Your baby’s stoma recycling

This leaflet explains what recycling of stoma losses is, and how it is done. If you have any questions or concerns, please speak to a doctor or nurse caring for your baby.

Stoma recycling, and why your baby needs it
Stoma recycling (re-feeding) is when the stoma loss (poo) is collected from the active stoma and inserted into the non-active stoma (distal stoma or mucous fistula). This is done using a soft flexible tube.

The distal stoma is connected to the lower part of your baby’s bowel and by introducing poo into this part of the bowel, we hope to stimulate the lining and prepare the bowel so that it will be more likely to work well once the stomas have been joined together again.

When will your baby be ready for stoma recycling?
Your baby might be suitable for recycling if they are tolerating a good amount of milk feed, and are at the mid-way point between the stoma being formed and the stoma being closed. Recycling is helpful for babies who have got a high stoma (jejuno stomy or ileostomy, earlier in the intestines), or if there is a lot of poo coming from the stoma. This is because recycling will help your baby to absorb more nutrients from their stoma output, as it is going back into the bowel instead of being thrown away.

The surgeons might ask for a loopogram before recycling is started. This is a special X-ray where a dye is introduced into the bowel through the distal stoma. The dye shows any possible blockages or narrowing in the bowel.

Who will do the recycling?
The surgeons or one of the surgical clinical nurse specialists (CNSs) will do the first one. They will let the nurses know how often to recycle, what size tube is needed and how far to insert the tube. They will also decide how much of the stoma loss should be recycled. Your bedside nurse can then do the recycling.

How is the recycling done?
Your baby’s stoma losses will be collected from the stoma bag into a syringe. The required amount of poo will then be slowly pushed (at about 1ml per minute), through a soft tube into the distal stoma. A special two-piece bag that can be detached from its baseplate might be used to allow easier access to the stomas. Sometimes some of the poo leaks back into the bag and this will be measured and thrown away.

It is important to check your baby’s nappy for any poo that has been passed through your baby’s bottom, this shows that it has moved along the bowel and is a good sign that the bowel is working. Your baby may not poo for several days after starting to recycle but as long as they are well and tolerating the recycling it is OK to continue.
What are the possible complications?
Some babies do not tolerate recycling. Sometimes we cannot continue recycling if the stoma or distal stoma are very flat against the skin, or have sunk down below the skin surface (retracted). If your baby becomes unwell for any reason, recycling might be stopped until they are fully recovered.

Is there anything you can do to help your child?
As your baby gets used to having the recycling done, you can help the nurse to do the recycling. If you want to be more involved please speak to your nurse and we will happily teach you how to do the recycling. Your baby should also have barrier cream applied regularly to their bottom, so let your nurse know if your baby’s bottom is becoming sore.

Useful sources of information
You may want to read our leaflet, Your child and their stoma, for more information on stomas.

Contact us
If you have any questions or concerns, please contact the Neonatal Unit, tel: 020 7188 8846/8847, or the neonatal surgical CNS, tel: 07598 552485, Tuesday- Friday, 8am-7pm.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit, web: www.evelinalondon.nhs.uk/leaflets

Evelina London Medicines Helpline
If you have any questions or concerns about your child’s medicines, please speak to the staff caring for them or contact our helpline.
tel: 020 7188 3003, Monday to Friday, 10am-5pm, email: letstalkmedicines@gstt.nhs.uk

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS), tel: 020 7188 8801, email: pals@gstt.nhs.uk. To make a complaint, contact the complaints department, tel: 020 7188 3514, email: complaints2@gstt.nhs.uk

Language and accessible support services
If you need an interpreter or information about your care in a different language or format, please get in touch, tel: 020 7188 8815, email: languagesupport@gstt.nhs.uk

NHS 111
This service offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day, tel: 111, web: www.111.nhs.uk