

Management of the Bariatric Patient with an Ostomy

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Introduction

In 2008, the CDC reported a 28.3% obesity rate among the adult population in Louisiana.¹ Our facility treats a large bariatric population.

Clinical Problem

The average weight of our patients varies between 250-500 pounds. Our most recent patient exceeds 500 pounds. Many of these patients are over 75 years of age as well. This combination of patient characteristics poses unique challenges for the patients as well as the entire nursing staff. As we began to identify these unique physical challenges (such as poor accessibility to the stoma due to abdominal contours, curves and creases, as well as impaired dexterity, eyesight and mental status) among this population we identified the need to evaluate our ostomy pouching routines to attempt to achieve improved outcomes.

Current Management Approach

Post-operatively, our patients were placed in a one-piece pouch with a cut-to-fit skin barrier.* The average wear-time patients reported was three to four days. The heat and humidity typical for this region coupled with the patient's weight challenges produced less than desirable outcomes. Patients also had difficulty managing the detachable tail closures.

Clinical Evaluation

An evaluation of a one-piece pouch with a flexible skin barrier, filter, and integrated tail closure was conducted.** Over a two-month period, ten patients were asked to evaluate this new ostomy pouch. Six of the ten patients were over 75 years of age and the remaining four were 45 years of age on average. All ten patients were classified as obese, ranging from 250-500 pounds. Nine out of the ten patients had colostomies and one patient had an ileostomy. All patients had what is considered to be a "healthy" stoma, indicating it was budded, slightly protruding with good peristomal skin.

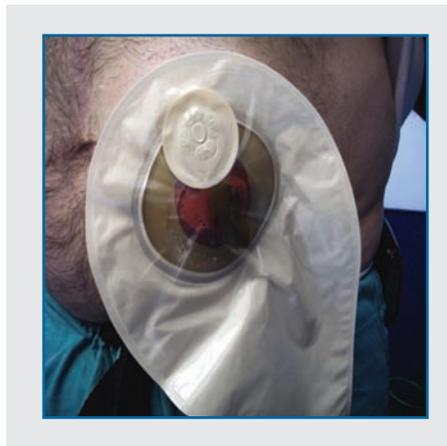
Results

Overall, patients reported this new pouch as being flexible and more comfortable than the previous pouch. Four patients reported a comfortable and secure wear time of 7 days, four patients reported their wear-time to be 5 days and the remaining two patients reported a 3-day wear-time. No patients experienced peristomal skin complications. One of the ten patients discontinued using the pouch because she liked using a removable tail clamp rather than the integrated tail closure of the new pouch.

Conclusion

Development of an individual plan of care for ostomy patients throughout their hospital stay and beyond, is a high priority. Common elements of individualized plans of care include general interventions such as pre- and post-operative self care teaching, stoma marking, an introduction to ostomy products, and post discharge follow-up.² Not only have we found that the new one-piece pouch has managed post-operative physical challenges, but when given choices, our patients seem to overwhelmingly choose this pouch. Patients report a wear-time of between four to seven days. When asked, most patients commented on the ease of using the integrated tail closure and a feeling of security.

Although changing inventory of ostomy products is a difficult challenge for any clinician, our favorable outcomes have proven well worth the effort.



54 year old male, 14 months post colostomy surgery; approximately 240 pounds

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1. Obesity and Overweight. 2008. U.S. Department Of Health and Human Services, Centers for Disease Control and Prevention. <http://www.cdc.gov/obesity/data/trends.html>. Accessed October 19, 2009.

2. Turnbull G. The battle of the bulge and ostomy care. *Ostomy Wound Management*. 2006; 52 (4). <http://www.o-wm.com/article/5521>; Accessed October 19, 2009.

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