Opus Healthcare Stoma Care Literary Review

April to June 2019

Title	Publication	Date	Overview
Educating patients in stoma care	Gastrointestinal Nursing, Vol. 17, No. 3, pages 18-22.	April	Article explores the role of the stoma care nurse (SCN) covering preoperative preparation for patients, including topics such as diet, employment and exercise, as well as post-surgery follow up. It discusses the importance of a pouch change demonstration, to include removing the pouch using adhesive remover spray to protect the skin from stripping. Then, using water and wipes or tissue, the stoma and peristomal skin are cleaned and dried. Following an assessment of the peristomal skin condition (using the Ostomy Skin Tool) an appropriate pouch is chosen, ensuring a snug fit so that the skin is protected from damage caused by output from the stoma. The article suggests that this education and information-giving by SCNs is vital, as is helping patients overcome any barriers they face such as poor vision, learning disabilities and language barriers.
Mentioning the unmentionable: a stoma care nurse's journey to discussing sexuality comfortably with ostomates	Gastrointestinal Nursing, Vol. 17, No. 3, pages 24-28.	April	Article discusses how sexuality can be profoundly affected by the formation of a stoma and how ostomates should have an opportunity to discuss sexuality with a stoma care nurse. However, it suggests that this can be a difficult topic to raise, due to social and cultural taboos, as well as misconceptions about roles and responsibilities and denial of problems. Engaging in these difficult conversations is an important skill that can be learned and perfected, so long as the need is identified. Permission-giving according to the Ex-PLISSIT model makes it easier for patients to open up about sexuality, making it possible to identify and address common sexual problems experienced by ostomates.

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Best-practice for stoma care in children and teenagers	Gastrointestinal Nursing, Vol. 17, No. 5, pages s12-s13.	June	Article introduces updates to a new set of global best-practice guidelines for paediatric stoma care which aim to improve the life quality of neonates, children and teenagers with a stoma, as well as that of their families. Specific topics covered include types of stomas observed in paediatrics, the basics of stoma care including peristomal skin cleansing, as well as appropriate appliances and accessories. The authors hope the guidelines will give stoma care nurses and enterostomal therapists the knowledge and confidence to care for babies, children and teenagers with a stoma. They also recommend that they are included in stoma care training programmes for student nurses.
Altered body image in stoma patients: evaluation through classification of nursing outcomes	Gastrointestinal Nursing, Vol. 17, No. 5, pages s24-s30.	June	Article shares the results of a study to determine how satisfied ostomates were with their body image and how well they had adapted to stoma surgery. Patients in the older age group (>68 years) were more satisfied with their body appearance, and satisfaction and adjustment were slightly higher in women compared with men. Also, patients whose stoma was indicated for an oncological diagnosis had higher scores for satisfaction and adjustment, suggesting it is easier to adapt to life with an ostomy when the surgery provides an opportunity to survive an otherwise fatal diagnosis.
Exome and immune cell score analyses reveal great variation within synchronous primary colorectal cancers	British Journal of Cancer, Vol. 120, No. 9, pages 922-930.	21 March	Article explores how approximately 4% of colorectal cancer (CRC) patients have at least two simultaneous cancers in the colon. Data from a study shows major diversity within synchronous CRCs and highlights how rather than rely on data from one tumour, there is a need to evaluate both tumours of a synchronous pair for optimised targeted therapy. The study elucidates further the genetic background of SCRC and how immune responses vary between the tumours, improving understanding of the diversity within the tumour pairs.

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Considerations for the management of enterocutaneous fistula	Gastrointestinal Nursing, Vol. 17, No. 3, pages 36-42.	April	Article discusses enterocutaneous fistula (ECF) which is one of the most challenging postoperative complications to manage and can result in intestinal failure, which is often fatal if not managed correctly. It suggests a multidisciplinary approach is required, involving the skill and support of a stoma care nurse if the outcome of closure is to be successful. It discusses the principles of fistula wound management and suggests that although patients are often keen to proceed with surgical closure at the earlier opportunity, they are better off waiting through at least 6 months of non-surgical management.
Transanal irrigation: an alternative therapy for bowel dysfunction?	British Journal of Nursing, Vol. 28, No. 7, pages 426-428.	11 April	Article examines transanal irrigation (TAI) in the treatment of bowel dysfunction. According to NICE there are multiple benefits of TAI, including improving symptoms and reducing severity of chronic constipation, reducing severity and frequency of faecal incontinence and reducing stoma surgery rates. However, the article suggests that research has shown that TAI is not suitable for every patient and conservative therapies should be tried first. Assessment should exclude any conditions that would contraindicate treatment and instruction and follow-up should be via a professional trained in TAI. The author concludes that if these issues are not taken into account there will be a high probability of discontinuation but, if implemented correctly, TAI can improve quality of life substantially for individuals with bowel dysfunction.
In brief...	Gastrointestinal Nursing, Vol. 17, No. 4, page 10.	May	Article suggests that people who eat red and processed meat ≥ 4 times a week have a higher risk of developing bowel cancer than those who consume it < 2 times a week. The Department of Health say that while meat is a good source of protein, vitamins and minerals, people should cut their daily intake of red and processed meat to about 70g per day.

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Bowel cancer rise in under 50s suggests screening change	The BMJ, Vol. 365, No. 8200, page 256.	25 May	The findings of a study suggests that screening guidelines may need to be reviewed if the incidence of colorectal cancer (CRC) continues to increase in adults aged under 50. Data showed the incidence of colon cancer in 20-29 year olds rose by 2.7% a year between 1990 and 2005, and then by 9.3% a year between 2005 and 2016. The incidence of rectal cancer rose steadily by 3.5% a year over the whole period. In people aged 30-39 years, colon cancer incidence rose by 6.4% a year from 2006 to 2016, while that of rectal cancer rose by 1.6% a year from 1990 to 2016. In the 40-49 year age group, the incidence of colon cancer fell by 1.3% a year between 1990 and 2004 but then rose 1.6% a year between 2004 and 2016.
Understanding the impact of socioeconomic differences in colorectal cancer survival: potential gain in life-years	British Journal of Cancer, Vol. 120, No. 11, pages 1052-1058.	1 May	Results from a study have demonstrated large differences in terms of prognosis between socio-economic groups. Up to 10% points differences in 5-year relative survival between the least and most deprived was observed. If these differences had been eliminated for colon and rectal cancers diagnosed in 2013 then almost 8,231 and 7,295 life-years would have been gained respectively. This results in more than 1-year gain for each colon cancer male patient in the most deprived group on average. This study highlights the importance of policies to eliminate socio-economic differences in cancer survival as many life-years could be gained for the most affected groups.
Efficacy and safety of biosimilar CT-P13 compared with originator infliximab in patients with active Crohn's disease: an international, randomised, double-blind, phase 3 non-inferiority study	The Lancet, Vol. 393, No. 10182, pages 1699-1707.	27 April	This study provides evidence of the non-inferior efficacy of biosimilar CT-P13 to infliximab in patients with Crohn's disease. Crohn's Disease Activity Index-70 response rates at week 6 were similar for CT-P13 (77 [69·4%, 95% CI 59·9 to 77·8] of 111) and infliximab (81 [74·3%, 95% CI 65·1 to 82·2] of 109; difference –4·9% [95% CI –16·9 to 7·3]), thereby establishing non-inferiority. The results also showed that CT-P13 was well tolerated, with a similar safety profile.

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We are always pleased to provide samples of all our products. Please call 0800 458 7605 or visit **opus-healthcare.co.uk** to request any of the products listed below

Product	Description	Order code
AbsorbaGel	Solidifying agent	9900
ClearWay Mini	Stoma care bridge	8800
DeoGel - bottle	Deodorising & lubricating gel	2010
DeoGel - sachets	Deodorising & lubricating gel	2020
LaVera - sachets	Barrier cream	3300
LaVera - tubes	Barrier cream	3301
Lift Plus 360	No sting adhesive remover	5506
Lift Plus - sachets	No sting adhesive remover	5502
Lift Plus Citrus - sachets	No sting adhesive remover	5504
Lift Plus 360 Citrus	No sting adhesive remover	5507
NaturCare	Unscented	1100A
NaturCare Citrus	Citrus	1102A
NaturCare Fragrant	Lightly perfumed	1101A
NaturCare Mint	Mint	1103A
NaturCare IPD	In Pouch Deodorant Powder	1104
SkinSafe - sachets	No sting protective film	6600
SkinSafe - spray	No sting protective film	6601

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Lift Plus 360 | Lift Plus 360 Citrus

Designed to be gentle on the skin...from any angle!

Lift Plus® 360, using the latest **bag on valve technology**, is a highly effective range of medical adhesive removers that helps **reduce the pain** associated with the removal of stoma pouch adhesives.



- **The spray can be applied from any angle (360 degrees), offering greater reliability†**
- **The removal of the propellant helps ensure:†**
  - the product is not cold on the skin
  - it's more environmentally friendly
  - there's more product in the can
- **Suitable for all ages**

AbsorbaGel

Providing freedom from colourful moments

AbsorbaGel is the **market leading** and fast-acting discharge solidifying agent.



- Transforms pouch contents into a gel thereby reducing the potential for leaks, noise and odours from stoma pouches
- Makes the use and disposal of pouches simple and discreet
- A survey found that 100% of individuals found their bags easier to empty using AbsorbaGel[1]

SkinSafe

Guards and protects vulnerable skin

SkinSafe provides an **effective** barrier film.



- Protects the skin against bodily fluids and 'skin stripping' caused by the constant application and removal of adhesives
- Should not sting on application
- 93% of stoma care nurses recommend silicone as the skin preparation of choice on excoriated skin (n=363)[2]

References: 1. AbsorbaGel - User questionnaire. Opus Healthcare Limited. **2.** Berry, J. et al. BJN 2007; 16(13): 778 - 888.

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† Compared to traditional aerosol technology

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