



# Learning about your cecostomy tube



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## What is a cecostomy tube?

A **cecostomy tube** or **C-tube** is a thin, soft plastic tube that is put into your large bowel through a tiny hole in your abdomen. The C-tube allows you to put a flushing (irrigating) solution directly into your bowel. The solution flushes the stool out through your bottom (anus). With a C-tube, you won't need to have rectal enemas.

Flushing your bowel regularly with the C-tube can prevent leaking and accidents. This can help you be more confident, active and independent.

## How is the C-tube put in?

Your C-tube will be put in at McMaster Children's Hospital. Two days before coming to the hospital, you must stop eating solid foods and only drink clear fluids, such as water, broth, apple juice and jello.

When you are admitted to the hospital, you will stay in a room on the children's ward. The nurses will help you get ready for the C-tube procedure. The night before, you will drink a medication to clean out your bowel. An x-ray will be done to see if your bowel is completely empty. If the bowel is not cleaned out enough, you may also need a rectal enema.

For a few hours before the procedure, you will have nothing to eat or drink. The nurse will put an intravenous (IV) line into a vein in your arm to give you fluids. To prevent infection, the nurse will give you an antibiotic medication through the IV.

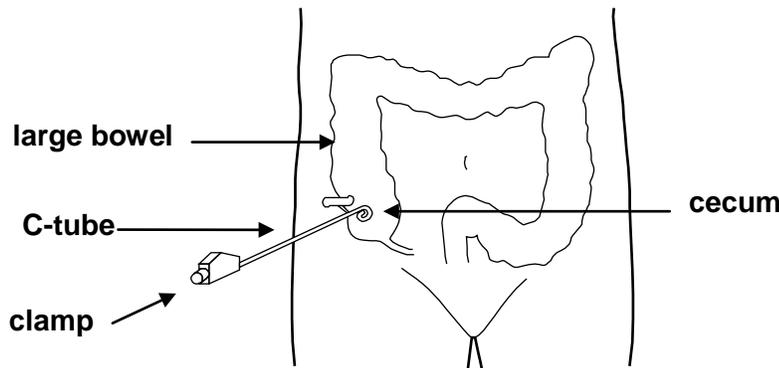
When it is time for your procedure, you will go to the Diagnostic Imaging Department. The procedure may be done with a general or local anesthetic:

- A general anaesthetic makes you sleep through the procedure.
- A local anaesthetic "freezes" the area so you do not feel any pain. About 2 hours before this needle is given, a cream will be put on the area to numb the skin so the needle does not hurt.

When the anaesthetic is working, a doctor called a Radiologist makes a tiny hole in the lower right side of your abdomen. Then, the Radiologist puts the C-tube through the hole into the cecum, the first part of your large bowel.

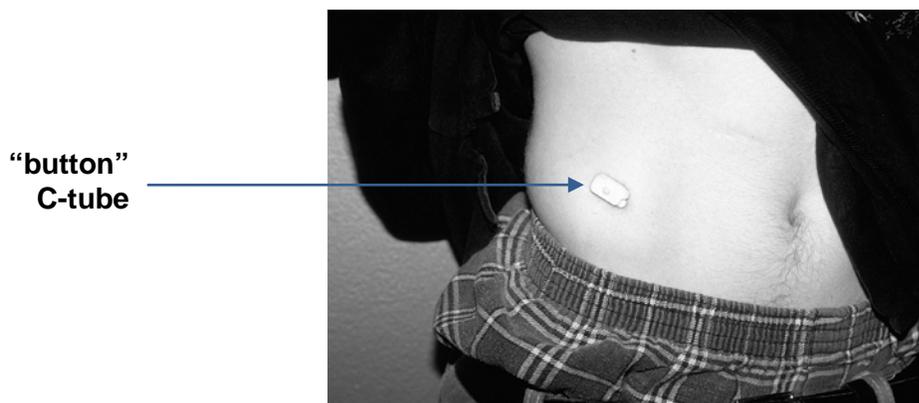
The C-tube has a curly end, like a pig's tail, that keeps it in place. Two small stitches hold the cecum close to the opening. These stitches stay in for about 4 weeks while the C-tube site heals. About 10 cm (4 inches) of the tube sticks out of your body and is taped to the skin. There is a clamp at the outer end that opens the C-tube. After the procedure, the doctor tests the C-tube by opening the clamp and flushing the tube with salt water (saline solution).

**This picture shows a C-tube in place**



After about 8 weeks, the long C-tube may be replaced with a small "button" tube that opens with a cap.

**This picture shows a C-tube "button"**



## What happens after the C-tube is put in?

After the procedure, you will go back to your room where the nurse will continue your care. The nurse will:

- check the dressing over the C-tube
- flush the C-tube with a little water to keep it clear
- give you antibiotics and medication to relieve pain
- give you sips of water when you are fully awake

If you have no problems drinking clear fluids, you can start to eat and drink as usual.

While your C-tube site is healing, you will need to have rectal enemas or follow your regular bowel routine.

The nurses will teach you how to use the C-tube and manage possible problems. You will be given all the supplies you need.

If you are well enough, you may go home the next day.

## How do I take care of the C-tube at home?

### 1. Check and clean the site

- Wash your hands with warm, soapy water. Rinse and dry them.
- Take off the dressing and throw it away.
- Check the skin around the C-tube for any redness, swelling, drainage or pain. If you notice these signs of infection, call the 2Q Clinic right away.
- Clean the skin around the tube once a day - or more often if needed. It is important to keep the C-tube site as clean and dry as possible.
- Use a cotton swab or a soft washcloth to wash the skin with warm, soapy water. Gently remove any crusted areas. Rinse with clean water. Pat the skin dry with a soft cloth or towel.
- Do not put any creams or powders on the skin, unless directed by the health care team.
- Tape the tube to your skin and cover the site with a new gauze dressing. Change the dressing if it becomes loose or wet.

### 2. Flush the C-tube with water

- The C-tube will take about 10 days to heal. During this time, you need to keep the C-tube clear by flushing it with warm tap water twice a day.
- Fill a 10cc syringe with warm tap water. Put the tip of the syringe into the end of the C-tube. Open the clamp on the C-tube. Slowly push the water into the tube. Close the clamp and remove the syringe.

## How do I take care of myself?

### Bowel care

- Continue your usual bowel cleansing routine for the next 10 days.
- It is important to keep your stools soft. To prevent constipation, drink plenty of water and eat foods that are high in fibre. High fibre foods include whole grain breads and cereals, fruits and vegetables.
- To prevent infection, continue taking the antibiotic medication as directed by your doctor. If you have any questions about the antibiotics, talk with your doctor or pharmacist.

### Showers and baths

- For the first few days you can have a shower. After the shower, put a clean, dry dressing over the C-tube site.
- The doctor or nurse will tell you when you can have a bath. Before your bath, take off the dressing and make sure the C-tube clamp is closed. Wash your skin with a mild soap and a soft washcloth. After the bath, pat your skin dry and put on a clean dressing.
- Tape the C-tube in place so that it cannot be pulled out. Then put on your regular clothing.

### Your activities

- You can do all your regular activities, but check with the doctor before you play any rough sports.
- Before swimming, make sure the C-tube clamp or cap is closed and protect the opening on the skin from water.

## When can I start using my C-tube?

The C-tube site takes about 10 days to heal. Then you will be able to use it for regular bowel irrigations. During this time, you will need to have rectal enemas or follow your regular bowel routine.

## How do I use the C-tube?

Most people flush their bowels with a phosphate (Fleet) enema and then a salt-water solution. You make the solution by mixing 15 ml (1 tablespoon) of table salt in 250 to 500 ml (1 to 2 cups) of warm tap water.

The nurse will help you sort out which solution works best for you. The type of solution may change.

**Your flushing solution is:**

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## How to irrigate your bowel:

1. Wash your hands.
2. Prepare your flushing solution.
3. Close the clamp on the enema tubing. Pour the flushing solution into the enema bag.
4. Hang the bag above the toilet (on a hook, towel bar or curtain rod).
5. Open the clamp to let the solution run down to the end of the enema tubing. This gets rid of the air in the tubing. Close the clamp on the enema tubing.

6. Sit on the toilet and attach the enema tubing to your C-tube. If you have a “button” C-tube, use the connector to join the tubing and the end of the C-tube.
7. Open the clamp on the enema tubing. Open the clamp or cap on your C-tube. The solution will begin to flow into your bowel by gravity.
8. When all of the solution has gone in, close the clamp on the enema bag. Close the clamp or cap of your C-tube. Disconnect the enema tubing from your C-tube.
9. Wait for the solution to completely empty your bowel. This usually takes 30 to 60 minutes. Massaging your abdomen from right to left may help the bowel flush faster.

**It is best to flush your bowels regularly, every 2 to 3 days.**

Please remember these steps are just a guide. The instructions from your nurse may be a little different, depending on the type of C-tube and the solution(s) you are using.

During the first few weeks, you may need to adjust when and how you do your irrigations. After a while, you will become more confident with your new bowel routine.

## How do I take care of the equipment?

Your supplies will be reused many times. It is important to keep them clean.

- Immediately after using, wash the enema bag, tubing and connector with warm, soapy water. Rinse with clear water.
- After washing, rinse the enema bag with diluted vinegar:
  - mix 30 ml (1/8 cup) of vinegar with 125 ml (1/2 cup) of water
  - pour this into the enema bag and shake, then empty the bag
  - rinse well with cool water, letting the water run through the tubing
- Let the equipment dry before putting it away.
- Store your equipment in a clean, dry place.

## How can I prevent and manage problems?

Following these steps can help prevent problems:

- ✓ Keep the C-tube site clean and dry.
- ✓ Make sure the C-tube is well secured to the skin.
- ✓ Prevent constipation. You will not be able to flush your bowel properly if your stool is hard.
- ✓ For 5 days after surgery, take your antibiotic pills exactly as directed by your doctor.

Here are some common problems and how to manage them at home.

<b>Problem</b>	<b>Description</b>	<b>What to do</b>
<b>Constipation</b> (hard stools)	You are not getting enough fluids and fibre.	<ul style="list-style-type: none"> <li>• Drink plenty of water and eats foods high in fibre: such as whole grain breads and cereals, fruit and vegetables.</li> </ul>
	Medication may cause constipation.	<ul style="list-style-type: none"> <li>• Ask the doctor or pharmacist if your medications may be causing constipation.</li> </ul>
<b>Fever</b>	A temperature over 38° C (100.4° F).	<ul style="list-style-type: none"> <li>• Call the doctor. You may need treatment for an infection.</li> </ul>
<b>Skin around the opening is red, swollen, draining or sore</b>	Leaking around the tube may irritate the skin and cause redness.	<ul style="list-style-type: none"> <li>• If the skin is red, do skin care more often. Cover the site with a dressing to keep it dry. Change the dressing often.</li> <li>• If this doesn't help, call the 2Q Clinic.</li> </ul>
	Redness, swelling, drainage and pain are signs of infection.	<ul style="list-style-type: none"> <li>• If you have redness and pain, swelling or drainage, call the 2Q Clinic right away.</li> </ul>
<b>A build-up of skin around the opening that is pinky-red, shiny, thick and bumpy</b>	This is granulation tissue, a normal body reaction to the tube.	<ul style="list-style-type: none"> <li>• Continue daily skin care. Make sure the tube is secured well to the skin to prevent rubbing.</li> <li>• If the tissue becomes irritated or bleeds easily, call the 2Q Clinic. The doctor may treat this problem.</li> </ul>

<b>Problem</b>	<b>Description</b>	<b>What to do</b>
<b>Leaking around the tube</b>	Leaking can irritate the skin and cause a burning feeling.	<ul style="list-style-type: none"><li>• Check that the C-tube taped securely in place.</li><li>• Continue skin care and try to keep the skin dry.</li><li>• If leaking continues, call the 2Q Clinic.</li></ul>
<b>Tube comes out</b>	Tube has come out by accident.	<ul style="list-style-type: none"><li>• Cover the hole with a clean gauze dressing.</li><li>• Call the hospital at <b>905-521-2100</b> and ask to speak with the Pediatric Surgeon on-call.</li><li>• The C-tube should be put back in as soon as possible.</li><li>• This will be done in the Diagnostic Imaging Department at the hospital.</li></ul>

**If you need more information or are unsure of what to do, call the 2Q Clinic at 905-521-2100 ext. 73618**

## **What if I don't like having a C-tube?**

If you no longer want or need your C-tube, it can easily be removed and the tiny hole will close within a few days.

## **When do I need to visit the doctor?**

You need follow-up appointments at the 2Q Clinic:

- 10 days after the C-tube was put in – to check how well it is healing
- 4 weeks after the C-tube was put in – to take out the stitches

It is important to continue having regular check-ups with your family doctor or pediatrician.

## **Does the C-tube need to be replaced?**

Your C-tube will need to be replaced each year. This short procedure is done by a Interventional Radiologist in the Diagnostic Imaging Department.

**If you have any questions or concerns about your cecostomy tube,  
please call the 2Q Clinic:**

**905-521-2100, ext 73618**

