Australian Association of Stomal Therapy Nurses



Anal Discharge Following Stoma Formation

- Rectal discharge is common after colon and rectal surgery with an stoma. You may or may not
 experience discharge from the anus (back passage) even though you have a stoma. This may
 occur soon after surgery or at some time later
- This discharge is usually caused by mucous. The colon and rectum produce mucous for protection and to act as a lubricant to assist with passing stools. In some stoma operations part of the colon and/or rectum are left in place. These remaining parts of the bowel continue to make mucous
- This mucous can build up and cause an urge to go to the toilet. In some people it may leak out unexpectedly. Occasionally it can dry up into a ball (plug) and may cause discomfort and /or odour
- Some people have rectal discharge every few weeks, while others have several episodes a day and others never experience it. The length of colon that remains will vary and the longer the colon that remains, the more mucous there is likely to be. The mucous varies from clear to brown in colour and can be a sticky, glue-like consistency. It may be liquid or formed.

Tips to cope with anal discharge

- To evacuate mucous naturally, sit on the toilet and relax: see if this eases the feeling or discharge. This may reduce the risk of a build-up and the risk of leakage. Do not strain
- If the mucous won't come away naturally and is causing concern, discuss this with your Surgeon or Stomal Therapy Nurse (STN) for further advice
- Mucous leakage can lead to sore skin around your anus (like nappy rash). To protect your skin, shower regularly and "pat" dry the area.
 - Do not rub. Various products to protect your skin are available. The use of a barrier cream may be suitable: however, you may wish to consult your STN
- Any person undergoing radiotherapy must consult their Radiation Oncologist / Nurse, treating Doctor or STN prior to using any creams around this area
- Pads can be used to protect your clothes
- Anal sphincter exercises may help to strengthen the muscles and prevent leakage of mucus.
 Discuss this with your Surgeon or STN

What if there is blood or pus in the discharge?

• If the anal discharge contains blood or pus, this should be reported to your Doctor or STN as it may be an indication of inflammation or infection in the remaining bowel

Your Stomal Therapy Nurse (STN)

- Know where your nearest STN is based and how to contact them
- A follow up appointment is usually made prior to your discharge from hospital
- Always ring for an appointment with your STN prior to attending the hospital
- See your STN if you are having problems with your stoma, skin around your stoma or stoma supplies
- You can attend a hospital emergency department at any time if you have concerns
- It is recommended to have a follow up with your STN every year

References

Rectal Discharge After Ostomy Surgery - Macmillan Online Community Accessed 27/4/25