

A Survey of Quality of Life Measures in Patients Who Have Transitioned from Using a Non-Moldable Skin Barrier to a Moldable Skin Barrier*

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Abstract

Quality of life measures are specifically defined in terms of satisfaction with everyday life as a whole¹. Ostomates can experience an increase in quality of life when using an improved ostomy device². Studies show that 94% of ostomates change appliance type within the first 12 months after surgery, 76% of ostomates experience peristomal skin irritation, and 62% experience leakage². Data was reviewed on patients who reached-out to a manufacturer's call center for assistance in resolving ostomy management issues. The call center is staffed by 19 WOC nurses with a combined clinical experience of over 100 years, which assures the patient is receiving expert advice to address their concerns. When a patient is experiencing problems that can impact their quality of life, alternative appliances may be suggested for evaluation in an attempt to resolve patient concerns. A review of data from a six-month period was conducted on patients who had been sent samples of a moldable skin barrier* to address their concerns. A follow-up phone call** was placed to these patients to identify the outcomes of their personal evaluation of the new product. This poster presents the results of the data review and supports the assumption that access to a WOC nurse on an on-going basis can help resolve concerns and improve quality of life.

Introduction

In order to evaluate the effectiveness of interactions resulting from calls placed to the customer call center, the WOC nurses collaborated to develop a survey process. The Stoma Quality of Life Scale³ was adapted to identify questions related to wear-time, ease of use, comfort, skin irritation, leakage and sense of security with the newly evaluated moldable skin barrier.

Methodology

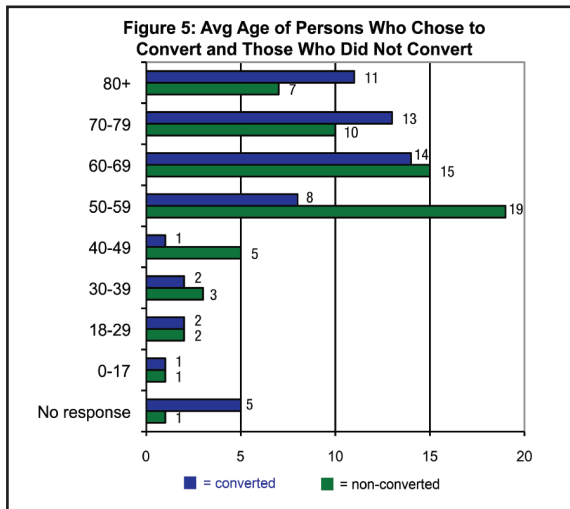
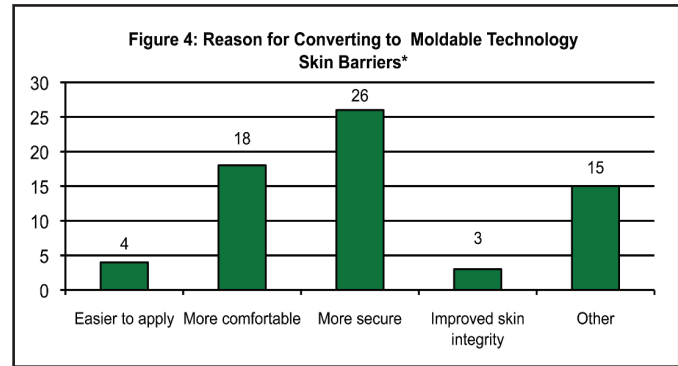
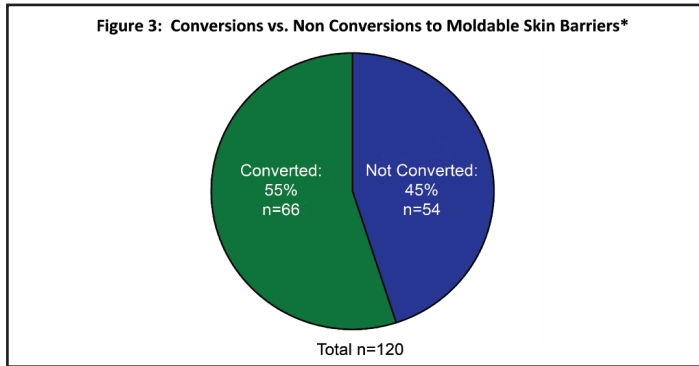
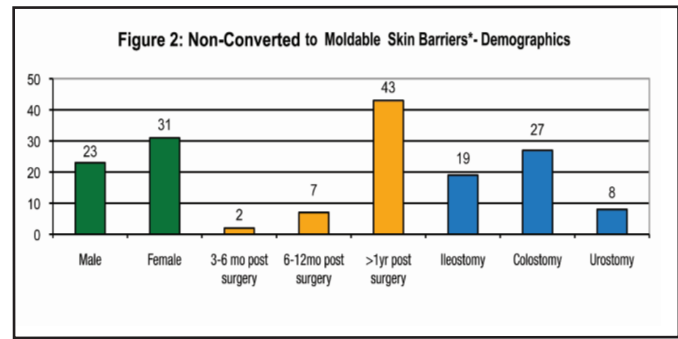
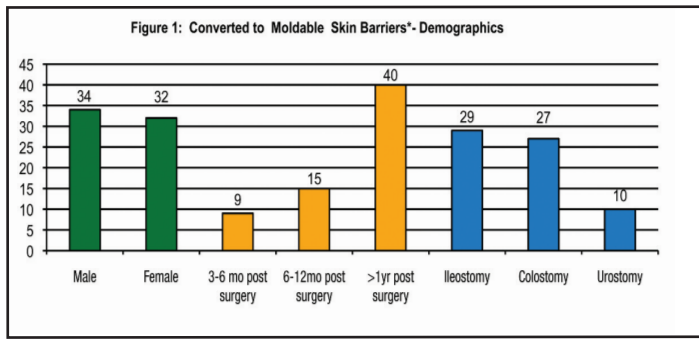
To help assure that the data for evaluation was appropriate, and comparable among the sample, it was determined to include only those patients who had received samples of the flat moldable skin barrier* for evaluation. Those who required convexity for management, or were sent samples of an alternate product for evaluation were excluded. The follow-up phone call that was placed to the patient occurred at approximately 15 business days after the initial call (within a 3-week period).

Results

Within the six-month evaluation period, 374 people wearing an ostomy pouching system from a competitive manufacturer called the WOC nurse customer call center seeking information and assistance due to issues such as pouching system leakage, peristomal skin irritation, and feeling their current pouching system was not secure. Of those 374, 120 (32%) people met the criteria for the call-back survey and consented to participate. The remaining 254 people required convexity to manage their ostomy, chose not to participate in the survey or were unable to be reached by phone for a follow-up survey.

Demographics of survey participants can be found in Figure 1. There was an equal distribution of males and females who participated. Of note in these results is that the majority of people had their ostomy surgery more than one year prior to the time of the survey. By comparison, Figure 2 reports the demographics for those people who chose not to convert to the moldable skin barriers*.

Of the 120 people, 66 (55%) had chosen to convert to using the moldable skin barrier as their system of choice (see Figure 3). The primary and secondary reasons for conversion were increased security and increased comfort respectively (see Figure 4). Finally, a comparison table of study participant ages was evaluated (Figure 5).



Sample Patient Testimonial

"(The flat moldable) is the most comfortable product I have ever worn...it is making a big difference in my life...my wife is thrilled with the product also."
 Earl M – He has had an ileostomy for 32 years.

Results

This study validated the effectiveness of long-term follow-up for persons with an ostomy. One limitation that was identified was that all data was self-reported, and at times incomplete (ie: inconsistent reporting of wear-time, reasons for conversion versus non-conversion). Of the available data the most significant findings include:

- Time from ostomy surgery has been hypothesized as a factor inhibiting willingness of patients to evaluate new or alternate pouching systems. In this study, a majority of participants had their ostomy surgery at least one-year prior to the survey, negating that hypothesis.
- Age has also been hypothesized as a factor inhibiting willingness of patients to evaluate new or alternate pouching systems. In this study, 97 (81%) of people were over 50 years of age, and 18 (15%) of people were over 80 years of age, negating that hypothesis.

Conclusion

Suggested interventions through an outbound WOC Nurse calling program can be an effective tool to assist persons to achieve improved quality of life while adjusting to living with an ostomy. There are no time limitations as to when such interventions might be helpful. Conversion to the moldable skin barrier* pouching system helped patients to achieve a more comfortable, secure and sustainable wear-time, thereby addressing the issues they identified as problematic when they placed a call to the manufacturer's customer call center.

References:

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2. Richbourg, L., Thorpe, J., Rapp, C. Difficulties Experienced by the Ostomate After Hospital Discharge. Journal of Wound, Ostomy and Continence Nursing. 2007; 34(1): 70-79.
3. Baxter, N., Jacobson, T., Maidl, L., Young-Fadok, T. A Stoma Quality of Life Scale. Diseases of the Colon & Rectum. 2006; 49(2): 205-212.

FOOTNOTES:

- * SUR-FIT Natura® Moldable Skin Barrier
- ** ConvaTec WOCN Outbound Calling Program

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