



The ileostomy & internal pouch  
**Support Group**

## Exercises for Ostomates

**The exercises described in this leaflet should not be followed without first consulting your doctor. All guidelines and warnings should be read carefully and IA cannot accept responsibility for injuries or damage arising out of failure to comply with same.**

Here are some simple exercises designed to help anyone who has had surgery leading to the formation of ileostomy, colostomy, urostomy or internal pouch. These exercises may also prove useful for people with low back problems.

If in any doubt about any of these exercises, seek the advice of a state-registered physiotherapist, your GP or consultant. If there is any difficulty contacting any of these professionals, your stoma care nurse can refer you to them.

### These exercises can be progressed by:

1. Adding more movements to each exercise every few days, starting with 4 movements, say, but don't go beyond 10. Start by doing these exercises twice a day and then increase the number of sessions.

2. Build up the 'holding' part of the exercise to a maximum of **7 seconds**.

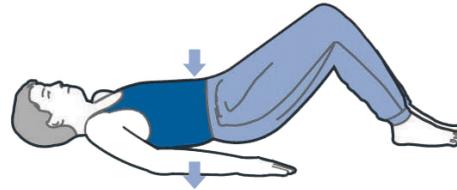
For those too busy to do the exercises as often as they should, those marked Group 2 can be slipped into your daily routine. Try to do the first group of exercises twice a day.

### Group 1

1. Lying on the bed or floor with a pillow under your head if needed, knees bent up:

(i) Flatten your lower back on to the bed, hold for a slow count of 3, then relax. Progress this by

(ii) Raising your head and shoulders, holding then relaxing.



2. In the same position, follow (i) and (ii) by then taking one hand across to touch the opposite knee, holding and relaxing. Repeat to the opposite side.



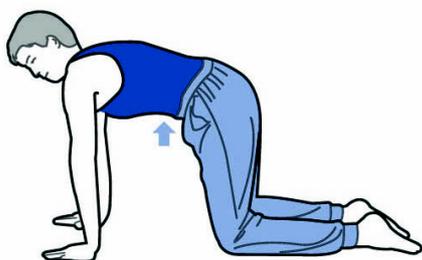
3. Lying, with one knee bent, shorten the straight leg by hitching the hip up towards your shoulder, then slide it towards the foot of the bed. Keep the weight of the leg on the bed all the time. Repeat 5 more times. Change to the other leg and repeat the exercise.



4. Position as in (i), lift your bottom as high as you can, hold for a count of 3, then lower.



5. On your hands and knees, keep your back flat while you pull your tummy up towards your spine, count 3, and then let go slowly. This can be progressed by gently rocking forward and backward but **keep your back flat!**



6. This exercise can be started within 3 days after surgery, or at any time in the future, to strengthen the pelvic floor.

**Exercise 6 should be avoided by internal pouch patients unless recommended by their consultant.**

Lying with your knees bent, sitting or standing, with your legs apart, tighten up the opening to the back passage (or where it was) as though you are trying to prevent yourself passing anything from the back passage; hold for a few seconds and then let go slowly. Repeat 4 times. Then tighten up at the front as though you were trying not to pass urine, hold and let go as before. Repeat 4 times.

You will find that all the pelvic floor works at the same time but you will get more benefit from the exercise if you concentrate first on one and then the other. This exercise should be carried out as many times in the day as you can. You can do it anywhere, any time. After all no-one knows that you are doing it!

## Group 2

These exercises are designed to be done in the upright position so they are useful both for the busy person, as a progression after you get home from hospital, or for the person with a low back problem.

1. Standing, leaning against a wall with your heels at least 12 inches (30.5cm) away from it and your hands tucked in behind your lower back, press that part of your back against your hands on to the wall. Hold that position for at least 5 seconds, then relax. Do this 1 to 5 times. This strengthens the tummy muscles and is very good for relieving low back pain.



2. If there is no wall handy, simply tuck your bottom in and hold for 3 to 5 seconds. You will find that the bottom of your tummy moves upwards towards your ribs, shortening and strengthening the tummy muscles.



## Some general advice for patients following surgery or with a low back problem.

- Double leg raise and sit-ups are not recommended for patients who have had abdominal or pelvic floor surgery.
- Sit well with your lumbar spine (the hollow area behind your belt line) supported. A small cushion or rolled towel will do.
- Develop a 'roll out of bed' habit. This protects your back as well as your tummy muscles.
- Walking is the best exercise for maintenance of general fitness.
- When you can, swim or do exercises in water

## Good for lower back ache

Arch back above your hands 7 times. This should be done after sitting for a long time, gardening, heavy housework, long car journeys.



Correct method of lifting heavy objects. This should not be attempted for three months after surgery.



## About the author

This series of exercises was devised by Marilyn Moore who had the double qualification of being a chartered and state registered physiotherapist and an ileostomist herself.

Above all, Marilyn stressed the need to take things in steady stages. Gradually building up to the more challenging exercises is the surest way for you to improve both fitness and general health.

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