

Travel with a stoma

Information on pre-travel preparation, tips to stay healthy abroad and links to useful resources for travellers with a stoma

Key messages

- · Careful planning is essential when travelling with a stoma.
- Airlines should be consulted in advance regarding additional hand luggage allowance or additional support if required.
- Travellers should ensure an adequate supply of appliances, together with a plan to cover an emergency overseas, such as loss of equipment or medications.
- Pouches may need to be emptied or changed more frequently due to change in diet or gastro-intestinal illness. Drainable pouches may be easier to manage with looser stool.
- Travellers with a stoma can be at increased risk of fluid and electrolyte loss as a result of increased stoma output.
- Temperature and humidity can affect how flanges stick, and increased perspiration under the flange can lead to yeast infections.

Overview

A stoma (also called an 'ostomy') is an opening made through the abdominal wall which has been created surgically to divert the flow of faeces or urine. They may be permanent or temporary, and are performed for a number of reasons:

- To allow healing of the small or large intestine after surgery (e.g. resection of the colon due to bowel cancer)
- To relieve inflammation of the colon (in those with Crohn's disease or diverticulitis)
- Following abdominal trauma

There are three types of stoma: colostomy, ileostomy and urostomy.



A colostomy is an opening from the colon (large intestines). The output tends to resemble a traditional stool and may be active 1 - 3 times a day, buy will vary individually.

An ileostomy describes an opening from the ileum (small intestine). An ileostomy is more active and produces semi-liquid waste continuously, so the bag will need to be emptied several times a day.

A urostomy (also called an ileal conduit) describes an opening for a person's urine. A urostomy bag has a bung or tap at the bottom to allow drainage at regular intervals.

<u>Colostomy UK</u> have estimated that currently, 1 in every 335 people in the UK are living with a stoma.

Pre-travel preparation

Information on pre-travel preparation for those with <u>gastrointestinal (GI) disorders</u> is available. Additional information for those travelling with a stoma is provided here.

Careful planning is essential when travelling with a stoma. Appliance companies and societies which support individuals with a stoma also offer information and support for those planning to travel (see under Resources).

Preparation for travel with a stoma

- Ensure an adequate supply of appliances (e.g. stoma bags, wipes, flanges). Many support groups suggest taking double the number of supplies used at home.
- Consider the type of stoma pouch to take (drainable pouches with a clip or closed end pouches). Pouches may need to be emptied or changed more frequently due to change in diet or gastro-intestinal illness. Drainable pouches may be easier to manage with looser stool.
- Extreme temperatures may affect how the flanges stick in warmer, humid climates, consider storing supplies in a cool bag, and away from direct sunlight. Manufacturers guidelines for storing ostomy equipment should be followed, especially when travelling in hot climates.
- An increase in perspiration and skin irritation under the flange in warm climates can lead to yeast infections. Antifungal powder may be a useful addition.
- If using 'cut to fit' appliances, ensure flanges are pre-cut prior to flying as restrictions on carrying sharp items would be problematic.
- Supplies of e.g. stoma bags, should be carried in hand luggage additional hand luggage allowance may be required. The airline should be contacted well in advance to arrange this. If travelling for an extended period, it may be possible to obtain supplies at the destination. Most of the main ostomy suppliers have international directories of stores in many places around the world (product name, size and order numbers may be needed).
- Ostomy belts may provide additional security to a pouch when undertaking sport, or a stoma guard which will protect the stoma from trauma.

- A small stoma cap may be useful for swimming or other activities as they are more discreet under swimwear, but capacity is generally quite small.
- Specifically designed swimwear is available for those with a stoma, available from a number of companies.
- For those who manage their colostomy using irrigations, potable water should be used.
- Travel Certificates are available from Colostomy UK and a number of stoma supply companies. These detail the traveller has a medical condition and is wearing a stoma, and may need to use toilet facilities urgently. A number of UK airports also offer passengers with hidden disabilities the use of a lanyard to wear on their journey through the airport.
- A medical information bracelet or pendant may also be useful.

Comprehensive travel insurance is essential for all travellers. A full declaration of medical conditions should be made to the insurers. All equipment and planned activities should be covered. 'Colostomy UK' suggest a list of insurers who provide policies suitable for those with ostomies and other medical conditions.

Residents of the UK can apply for a UK Global Health Insurance card (GHIC): <u>further information is available here</u>.

Journey risks

Those travelling with a stoma may have specific dietary requirements. Where food is included on a flight, any specific dietary needs should be arranged with the airline in advance.

Food and drink that increase intestinal gas should be avoided during the days prior to travel and on a flight. Over inflation of stoma bags (also known as 'ballooning') can be reduced by adding an extra flatus filter to the bag.

Following any recent surgery, specialist advice may be needed about timing of air travel. Further information is available under 'Journey risks' on our <u>GI factsheet</u>. Guidelines are also available from the <u>International Air Transport Association</u> (IATA).

Venous thromboembolism

Venous thromboembolism (deep vein thrombosis or pulmonary embolism) can occur as a result of long periods of immobility associated with any form of travel. Certain travellers are at increased risk including those who are obese, pregnant and those over 60 years of age. See our <u>Venous thromboembolism</u> factsheet for further information on risk factors and prevention.

Food and water-borne risks

<u>Travellers' diarrhoea</u> (TD) is the most common health problem of travellers. Care with food hygiene and careful food choices are important for this group of travellers. Travellers with a stoma can be at increased risk of fluid and electrolyte loss as a result of increased stoma output. Travellers should



be prepared to manage the symptoms of TD, but seek medical advice early if they are not tolerating fluids or are showing signs of dehydration.

Information for travellers with a GI disorder who may have a <u>compromised immune system</u> due to medication or medical condition is available.

Vector-borne risks

Travellers should ensure they take measures to avoid insect and tick bites - see our <u>Insect and tick</u> bite avoidance factsheet.

Malaria

Information on malaria prevention, including for those with an on-going GI disorder is available.

Travellers should be aware that all currently recommended drugs for malaria chemoprophylaxis used in the UK (mefloquine, atovaquone/proguanil, doxycycline, chloroquine) are associated, to different degrees, with gastrointestinal side effects.

Absorption of antimalarial medication may be compromised in those who have undergone resection of the gastrointestinal tract. Consideration will be needed as to where a particular drug is absorbed, and whether absorption is affected by acid or alkaline conditions, food etc. In these instances, specialist advice should be sought.

Vaccination

Travellers with a stoma should be up to date with routine immunisations and boosters as recommended in the UK.

As in all travel consultations it is important to consider the underlying medical condition, current health, treatment or drug therapy which may contraindicate the use of vaccines or consider caution in their use. Health professionals are encouraged to seek expert advice if further information is required regarding use of vaccines.

General guidance on the <u>COVID-19 vaccination programme</u> is available. Groups recommended to continue to receive COVID-19 vaccination are detailed in <u>Tables 2 and 3 in Chapter 14a, COVID-19</u> in Immunisation against Infectious Disease.

Other health risks

Travellers with a stoma can be at increased risk of fluid and electrolyte loss as a result of increased stoma output, particularly in hot, humid climates or during physical activity. Adequate hydration is necessary.



General advice for those who become unwell abroad

Travellers should know when and how to seek prompt medical advice. When accessing health care abroad, travellers should inform health professionals of any medical condition they may have, explaining all treatment and medication, along with other relevant background information.

Resources

Travel with a stoma

- IBD Passport: Travel after surgery
- NHS: Colostomy
- Colostomy UK
- Canadian Society of Intestinal Research: Travelling with an Ostomy
- <u>Urostomy Association</u>
- <u>Ileostomy and Internal Pouch Association</u>

Enteral and parenteral nutrition

- TubeFed.com
- British Association of Parenteral and Enteral Nutrition (BAPEN)
- The Oley Foundation

REFERENCES

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