When Effluent Flows Underneath the Pouch: Management of Peristomal Complication

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BACKGROUND

The patient is status post (s/p) renal transplant (2021), had bowel perforation s/p colostomy creation in 2022 in other country during visitation. The patient had not received ostomy education from the country where operation took place. Spouse changed pouch and patient emptied pouch. Learned ostomy management through "youtube" channel.

Referred by patient's primary physician to be seen in BCT (Burn Care Therapy) clinic due to multiple papules on peristoma and surrounding areas.

PURPOSE of Innovation

Patient was using traditional pouching system- two-piece flat pouch, unable to keep pouch for 3 days due to leakage.

Papules around stoma and surrounding skin were increasing in numbers and sizes and causes skin discomfort and pain.

Patient was anxious to achieve a pouching system that would allow her to engage with people and do activities with confidence and without pain, discomfort and smell due to leakage.

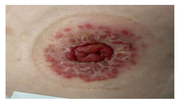
REFERENCES

1. Emory University Nell Hodgson Woodruff School of Nursing. Wound Ostomy & Continence Nursing Education Program (2016) Section XII Peristomal Skin Care and Pouching Guidelines. Ostomy And Continent Diversions Core Content (pp126-138)
2. Goldberg, Margaret. Patient Education Following Urinary/Fecal Diversion. Wound Ostomy Continence Nurses Society Core Curriculum. Ostomy Management. 2016 Chapter 11 pp131-138.

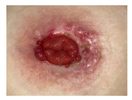
METHODS

The stoma is flush, in a deep well when in sitting position and with multiple papules on peristoma and surrounding skin.

Initial photo:



Week 2:

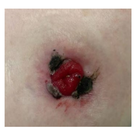


Application of 2 piece flat pouch only lasted for 2 days and leakage noted on the backing of pouch.

Innovation Process:

(1) (a)Applied crusting method (application of stoma powder and sealed with no sting barrier film) x 2 and no sting cyanoacrylate skin protectant on affected peristoma and surrounding areas on initial visit until week 4 and (b) Silver nitrate was added as treatment to remaining papules on Week 2 and thereafter until discharge.
(2) Applied light amount of stoma paste from 2-10 o'clock -where creases and spaces present that created by papules- in order to even the skin until healed.
(3) Applied slim barrier ring around the stoma.
(4) Applied 2 piece pre cut convex pouch.


1a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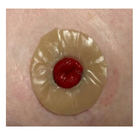
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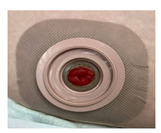
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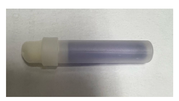
Accessories:


Silver Nitrate


stoma powder


no sting barrier film


no sting cyanoacrylate skin protectant


stoma paste

Taught re-measurement of stoma and ostomy application procedure-spouse return demonstration. Educate to change pouch every 2-4 days while papules are present and change every 3-5 days or if it is leaking once papules/peristomal irritation healed.

RESULTS

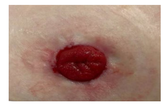
Ultimately, an approach that involved slim barrier ring, 2-piece convex pre-cut pouch, application of crusting method, cyanoacrylate skin protectant and silver nitrate were the keys to success in healing papules.

Teaching patient and spouse of re-measurement of stoma and ostomy application procedure with return demonstration reduced patient's anxiety, pain free and discomfort free.

Patient's self esteem improved and gained confidence in engaging with people .

Also discussed on ostomy education were ostomy secrets, ostomy support group and resources to know while living with an ostomy.

Discharged on the 118th day in BCT Clinic. Patient never called back for any ostomy issues afterward.


Day 118 (patient has 4 weeks missing follow-up due to out of town)

CONCLUSIONS

Application of crusting method, no sting cyanoacrylate skin protectant and silver nitrate were the keys to success in healing papules around stoma.

Teaching with return demonstration of ostomy application which involve 2-piece pre cut convex pouch, stoma paste (until papules healed) and slim barrier ring were keys to achieved 3-5 days wear time.

Patient's anxiety, pain and discomfort were resolved after healing papules.

Patient gained confidence and self esteem in engaging with people according to husband.

Patient achieved a better quality of life.

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