

# PPP

## Preferred Pouch Profile

# PPP: ptosis

- Overall size and design of pouches, as well as choice of pouch wall material, will influence the tendency for pouches to deform under load and present a bulging, drooping and misshapen appearance.
- There has been a tendency/trend among major ostomy pouch manufacturers toward pouch volume reduction and shape conformity while using **flimsy** plastic pouch wall materials, and this is inappropriate.

# PPP: pouches unladen



# PPP: pouch ptosis @ 150 cc



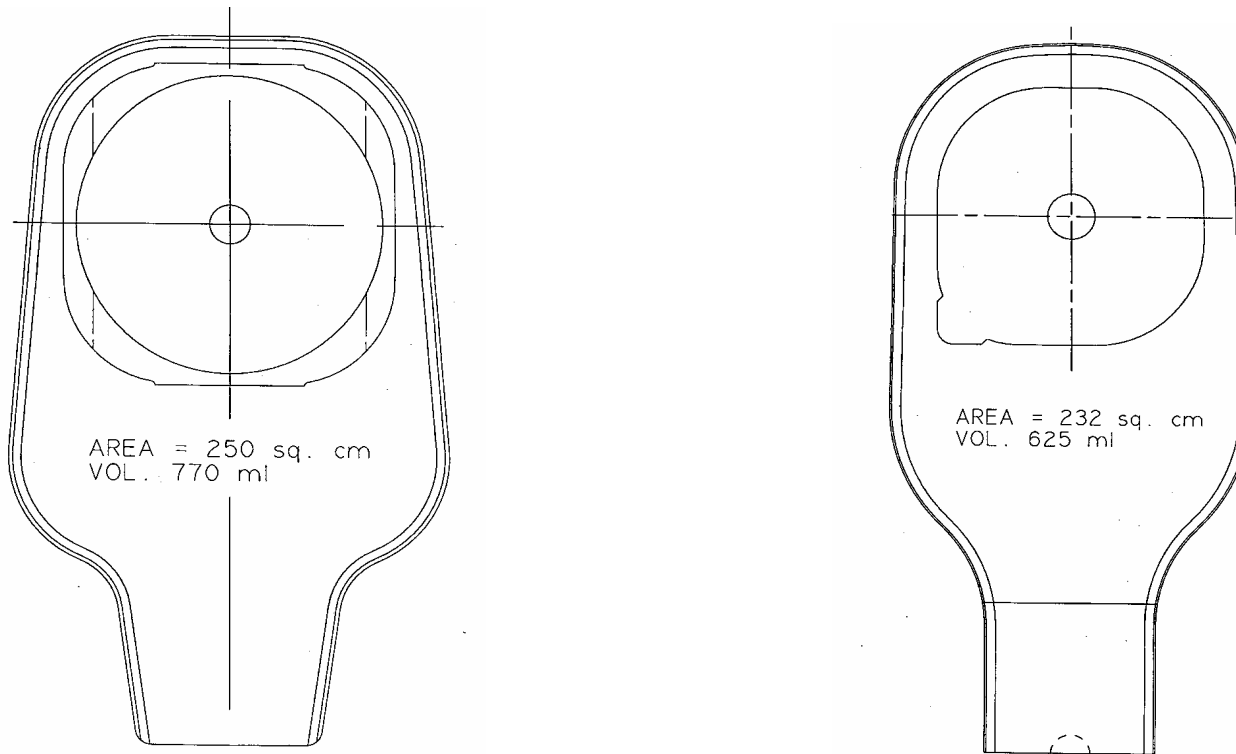
# PPP: compare ptosis @ 150 cc



# PPP: peek-a-boo series



# PPP: volume reduction trend contributes to ptosis



Hollister pouch volume comparisons:  
(pre 1997) **770** ml to (post 1997) **625** ml

# PPP: manufacturers' bizarre logic

“Since we recommend the pouch be drained when the pouch is between  $1/3$  and  $1/2$  full, the resultant pouch volume [reduction] change was determined to be acceptable for most users.”



# PPP: unintended consequences

Decreased pouch capacity contributes to:

- increased pouch ptosis
- increased pouch emptying cycles
- increased ostomate toileting anxiety
- increased threat to pouch/wafer seal,

i.e., pouch ptosis and reduced volume capacities adversely affecting SPD (Stomal Plane dynamics)

**PPP** = preferred pouch profile

“Is achievable with suitable pouch volume capacities along with the ability of the pouch walls to remain slim in appearance or not bulge out too readily when under load from the collecting effluent.”

*Mike ET*