

TO CHANGE OR NOT TO CHANGE? THE LOST OSTOMIST

HELEN WOODCOCK
COMMUNITY STOMA CARE NURSE

The issues raised within this study have been brought about by the ever increasing ageing population, not only in the UK but around the world. With this in mind, it means that the Community Stoma Care Nurses are finding "lost ostomists", still using the first stoma pouch that they were given on discharge 30–40 years ago. Most of these products are now out dated or are being discontinued by the companies that produce them.

AIM

The aim of this study was to highlight the reason for changing a patient's appliance and whether or not when reviewing the patient: assessing the quality of life, product usage, leakage or sore skin it is actually necessary to change.



METHOD

To review the current literature, making particular reference to documents which have brought about a review of these patients. This has given the stoma care nurse the opportunity to review the patient, assessing their quality of life with regard to their stoma, a product review and also to address any problems with sore skin or leakages.

LOST OSTOMIST A

PATIENT HISTORY

- John, 70 years old, ileostomy for 36 years
- Lives with his wife, and has an active life
- Has used the same appliance for 36 years
- No peri-stomal problems
- Changes pouch every 6 days
- Has not seen a Stoma Nurse for many years

ON REVIEW

- John has no current problems
- PROMS questionnaire reported quality of life with his stoma as 10 out of 10

OUTCOME

- I discussed with John that the black bags are now very old and could be discontinued at any time as the need for them decreases. John has looked at new products but does not find them very robust although he has never tried them and does not want to consider them at the present time



LOST OSTOMIST B

PATIENT HISTORY

- Brian, 59 years old, ileostomy since birth (stoma created for Hirschsprung's disease)
- Stoma reversal attempted age 11, but not successful
- Last saw Stoma Nurse at age 18, then transferred to adult services

ON REVIEW

- Brian did not want to remove stoma bag, said it takes him a long time to perform his stoma care
- Learning difficulties, lives with mother and brother, does not work and rarely goes out/ has no social life
- Not confident with his stoma, says it could leak at any time and he leaks every night
- Second appointment made, and Brian happy to remove his pouch
- **NOTE:** when first contacted, Brian reported having "no problems" with his stoma

OUTCOME

- Photograph of stoma shown to GP
- Brian has agreed to see a surgeon for review



RESULTS

FACTORS RELATED TO THE NEED FOR REGULAR REVIEW:

Firstly, the patient living longer with their stomas means changes in their body shape, stoma size, stoma herniation, dexterity, due to arthritis, failing eye sight and dementia problems. These problems were highlighted by Burch (2011)(4).

- **ERP:** The Enhanced Recovery Programme is used to optimise rehabilitation following major surgery, and has been used with colorectal surgery patients since 2002. Black (2011) (3) states that, due to the reduced hospital stay of the stoma patient, 'it is unlikely that the patient will have time to adapt and be competent with their stoma care on discharge'.
- **AUR'S:** This is intended to prevent stock piling, the inappropriate usage of products and to offer ongoing support and education to patients.
- **QUALITY OF LIFE ISSUES:** If the patient's quality of life is satisfactory for them, why should they change as long as they are aware that the products may be discontinued in future and they may then have an imposed change forced upon them? Also if the patient is admitted to hospital and cannot care for their own stoma, most stoma care nurses are not familiar with the old black bags so would change them for a more modern product.

- **PROM (PATIENT REPORTED OUTCOMES MEASURE):** The Quality of Life questionnaire which is used as part of the author's review of patients can also be referred to as a PROM questionnaire. This is completed by the patient prior to review and discussed with the nurse at review.
- **PREM (PATIENT REPORTED EXPERIENCE MEASURE):** 3 months after review, a PREM questionnaire is also completed by the patient to report on the amount of change that has occurred in the patient's quality of life in relation to their stoma management following the intervention by the community stoma care nurse.
- **WORKING IN PARTNERSHIP:** Refers to reporting to the commissioning body on the results of having assessed a group of patients' current stoma care regimes and recommending alternative more cost-effective products as appropriate. The PROM and PREM questionnaire results are also reported to the commissioning body, along with the cost benefit analysis.

CONCLUSION

Both of these patients emphasise the need for regular review by a stoma care nurse in different ways but in both cases the patients had not been seen for a long time. Most patients as found in work by Redmond et al (2009)(5) had not sought help and advice thinking it is normal to suffer leakage and sore skin.

In summary, it is felt that the community stoma nurse's role to annually review patients to prevent stock piling, inappropriate use of products and most importantly to offer ongoing support and education to improve the quality of life of the stoma patient, can only be seen as a positive step in the journey for the stoma patient and lead to effective outcomes in the future.

Helen Woodcock has been a Community and Hospital Stoma Care Nurse for the last 10 years in Sheffield and outlying areas. She joined Salts Healthcare as a Community Stoma Care Nurse in May 2013.

SALTS
HEALTHCARE

References

1. Department Of Health DOH (Part IX the Drug Tariff 2010)
2. Borwell B (2009) Continuity Of Care For The Stoma Patient: Psychological Considerations. *British Journal Of Community Nursing*, vol14,155,8, p326–331.
3. Black P (2011) Choosing The Correct Stoma Appliance. *Journal Of Community Nursing*, Nov/Dec, p44, 46, 48–49.
4. Burch J (2011) Essential Care For Stoma Patients. *Nursing Times*, 107: 45, p12–14
5. Redmond C et al (2009) The experience of faecal leakage among ileostomies. *British Journal Of Nursing*, vol 18, iss. Sup6, Sept s12–s17.

Note: photos of people are library images, but photo of stoma is patient's stoma