chosen sports, fitness activities, competition, and physical occupations.

USE THE EXPASS MATRIX

TO IDENTIFY A PERSONALISED RECOVERY PATHWAY FOR EACH PERSON





PROVIDE INDIVIDUALISED ADVICE

Scan QR code to full EXPASS best practice recommendation





Everyone should aim to meet WHO exercise guidelines of I50 min per week, including 2 strength training workouts

Reduces risk of colorectal cancer recurrence by 30% Improves quality of life, independence, and mental well-being Reduces risk of other health conditions and comorbidities

Potentially reduces risk of parastomal hernia

However, research shows that the majority of people with a stoma do not meet WHO guidelines for physical activity. Inactivity is harmful. Individuals should consider an active recovery approach, balancing intentional exercise with rest and recouperation.

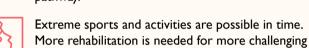
PHYSICAL REHABILITATION IS REQUIRED FOR EVERYONE AND IS SPECIFIC TO THE INDIVIDUAL



Strength and resistance exercises are important for the health of all individuals. Ensure appropriate build up and correct technique. Refer to applicable pathway.



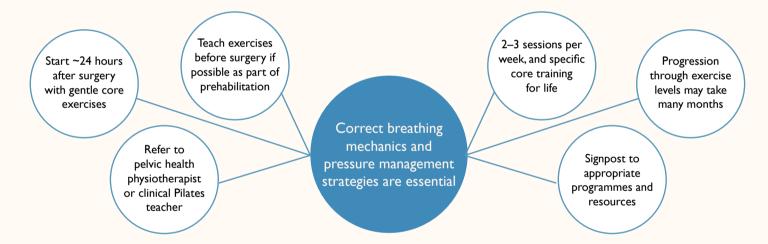
Most people can return to normal activities after relevant rehabilitation. Timeline for recovery will differ for everyone.





Core rehabilitation is essential for everyone. Prehabilitate where possible. Start ~24 hours after surgery and follow pathway. Breathing mechanics and pressure management are key.

CORE REHABILITATION IS ESSENTIAL FOR EVERYONE



SELF-EVALUATION ASSESSMENT: SENSATIONS AND SYMPTOMS CHECKLIST DURING AND AFTER ANY ACTIVITY OR EXERCISE

- Ability to exhale and engage abdominals and pelvic floor with coordination
- Ability to inhale and relax abdominals and pelvic floor with coordination
- Feeling of coordination and control of abdominals and pelvic floor
- Ability and awareness to exhale on exertion/effort during an exercise or activity and engage abdominals
- No prolonged pain or muscle soreness after exercise around stoma

- Significant doming or bulging around stoma/general abdomen on exertion
- Feeling of pressure around stoma, pelvic floor, or rectum on exertion
- Excessive or unusual pulling/tugging around stoma area
- Prolapse of stoma during or after exertion
- Postexercise, excessive fatigue/soreness around stoma area or abdominals

Remember ... there is no one-size-fits-all. Timeline for recovery will differ for everyone. Move away from set timeframes and use EXPASS matrix to create individualised pathway.