

EXPASS Best Practice Recommendations

EXercise and Physical Activity After Stoma Surgery

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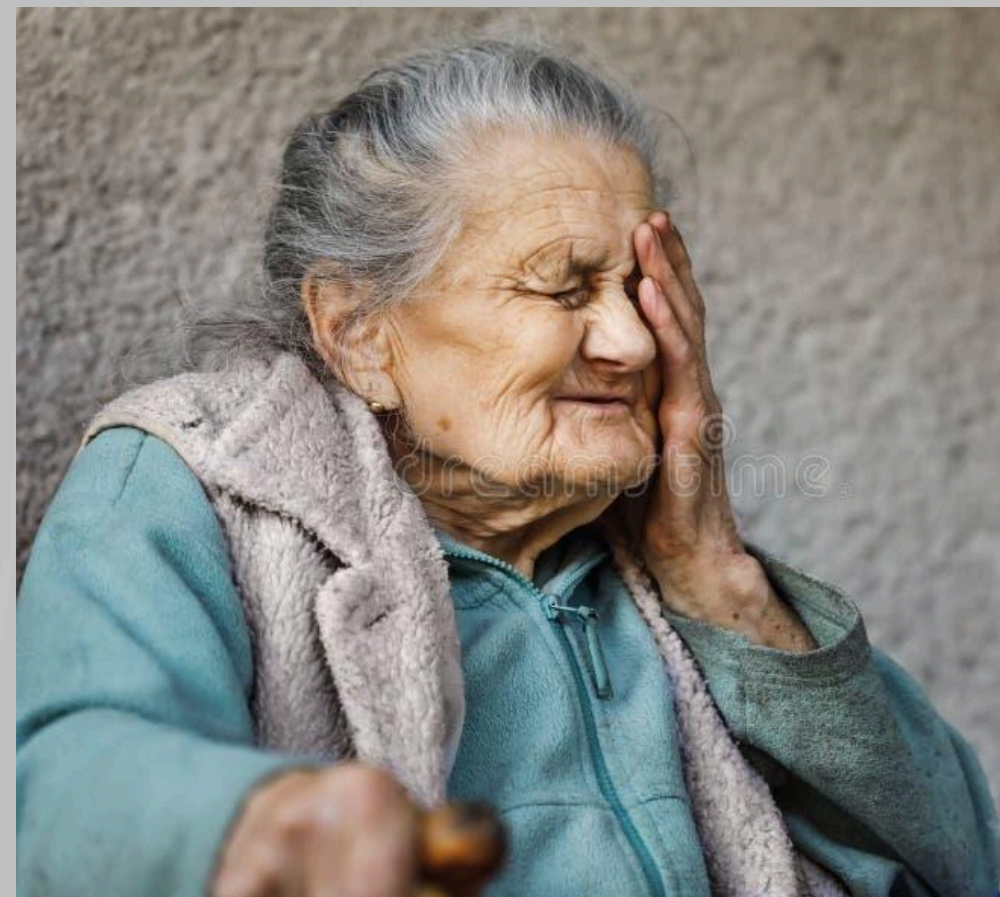
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We thank our industry members for supporting these recommendations



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Kerry Archer



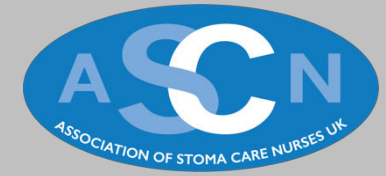
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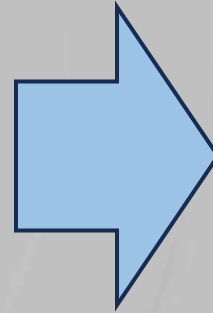


Maddie White



Advice is changing...

Don't lift anything heavier than a kettle, wear a support belt, don't exercise for 6-12 weeks. Be careful. Take it easy.



Core exercise and physical rehabilitation needs to be central to recovery for **EVERYONE**. Prehabilitation where appropriate. Less restriction.
Exercise for health.
A very different conversation.



What do patients want to know?



WHAT can I do?

Is there anything I can't do?

WHEN can I return to /start XYZ

HOW do I recover?

What modifications should I make?

How can I reduce my risk of hernia?



Overarching principles

Exercise is safe
and essential –
core exercises

Personalised
advice – person
centered
approach

EXPASS =
Framework and
guidance

Positivity +
Mindset +
Language = Hope



Methodology



Recommendation 1

Exercise and Activity for All

Actively promote the health benefits of exercise and physical activity for each individual preparing for and recovering from stoma surgery and for those living with a stoma.



Why?

- 80-90% of people with a stoma are inactive
- Health benefits of exercise – CHD, stroke, cancer
- CHALLENGE study colorectal cancer



Beeken RJ, et al. Smoking, alcohol consumption, diet and physical activity of people with a stoma, stoma-related concerns, and desire for lifestyle advice: a United Kingdom survey. BMC Public Health. 2019;19(1):574

Courneya KS, CHALLENGE Investigators. Structured Exercise after Adjuvant Chemotherapy for Colon Cancer. N Engl J Med. 2025 Jul 3;393(1):13-25. doi: 10.1056/NEJMoa2502760. Epub 2025 Jun 1. PMID: 40450658.



What this looks like in practice

- Change language – be positive about exercise
- Signpost to programmes and resources
- Make it standard practice/recommendations
- Raise awareness of CHALLENGE study



Recommendation 2

Individualised pathway

Develop, in partnership with the individual, a personalised recovery and exercise pathway for each person.



Why?

- Every person is unique
- One size does NOT fit all
- Use the 'Self Assessment Evaluation' Tool



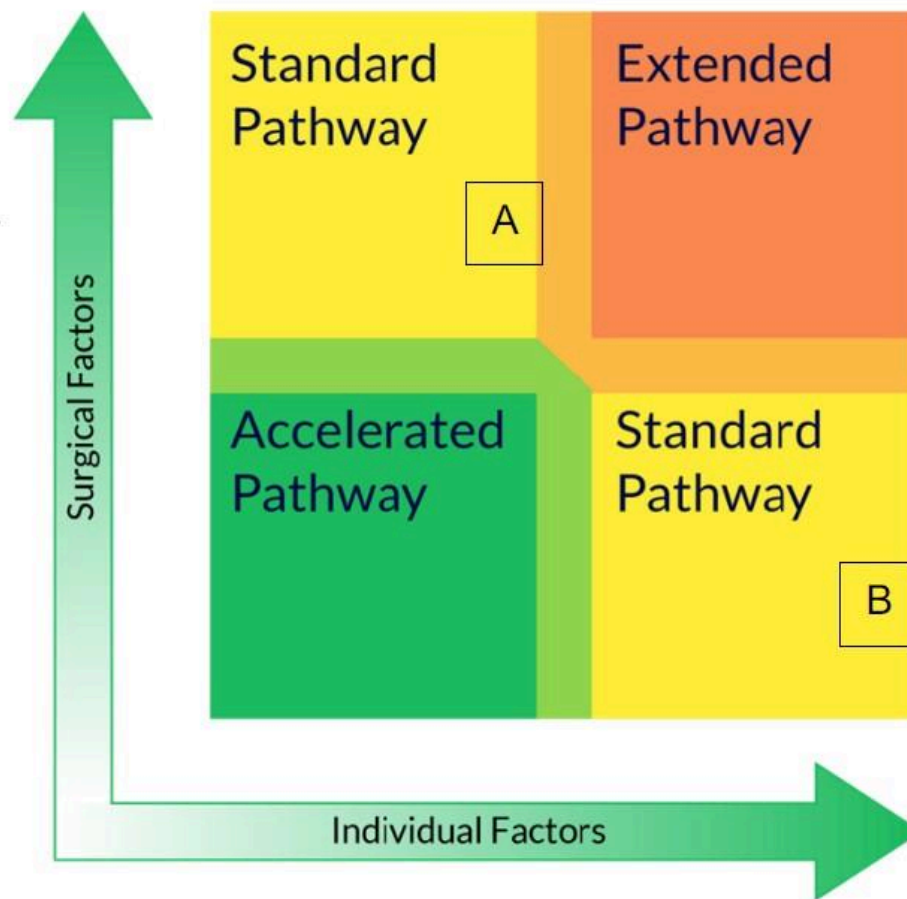
Putting into practice



- Consider the PERSON in front of you
- Positive empowering advice
- Use the EXPASS matrix



- Highly complex surgery
- Multiple surgery history
- APER or TPE
- PF reconstruction
- Abdominal reconstruction
- Emergency laparotomy
- Complications resulting in lengthy admission



- Defunctioning loop stoma
- Laparoscopic/robotic
- Single stoma formation
- Short admission, rapid recovery
- No complications

- Fit otherwise well
- Minimal weight loss
- No comorbidities
- Well nourished
- Motivated
- Previous exercise experience

- Significant weight loss – sarcopenia
- Existing comorbidities
- Malnourished
- Inactive sedentary
- Undergoing chemotherapy
- Other



SELF-EVALUATION ASSESSMENT: SENSATIONS AND SYMPTOMS CHECKLIST DURING AND AFTER ANY ACTIVITY OR EXERCISE

- ✓ Ability to exhale and engage abdominals and pelvic floor with coordination
- ✓ Ability to inhale and relax abdominals and pelvic floor with coordination
- ✓ Feeling of coordination and control of abdominals and pelvic floor
- ✓ Ability and awareness to exhale on exertion/effort during an exercise or activity and engage abdominals
- ✓ No prolonged pain or muscle soreness after exercise around stoma
- ✗ Significant doming or bulging around stoma/general abdomen on exertion
- ✗ Feeling of pressure around stoma, pelvic floor, or rectum on exertion
- ✗ Excessive or unusual pulling/tugging around stoma area
- ✗ Prolapse of stoma during or after exertion
- ✗ Postexercise, excessive fatigue/soreness around stoma area or abdominals

Recommendation 3

Prehabilitation

Promote, when possible, appropriate physical prehabilitation to prepare each individual for stoma surgery.



Why?

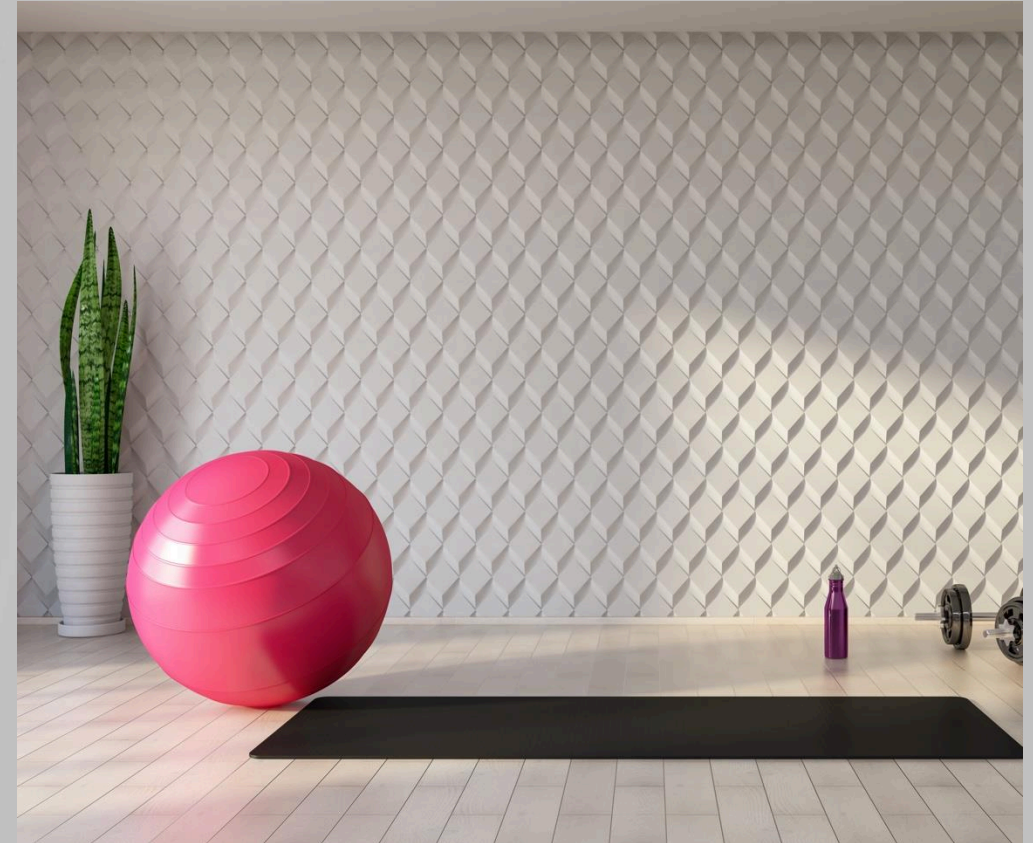


- Improves outcomes (surgical, physical, psychological) & length of stay
- Allows time to “practice” specific core exercises and improve muscle tone
- Poor preoperative physical performance is a known predictor of worse outcomes and higher mortality



Putting into practice

- Clearly explain the impact of the specific surgery
- Signpost or refer to community or hospital-based general prehab programmes/resources
- Referral to pelvic health physiotherapist for complex pelvic surgery
- Teach core exercises and breathing



Recommendation 4



Early Mobilisation

Encourage and support timely postoperative mobilisation and movement appropriate for each individual.



Why?

- Approx 2-3% of muscle mass can be lost per day – prevents more deconditioning
- Early mobilisation improves confidence and independence
- Core specific exercises - important in early rehab phase – do not wait



Putting into practice



- Teach techniques to support with ADL's (in/out of bed) and lifting
- Breathing and specific core exercises 24 hours post surgery
- Avoid restrictive advice



Recommendation 5



Core Exercises for all

Recommend suitable abdominal and pelvic floor exercises for all individuals having stoma surgery and living with a stoma.



Why?

- Reduces risk of hernia and pelvic floor dysfunction
- Restores confidence and independence
- Enables safer return to life



Putting into practice

- Teach as prehab
- Commence 24 hours post op if possible
- Resources – Convatec , Clinimed, Fittleworth, Coloplast Core 4. NHS hospital leaflets and other resources
- Clinical Pilates - Physiotherapy



Recommendation 6



MDT approach

Involve and educate, where appropriate, relevant professionals to support each individual, specifically with exercise and rehabilitation.



Why?

- Currently no consensus – patients are confused
- Everyone needs to say the same thing
- Collaborate skills and resources



Putting into practice

- Educate team – share EXPASS recommendations
- Refer within hospital and externally – use resources available
- Create a list of trusted professionals and resources
- Agree approach and protocols



Recommendation 7

Return to daily activities

Encourage and support each individual, after appropriate physical rehabilitation, to return to or commence their chosen daily activities, lifestyle, and occupation.



Why?

- Only 27% of people return to work after stoma surgery
- Only 52% of people return to active jobs
- Socio-economic issues – QoL
– mental wellbeing – hobbies
- health



Putting into practice

- Core exercises are foundational for everyone – **teach, signpost, refer**
- Specific progressive rehab and exercise to build up
- Use EXPASS matrix to provide a realistic timeline



Recommendation 8

Return to sport and exercise

Encourage and support active (including athletes) individuals, after specific physical rehabilitation, to return to or commence their chosen sports, fitness activities, competition, and physical occupations.



Why?



- Disability myth. People feel limited.
- Everyone is different – need personalised advice
- Examples of rugby players, body builders, professional athletes with stomas
- People should not be limited

Putting into practice



- Share and signpost examples of individuals
- Most people shouldn't be limited.. BUT appropriate rehab is **ESSENTIAL**
- Greater challenge = more rehab



Patient voices



I was given no advice on what level of fitness to expect post-surgery - but was left with an impression that there would be a lot of things I would no longer be able to do.

I would recommend to take the time to feel confident with the skills of breath work and finding the core. I started off wearing a support belt and pants, but after about six months I now don't feel the need to wear it.

When you wake up after surgery, realise that you have to start a many-faceted project to build the new you. It will take months and there will be setbacks, but you can do it.

My advice to anyone. You absolutely need to exercise! Don't be scared to move!



What you can do now...

Change your thinking –
change your practice

TELL EVERYONE! Share
EXPASS

Read the EXPASS
recommendations and
implement them

Consider research and
publications –
collaborate with us

Think about the
individual person in
front of you – ask your
patient what's
important to them

We can change
patients lives together





Exercise and Physical Activity After Stoma Surgery: Best Practice Recommendations

GUIDANCE FOR EXERCISE, HEALTH CARE, AND MEDICAL PROFESSIONALS



Providing personalised and empowering advice as well as practical interventions for exercise and physical activity to all individuals having stoma surgery should be an essential part of the stoma pathway

OVERARCHING PRINCIPLES

- Everyone needs personalised advice—one size does not fit all
- Specific core rehabilitation should be standard for everyone
- Exercise is safe and essential—focus on the can do
- Set people up for better quality of life with a positive mindset

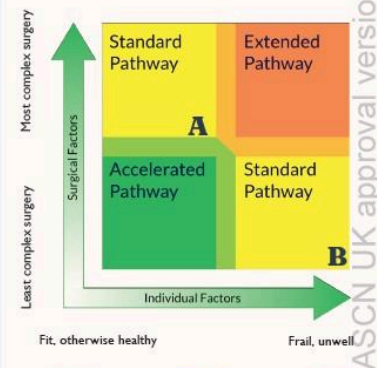
EXPASS BEST PRACTICE RECOMMENDATIONS

- Actively promote the health benefits of exercise and physical activity for each individual preparing for and recovering from stoma surgery and for those living with a stoma.
- Develop in partnership with the individual a personalised recovery and exercise pathway for each person.
- Promote, when possible, appropriate physical prehabilitation to prepare each individual for stoma surgery.
- Encourage and support timely postoperative mobilisation and movement appropriate for each individual.
- Recommend suitable abdominal and pelvic floor exercises for all individuals having stoma surgery and living with a stoma.
- Involve and educate, where appropriate, relevant professionals to support each individual, specifically with exercise and rehabilitation.
- Encourage and support each individual, after appropriate physical rehabilitation, to return to or commence their chosen daily activities, lifestyle, and occupation.
- Encourage and support active (including athletes) individuals, after specific physical rehabilitation, to return to or commence their chosen sports, fitness activities, competition, and physical occupations.



The recommendations were funded by unrestricted educational grants from AMH Medical Ltd, GlaxoSmithKline, Corvax, CCL Interactions, Salix, and Salix. EXPASS best practice recommendations © 2023 by ASCN UK. Licensed under CC BY 4.0.

USE THE EXPASS MATRIX TO IDENTIFY A PERSONALISED RECOVERY PATHWAY FOR EACH PERSON



PROVIDE INDIVIDUALISED ADVICE

Scan QR code to full EXPASS best practice recommendations



Reference: Russell S, Archer K. EXPASS Expert Panel. Physical activity and exercise before and after stoma formation: EXPASS best practice recommendations. Association of Stoma Care Nurses UK. 2023 Oct. 10; p. Available from: <https://ascnuk.com>

