

Colorectal Nursing Department

# Contraception and Pregnancy

Information for women with a stoma



This leaflet has been written to give you information about sex, contraception and pregnancy after you have had stoma surgery.

## Sex and contraception

After surgery, you can resume your usual form of contraception, although you may not feel like any sexual activity straight away. Deciding when to return to lovemaking after surgery is very individual, as the anxiety and stress of an operation can often reduce your sex drive. Try not to feel pressured and do it when you feel you want to!

It is a time of adjustment – a new body image to come to terms with and feelings of tiredness are all common. You are also likely to be feeling generally rather sore in your abdomen.

Nervousness and anxiety can make you tense and may cause your vagina to become dry, which can make lovemaking uncomfortable. The more relaxed you can be the better. The use of a lubricating gel may be helpful in the early days. This is available from most chemists.

## Helping with altered body image

There are discreet wraps available, which you can wear over your abdomen during lovemaking or intimacy. These hold the stoma appliance more securely, to avoid movement, and may make you feel less self-conscious.

There are companies which also make attractive underwear with discreet pockets to hold the appliance more securely. These can help give you more confidence about your body image. Your Advanced Nurse Practitioner (ANP) or Specialist Nurse Practitioner (SNP) can give you details of some of the websites or leaflets available.

## Should I show my partner my stoma?

This is entirely up to you! Some people show their partner their stoma or “bag” whilst they are still in hospital, and others prefer to keep it very private. There are no rights or wrongs here. You could ask your partner if they wish to see it, but do not feel offended or upset if they prefer not to. It does not mean that your partner loves you any less or is rejecting you. They may just need more time to adjust.

## Contraceptive pill

If you take the contraceptive pill, it is important to be aware that you will need to keep mobile (moving around). This is because, after surgery, you will be generally slower for a few weeks, which increases the risk of developing blood clots. This is especially important if you have had an ileostomy.

It is also vital that you pay close attention to the consistency of your bowel movements and are aware of foods that may upset your digestive system. Loose stools may lead to the pill or morning after pill not being absorbed effectively. This could put you at risk of becoming pregnant. If you are concerned that your pill may not be working effectively, please take extra precautions. If you have taken the morning after pill and have loose stools or diarrhoea, please speak to your GP as soon as possible.

If you have an ileostomy or ileo-anal pouch, it is recommended that you use a barrier method of contraception (condom) in addition to your normal contraceptive pill (if you use this method of contraception). This is because the contraceptive pill can be less effective if you have an ileostomy. Please speak to your GP or family planning nurse further about this.

It is also important to discuss with your surgeon how much small intestine you have left, as this may also affect the absorption of the contraceptive pill.

If you have a coil fitted, it is important that you discuss this fully with your GP or family planning nurse, as this could cause you to have an increased risk of pelvic infection.

## Pregnancy

There is no reason why you should not consider becoming pregnant if you have a stoma. It is a good idea to wait until you are physically recovered from the surgery and feel able to cope with the demands that a pregnancy and new baby inevitably brings. It is difficult to say how long your recovery might take – some people recover more quickly than others. You will probably know when the time is right for you.

If you are planning on becoming pregnant, you may need to discuss this with your surgeon, ANP or SNP, depending on the reason why you have your stoma. We may also need to adjust any medication you might be taking and make plans for what might happen when your baby comes to be born.

If you do become pregnant, it is important to anticipate that the diameter and length of your stoma will increase in size as your 'bump' swells. From about four months into your pregnancy, please make sure that you re-measure your stoma regularly. Your ANP or SNP will help you if you are unsure how to do this.

## How to contact us

If you have any questions or concerns, please contact the Advanced Nurse Practitioner or Specialist Nurse Practitioner.

Tel: **01865 221 839** or **01865 235 367**  
(9.00am to 5.00pm, Monday to Friday)

Email: **[colorectal.nursing@ouh.nhs.uk](mailto:colorectal.nursing@ouh.nhs.uk)**



If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **[PALSJR@ouh.nhs.uk](mailto:PALSJR@ouh.nhs.uk)**

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