

**P 20**

**Et-nurse Experience With Appendicostomies**

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**Aim:** 20 years' experience with appendicostomies. About 100 children have gone through the procedure. Main underlying diagnoses are myelomeningocele, anorectal malformation and Hirschsprung disease.

**Method:** Twenty years' clinical experiences of three ET-nurses are systemized.

**Result:** ET nurses are easily accessible for these families. Interdisciplinary approach is important Pediatric Psychiatrist, Pediatric Surgeon and the ET-nurse work as a team for these children. ET-nurse always sees the patient and the parents in the outpatient clinic for age appropriate pre-operative information. Some families need several visits. The ET-nurse marks the stoma-site, and decide preoperative bowel preparation. ET-nurse assures necessary equipment, prescription and plan for washouts and laxatives at home. Hospital stay has been reduced. The child sees the ET-nurse 3-4 weeks postoperatively. If a foley catheter is placed, it is withdrawn at this time. A single use catheter is inserted with instruction. After evaluation of the washout history over the first weeks, adjustments are made. Specific advice concerning bathroom routines is given, and we encourage the child to become independent. The child is seen after 3 months, then follow up visits are individualized.

**Conclusion:** ET nurse plays an essential role in the pre- and postoperative treatment of children with appendicostomies.

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**Application Of Decision Tree On The Risk Prediction Of Hospital-acquired Pressure Ulcers In ICU Patients**

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**Aim:** To study and evaluate the feasibility and accuracy for the application of decision tree method on the risk prediction of hospital-acquired pressure ulcers in ICU patients.

**Method:** A retrospective design for collecting 468 patients’ records in a university hospital in Guangzhou, China. All the patients were hospitalized in ICU (MICU, CCU) between 2011 and 2013. The risk prediction model was generated with decision tree method, and the ROC curve was used to evaluate prediction value of the decision tree model and Braden scale.

**Result:** The decision tree model had four stratum and eleven nodes, which screened out three kinds of high risk populations: (1) age >81; (2) age ≤81 combined with fecal incontinence; (3) age ≤81 combined with total Braden score ≤13 and diastolic blood pressure <60mmHg. The sensitivity (80.9%), specificity (70.3%), Youden index (51.2%) and the area under the ROC curve (0.828) of decision tree model was higher than that of Braden Score (77.7%, 58.7%, 36.4%, 0.711).

**Conclusion:** The decision tree model is an easy and feasible tool to predict the risk of hospital-acquired pressure ulcers in ICU patients, and it could be used to develop the screening strategy of high risk population of pressure ulcer in ICU.

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**Occurrence And Risk Factors Of Hospital-acquired Pressure Ulcers In Mechanically Ventilated Patients In Intensive Care Units**

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**Aim:** To describe the incidence, location and stage of hospital-acquired pressure ulcers (HAPUs) in mechanically ventilated patients in ICUs and identify risk factors for their development.

**Method:** A descriptive retrospective study was conducted in a university hospital in Guangzhou, China. The sample consisted of 270 mechanically ventilated patients in ICUs from 2011 to 2014. Statistical analyses were performed using SPSS software version 20.0.

**Results** Of the 270 patients, 136 patients (283 HAPUs) developed HAPU during mechanical ventilation. The incidence of HAPU was 50.37%. Excluding stage I (60 patients), the incidence was 27.78%. Of the 283 HAPUs that developed, 156 (55.12%) were Stage I, 114 (40.28%) were Stage II, 3 (1.06%) were Suspected deep tissue injury, and 10 (3.53%) were Unstageable. The most common locations developed HAPU were sacrum (35.69%), heels (14.13%), and neck and face (10.25%). Logistic regression analysis showed that Braden score (OR=0.873, [95%CI: 0.776, 0.983] P<0.05), length of mechanical ventilation (OR= 1.057, [95%CI: 1.016, 1.099] P<0.01) and steroids use (OR=2.002, [95%CI: 1.140, 3.516] P<0.05) were independent predictors of HAPU development.

**Conclusion:** The incidence of HAPUs in mechanically ventilated patients in ICUs is high. Low Braden score, prolonged mechanical ventilation, and steroids use are risk factors of HAPUs.
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Strategies Viability Of Nursing In The Prevention Of Skin Lesions In People At Risk Of Suffering

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**Aim:** To establish effective strategies nursing care for the prevention of skin lesions in people whose health conditions are at risk.

**Method:** Systematic review of the scientific literature of the last five years in the Medline, Science Direct, FECYT, OVID - with the descriptors Nursing Skin Care, Nursing Care, injuries, Primary Prevention, Iatrogenic Disease, covering nursing strategies for preventing skin lesions.

**Results / Discussion:** it was found that the use of different technologies for the prevention of skin lesions, the implementation of new protocols and guidelines for care are appropriate, however, there is little adherence to the use of effective strategies for the implementation of these protocols due to the high workload of the nursing team related to the time of patient care and continuity of care.

**Conclusion:** in strategies for preventing skin lesions in patients at risk of suffering, nursing plays a fundamental role, however, the methodologies used for the implementation of guidelines and protocols are not effective unless they have a continuous monitoring and evaluation of interventions in the care of the patients. The methodologies for the implementation of strategies are essential to ensure the effectiveness of the guidelines and protocols for the prevention of skin lesions.

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Profile Of Patients Registered On A Reference Center For Customer Service Ostomy Porto Alegre-city Of Rio Grande Do Sul – Brazil

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**Introduction:** Characterization of ostomy patients in a reference center of Rio Grande do Sul (RS), Brazil.

**Objective:** To prepare and identify the profile of gender, age, type of ostomy and incontinence, and pathology leading to ostomy and or incontinence of registered ostomates in the Complementary Assistance Program RS, one of the three service centers to ostomy patients in the city Porto Alegre. We have few studies in this area and the state has the largest number of ostomy patients in the country.

**Methods:** Descriptive study, exploratory, quantitative, the setting was public health establishment for the care of a colostomy. The sample comprised 850 patients treated between August to September 2013. Data analysis was by SPPS version 17.0 program. Project was approved by the IRB (Ethics Committee and Research) 387413.

**Results:** The majority are aged over 60 years, 64.40%. Males had 50.6%. Neoplasia is present at 61.92% of cases. Colostomy appears in 64.07%, followed by ileostomy and urostomy with 20.89% to 9.47%. Urinary incontinence has a percentage of 93.15% of registered and anal incontinence 6.85%.

**Conclusion:** The results show that there is a high number of elderly patients, colostomy, and that urinary incontinence is high index registered.

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Quality Of Life Perspectives Of School-aged Children Born With High Anorectal Malformation: A Swedish Parent Reported Follow-up Study

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**Aims:** In order to provide highest quality care of children born with high anorectal malformation (hARM), the health care organization needs to better understand daily life in children born with hARM. This pilot study aimed to explore daily life in school-aged children as described by their parents.

**Method:** Interviews with six parents of five children aged 8-12 years (two boys, three girls) born with hARM were conducted. Transcribed interview data was content analysed by two researchers.

**Result:** Three categories were identified: 1) Managing disability 2) Being like others 3) Being reminded by the surgical scars. The children had to plan their daily activities and prepare bowel management to avoid constipation and faecal incontinence. They were dependent on others to manage their condition. Most of the children were open with other people about their condition and reported to cope well. Body issues due to their surgical scar, feelings of being different compared to peers were described.

**Conclusion:** Although quality of life issues were raised, daily life was in general described in positive words. Attention was paid to the ostomy surgical scar. Future studies are warranted to advance knowledge of condition-specific quality of life issues reported by children.
P35

Mucocutaneous Detachment In Stoma - How To Treat

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Introduction: Observation mucocutaneous detachment, a center of reference to a colostomy. One of the common complications of rupture of the skin mucus suture in postoperative, causing infections, tissue loss, discomfort, pain and difficulty in maintaining the equipment manifold adhered to skin, both urinary stomata as fecais.

Objective: Implement and follow a treatment that improves the skin, decrease the pain and adapt a device to collect the effluent

Method: The treatment is based on the care of the affected area with the use of adjuvants that promote skin healing and prevent contact of the effluent with the injury. Through systematic service gets significant improvement and recovery of the skin. Carried out measurement of the stoma, applying resin protective powder in the areas of injury with exudation and bleeding, apply protective film and protective folder to stabilize the injured surface. Applies pickup apparatus according to the stom

Conclusions: The improvement of the skin occurs in a short period of time, with the nominees and proper care. The stoma nurse or not, has the responsibility to assess, treat and help maintain the integrity of the peristomal skin, always seeking and material resources, essential in the treatment of complications.

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Assessment Of The Usage Pattern Around Convexity

Dr. A Steen Hansen¹ , Z Størling¹ , A Rahbek¹
1.Coloplast A/S

Introduction: An assessment around the use of convexity has been conducted based on a review of current literature as well as a review of Coloplast market research studies aiming for mapping the current usage pattern correlated with demographic data including type of stoma, peristomal body profiles and leakage incidence to establish a baseline of today.

Aim: To make a status on the current usage pattern around convexity and establish a baseline of today

Method: Literature review and review of Coloplast market research studies. Data will be stastically analysed

Result: The analysis will be completed in October 2015 and the report will be published

Conclusion: A baseline of today will establish a baseline of today to better understand how to manage unmet needs

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Pilot Clinical Evaluation Of Surgical Site Infections With A Novel Handheld Fluorescence Imaging Device

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Aim: Colorectal surgery (CRS) is associated with a 4-25% surgical site infection rate, despite peri-operative best practices. Health care providers rely on traditional markers of wound infection which may not be sufficient for clinical decision making. The development of a handheld fluorescence imaging (FI) device allows rapid visualization and quantification of bacterial contamination at the point-of-care, based on intrinsic fluorescence signals.

Methods: CRS patients (n=7) presenting with abdominal wounds and known or unknown infection were enrolled. The FI was evaluated for detecting subclinical bacterial contamination and guiding (antimicrobial) wound treatments when combined with conventional clinical signs and symptom (CSS) assessment. Patients were followed for up to 4 months to track progression of wound size and bacterial load.

Results: Results show that FI enabled rapid visualization of focal areas of bacterial colonization in large midline abdominal wounds. FI allowed more accurate microbiological sampling of wounds with a sensitivity of 80% for detecting bacterial colonization compared with CSS. FI also confirmed the absence of bacterial colonization (specificity 70%), reducing unnecessary use of antibiotics in these patients.

Conclusion: Handheld FI, when used with standard CSS, enabled better detection of otherwise subclinical bacterial colonization in surgical sites.

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On-line Comic Makers: A Creative Option For Patient Education Materials

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Aim: Patient education is a hallmark of preparing the patient to live with a new ostomy. Education comes in a variety of media, including print, digital and oral. Clinicians prefer print as it is readily accessible and cost effective.  Yet shortened length of stays and increasing complexity of care mean that educational opportunities are limited, and patient recall post-operatively is typically poor potentially compromising their care. The use of comics in health care is well described. Now considered a legitimate form of literature, the combination of pictures and texts in comics allows for improved learning. Comics improve the retention of new information, helping to form bridges between old or familiar knowledge and new information.

Method: A series of ostomy patient education materials were developed using a free on-line comic maker called BitStrips®. The comic maker allows custom characters and scenery to be built and saved. The comics were used as a basis to describe common lifestyle considerations for ostomy care including bathing, buying supplies, and travelling.

Result: Patient response is positive: the comics are felt to be easy to read, engaging and easy to remember.

Conclusions: Comics can be useful tools in enhancing ostomy patient education.

P40

Promoting Patient Self-assessment: A Refresh Of Take A Look

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1. St. Michael's Hospital

Aim: Undergoing ostomy surgery is documented as stressful for patients. Studies describe the multitude of concerns these individuals experience, including peristomal skin irritation, odor and leakage. The severity of peristomal skin disorders is known (up to 77%), as well as the poor ability of patients to self-identify peristomal complications. In 2012, a program called Take A Look was initiated to help patients self-identify peristomal skin complications. This program has evolved and includes a patient survey to determine satisfaction with the program.

Method: The Take A Look program (brochure, laminated shower cards, treatment booklet) was developed to help patients identify normal and abnormal ostomy conditions. The program has subsequently expanded to include an annual checklist for self-review, USB pre-loaded with ostomy information, and colouring books for children to complete. In the summer of 2015, a survey was sent to patients asking for feedback.

Result: The results of the survey will be shared. Verbal reports from patients indicate that checklists are the most useful out of all of the available tools.

Conclusion: Multiple forms of media are required to engage patients in their ostomy care. Take A Look is a multi-faceted program that provides guidance for patient self-care.

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Enhanced Recovery After Surgery And Fecal Diversions: A Provincial Initiative To Standardize The Approach To Care For Patients Undergoing Colorectal Surgery.

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Aim: Enhanced Recovery After Surgery (ERAS) is a multimodal program developed to decrease postoperative complications, enhance recovery and promote early discharge for patients undergoing colorectal surgery (CRS). This standardized approach was adopted by 15 hospitals in March 2013. All elective CRS with or without an ostomy were included in the program, with a targeted length of stay of 3 days for colon and 4 days for rectal surgery. Given this expedited care model, it was important to ensure that the individual needs of patients requiring an ostomy were met.

Method: A provincial ERAS Enterostomal Therapy Nurse (ETN) Network was struck, with a goal to develop and publish ostomy specific clinical practice guidelines for ERAS patients requiring a fecal diversion.

Result: Recommendations addressed the pre- and post-operative, and initial discharge periods for the CRS patient. These targeted statements will facilitate a standardized approach to the care of patients with an ostomy. The recommendations are grounded in literature and will be disseminated to key stakeholders.

Conclusion: Advances in the care of the patients having CRS require ongoing evaluation of processes. The ERAS ETN Network was able to facilitate the development of a comprehensive approach to the care of ostomy patients.

P45 Teaching Strategies For Conservative Sharp Wound Debridement (cswd) Using Video Demonstration.

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CWSWD is defined as removal of loose, devascularized tissue, callous or hyperkeratotic tissue with the aid of a scalpel, scissors, or curette above the level of viable tissue. It is important to train practitioners to be competent in CWSWD as there is a growing body of evidence that effective debridement is associated with reduction in wound exudate, odour and the appearance of granulation tissue in the wound bed. Analysis by Coutts et al 2012, concluded that surgical and CWSWD were the most cost effective debridement methods. However, these techniques are underutilized as they are outside the comfort zone of many practitioners and other techniques are often employed which may be costly and less effective. It is imperative to create workshops teaching the technique of CWSWD; including safe use of scalpel, scissors, and curette.
The content for the CSWD workshop included anatomy of the skin and structures encountered during debridement, benefits and contraindications, all methods of debridement, professional and legal issues including consent. The learner viewed the practitioner's technique, as well as had opportunity to practice in a supervised setting. Workshop participants responded favorably with a renewed understanding of CSWD as a result of the “real life” videos.

P46

Adjustment And Quality Of Life With An Ostomy One Year After Surgery

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Introduction: To undergo ostomy surgery means a major change in a person's life.
Aim: To describe adjustment to life with an ostomy and aspects of quality of life (QoL) in persons with an ileostomy or colostomy one year after ostomy surgery
Methods: 150 patients (82 women/68 men), median age 70, at Sahlgrenska University Hospital participated. Patients responded to questions about adjustment to life with an ostomy, using the Ostomy adjustment scale. All participants also responded to; “What is your definition of QoL, and what contributes to good QoL?” which were analysed with content analysis.
Results: 70 % of patients considered they were able to live a fairly normal life. 43% felt less sexually attractive. A majority felt well-informed and knew the proper methods for managing their ostomy and could talk to and ask their ET nurse about problems related to their ostomy. To be independent and able to participate in various activities contributed to good QoL. Concerns about recurrence of the disease was an obstacle to QoL.
Conclusion: Most participants adjusted well to life with an ostomy and considered life to be normal. The ET nurse was important for patients to resume their new life with an ostomy.

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Analysis of the improvement to damaged peristomal skin seen with the use of Welland Aurum® pouches with Manuka honey incorporated into the hydrocolloid flange.

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Introduction: Peristomal skin damage represents a major complication for ostomy patients both immediately after surgery and long term. Manuka Honey from New Zealand is well known for its antibacterial and antimicrobial properties due to the high concentration of Methylglyoxal. The aim of this study is to verify improvements in skin condition with the use of the Aurum® pouches compared to participant's usual pouches and the effect on Quality Of Life (QOL).
Method: The observational examination of Aurum® pouches with Manuka Honey is being executed in 23 different Italian Stoma Centres, from May 1st until October 30th, 2015. Participants at the study enrolment are informed about their involvement and their clinical condition, usual pouch’s features and their QOL are assessed. After 2 weeks on the Aurum® trial, they are visited again for their clinical condition and QOL perception to be re-assessed. Patients involved have skin problems (dermatitis, skin inflammation/irritation) in the peristomal skin, without retracted stomas or parastomal hernias.
Results and Conclusions: The results of the study will be presented at the WCET conference, but the initial data confirms our hypothesis: Manuka Honey is effective in prevention and treatment of peristomal skin damage.

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The Right Fit In Two Steps: A New Convexity Guide

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1. Coloplast A/S

Introduction: People living with a stoma have different body profiles and may be challenged with their stoma appliance. The decision-making process for choosing the right appliance, with most optimal fit, is not simple. Often decisions are based on experiences and best practice - there is no universal guide.
Aim: Take complexity out of convexity by making a simple, need-based guide that can help identifying the right stoma appliance.
Method: Literature review and qualitative discussions in focus groups with 219 Stoma Care Nurses from Coloplast Ostomy Forum boards in 16 different countries. The Coloplast Body Profile Terminology¹ was used to describe key body profile characteristics.
Result: The convexity guide is designed as a wheel. It recommends the right stoma appliance based on a two-step evaluation of body profile characteristics as well as the position of the stoma opening and the degree of challenges in the peristomal area.
Conclusion: The new convexity guide has a simple and need based approach to help choosing the right stoma appliance.
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**The Benefits Of A New Soft Convex Stoma Appliance: A Randomized Controlled Clinical Trial**

Mrs. T Kruse¹, Dr. Z Størling¹  
1. Coloplast A/S

**Introduction:** Living with a stoma may compromise physical and mental well-being. One of the main challenges is leakage: for those who use flat appliances, changing to convex may be beneficial. Nevertheless, the trade-off is lack of flexibility and comfort. A new appliance, SenSura Mio Convex Soft, has been developed to meet the unmet needs of ostomists who will not compromise between freedom of leakage and comfort.

**Aim:** To investigate the benefits of SenSura Mio Convex Soft.

**Method:** In this randomized, controlled, cross-over clinical trial, three appliances were compared in ostomists who experience leakage with their own flat appliance. The degree of leakage under the baseplate was measured using a new objective method. Furthermore, various performance parameters were evaluated using a 5-point likert scale from "very good" to "very poor".

**Result:** The study included 38 participants with ileostomy or colostomy. While evaluated as flexible and comfortable, SenSura Mio Convex Soft reduced leakage significantly (p<0.01) and provided a better feeling of security when compared with own flat appliance (p<0.01). Furthermore, SenSura Mio Convex Soft was the most preferred soft convex stoma appliance (p<0.01).

**Conclusion:** SenSura Mio Convex Soft may be a good solution for ostomists challenged by leakage with flat appliances.

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**Raising The Bar: New Flexible Convex Stoma Appliance - A Randomized Controlled Trial.**

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1. Coloplast A/S 2. nhs

**Background:** The size and shape of a stoma vary from person to person and sets high demands on stoma appliances. Stoma appliances with integral convexity barriers are designed for those with less than ideal stomas and help the stoma to protrude into the pouch. It also provides a better fit around the stoma, which may help prevent leakage and sore skin.

**Aim:** To evaluate the performance of a new flexible convex stoma appliance, SenSura Mio Convex, that is designed to enable a better fit to the body and reduce the risk of leakage.

**Method:** A multinational randomized controlled cross-over trial including 129 people with an ileostomy. Each arm tested the performance of SenSura Mio Convex and the participants own stoma appliances in periods of 28±3 days. Degree of leakage under the baseplate, bodyfit, comfort, preference as well as stoma-related quality of life were evaluated.

**Result:** SenSura Mio Convex showed significant reduced leakage, significant improved bodyfit, comfort and stoma-related quality of life, and was the overall preferred product when compared with the participants own stoma appliance.

**Conclusion:** SenSura Mio Convex is the preferred convex stoma appliance with significant enhanced properties that improves the stoma-related quality of life.
P55

Quality Of Life Is More Than Just A Score

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Background: Living with a stoma often leaves a negative impact on quality of life (QoL). Most often, QoL is presented as a numerical result without further explanation. However, studies have shown that QoL is correlated with various outcomes such as leakage and skin complications, which are related to the use of a stoma appliance.

Aim: To get a better understanding of what lies behind the QoL score, and evaluate how the performance a stoma appliance can affect QoL.

Method: A new stoma appliance related QoL tool (evaluating 23 items on a Likert-scale) were used in a randomized clinical trial investigating the performance of a new convex stoma appliance compared with an already marketed stoma appliance.

Result: An overall significant improvement in QoL (p<0.001) was observed using the new convex stoma appliance. Assessing each QoL item one-by-one revealed that large improvements were related to the discreetness of the appliance, how comfortable it was to wear, the confidence that it did not leak and how it affected the users social intimate relationships.

Conclusion: The underlying items of a QoL score can reveal important aspects of the performance of a stoma appliance and how it affects the overall well-being of an ostomate.

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Our Patients With Complicated Stoma

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The case stories of some of our patients with very complicated stoma. Caring for the ostomy patients can be problematic, particularly if complications occur. Dealing with complications is one of our major tasks. We have to cope with any difficult situation concerning a stoma or peristomal skin.

We have to know how to improvise.
We can help our patients deal with the physical and psychological challenges of living with an ostomy.
We could strengthen their confidence. We know that condition of the soul is the state of a body.
The patients may benefit from access to an experienced stoma nurse. A many of them knows it.
A global computer network providing a variety of information and communication facilities, it is not unusual for us that an unknown ostomy patient find us on the webside and ask for some advice and help.

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How to guide the new ostomy patient through the process of ostomy care

Mrs. J Trojanova¹
1.FN Hradec Kralove

Aim: We are facing increasing number of surgeries resulting in a temporary or permanent stomas. Hospitalization time is being reduced and patients with ostomy are discharged faster. They have to be able to cope with ostomy care at home and return to their everyday life in a much shorter period of time. Our priority is to get the patients familiar with ostomy care as much and as early as possible. Our educational process starts in preoperative period followed by postoperative period, discharge and home care. It always depends on disease, subsequent therapy, patient's age, skills, psychological state and possibility to include family into the educational process.

Methods: In my work I will present an overview of ostomy care educational process and practice in our clinical department. I will document the process by case studies.
Conclusion: If we use individual approach to each patient in the different periods of ostomy care, if we include the family in the educational process and the care itself then we create ideal conditions for the patients to cope with ostomy care at home and come back to their everyday life keeping the quality of life at the maximum possible level.

Ostobrain. Study Of Alterations Of Intestinal Neurotransmitters In Ostomized Patients.

Mr. F Gil, Mr. F Gil
1. Square Spanish Stomatherapist Group

Introduction: The gastrointestinal tract has an important role in the synthesis of some neurotransmitters, including serotonin, due to the action of certain bacteria in the intestinal flora. Low levels of serotonin are

Aim: To describe differences in the levels of intestinal neurotransmitters compared to standard values of non ostomized population and to see if is there any alterations compared to normal levels , and if there may be a correlation with the symptoms associated with depression .

Method: prospective, descriptive, multicentric , with sample collection, national study. n = 60 . Level of serotonin in urine is determined by HPLC and populations of certain species of bacteria is analyzed in stool. Quality of life questionnaires will be carried out and an evaluation of certain NANDA criteria related to depression.

Result: The levels of microbiota and serotonin will be compared to normal values , expecting differences. Possible differences will relate to the quality of life questionnaires to see if there is any relationship with depressive states or prone to depression.

Help! Leakage! Entero-cutaneous Fistulas Constitute A Management Challenge

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Background; Fistulas are usually the result of trauma or surgery, but can also result from infection or inflammation. The management of fistulas can present the health care team with a complex challenge. Two unusual case studies will be presented. Both cases were associated with profuse exudation, dermatitis, leakage, difficulty in fitting equipment and a decreased quality of life. Objectives: Providing optimal patient care and quality of life, including maintenance of fluid and electrolyte balance, prevention of skin and soft tissue damage, while striving to remain within financial limits of the health organization.

Method: Use of varied types of equipment with dynamic interchanges as the nature of the fistulas changed, appropriate caregiver instruction and daily follow-up.

Result: Skin condition gradually improved, as did patient satisfaction and quality of life. The first patient remained at home for a month before returning to hospital, where he died of his underlying illness. The second was discharged home with subsequent fistula closure.

Conclusion: An accurate evaluation, fitting of appropriate and varied equipment, caregiver instruction and encouragement with continuous follow-up led to an improvement in outcomes.

Care Of Stoma Next To Surgical Wound

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Aim The work summarizes the causes of stoma location near the surgical wound, problems with the treatment and care options for such a stoma.

Method: The work is complemented by case studies of such stomas accompanied by plenty of pictures and documentations which shows usage of different approach, ostomy devices, accessories and skin care products.

For People With Oter ExitsProject Cookbook For Ostomates Danderyd Hospital Ab, Sweden

Miss. M Olofsdotter
1. Danderyds Sjukhus AB

In 2012, the hospital started a cookbook project for ostomates.
In 2013 we received financial support from the industry and could print the cookbook in English and Swedish.
Aim: That all patients and families (worldwide) receiving a stoma should get an access to the cookbook.
Method: Via the Internet reach all newly operated patients with a stoma.

Result: The book has so far been translated into English, Danish, Finnish, German, Norwegian and Spanish. Winner "Best in the World" at the Gourmand World Cookbook Awards 2014 in Yantay China. Category Best Health and Nutrition Book Institutions.
Discussion: The cookbook is an eye-opener to bring happiness and joy back to life and increase security of both the patient and family in terms of food. It will also inspire to dare to try and challenge everything that makes life so wonderful to live.

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The Evolution Of Ostomy Barriers: Ceramide Infused Barriers Promoting Peristomal Skin Health
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Aim: Ostomy pouching barriers have evolved: original glass and porcelain systems in the 1930’s were replaced with zinc based barriers in the 1950’s. Modern hydrocolloid barriers were introduced in the 1970’s, giving way to most currently used pouching systems. Product developments were matched with the introduction of broad principles of care, such as the protection of the stoma and peristomal skin. Recent literature highlights the prevalence of peristomal complications, ranging from 16-74%. This suggests that current principles and available products are insufficient to meet the goals of care, leaving room for product improvement. Ceramides are naturally occurring lipids present in the skin. Their role is to improve skin barrier function by maintaining its water permeability. Skin barriers infused with ceramides are a recent advancement in ostomy barriers.

Method: This case series will describe the impact a ceramide infused ostomy skin barrier can have on peristomal skin health and patient comfort.

Result: Patients demonstrated positive responses to the utilization of a new ceramide infused ostomy barriers.

Conclusion: This ceramide infused barrier allows ET nurses to reassess their traditional care model of reacting to peristomal complications, and consider a new model that encourages prevention of peristomal skin issues.

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Improvement In Stoma Quality Of Life Following Introduction Of Silicone Technology
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1. Clinical Research Consultant, Hertfordshire

Aim: To show that currently maintaining stoma system integrity and the avoidance of leakage relies heavily on hydrocolloid (C. 1970) technology and that dramatic improvements in the avoidance of leakage can be found in revolutionary silicone adhesive and gel technology.

Method: Review the problems encountered with leakage associated with hydrocolloid technology. Explain the technical and performance differences between hydrocolloid and silicone technology. Present the improvements that may be achieved via illustrative case study

Result: Avoidance of skin excoriation, adhesive skin stripping, exposure to prolonged fluid exposure.

Conclusion: Reliance on hydrocolloid is the current standard in stoma care. Avoiding leakage from stoma appliances remains a challenge. The technical differences between hydrocolloid and silicone result in improved patient outcomes.

P84
Wronly located stoma and obese patient
Miss. M Jesenska1
nemocnice Pardubice

Aim: Obesity impairs patient's psyche in general. This could become even worse if he has to undergo acute surgery resulting in a stoma location which is not appropriate for self-care. However, such acute situations when no preoperative care is possible, occur and stoma care nurse has to cope with it together with the patient.

Method: I would like to present a case study showing the complicated stoma of an obese patient who struggled with stoma care due to his obesity and wrongly located stoma. Patient was not able to care for his stoma and he was dependent on his relatives (mainly his wife). Patient used to be a well-known and respected physician before he retired which also had a huge impact on his psychical condition. The case study also shows recommended ostomy device usage and it is documented by pictures.

Conclusion: It is very important to include family relatives in stoma care and use individual approach to patients. This can improve quality of life of an ostomy patient.

P85
Patient With Crohn's Disease And Caring For Complicated Stoma And Secondary Healing Wound After Hernia
Mrs. R Vitkova1, I Matusikova2
1. University hospital Ostrava 2 - Vítkovická nemocnice a.s.
**P66**

**Back To Life And Work After Stoma Surgery**

Mrs. I Krbova
1. University hospital Motol

**Aim:** Living with a stoma is not easy. It brings a number of changes, but life does not end with the stoma. On the opposite, it is very important to use all modern available ostomy devices, modify lifestyle and continue to live a full life.

**Method:** I will present a case study which shows a young patient after permanent colostomy surgery and his way back to normal life in a short period of time. I will document all his successful way back to working process showing his attitude, mental condition during overcoming different obstacles and also selecting the appropriate ostomy bag and care routine.

**Conclusion:** Though life of ostomy patients is very different after surgery it is possible to increase quality of life of a patient through psychological individual support and with help of a modern ostomy device.

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**P67**

**Recommendations For Prescribing The Ostomy Appliances For Patient With Stomas And Fistulas**

Mr. A Petek 1, Mrs. S Majcen Dvoršak 1, Mrs. R Batas 2, B Hribar 1, Mrs. T Štemberger Kolnik 3

1. Nurses and Midwives Association of Slovenia Professional group of nurses in enterostomal therapy 2. COMMUNITY HEALTH CENTRE LJUBLJANA/NURSES AND MIDWIVES ASSOCIATION OF SLOVENIA Professional group of nurses in enterostomal therapy 3. University of Primorska, Faculty of Health Sciences

**Introduction:** Ostomy patients urgently needs appliances for stoma care. In Slovenia these are available in a frame of obligatory health insurance. World's financial crisis also reflecting in our health care system as restrictive measures of medical services payer and foreseeing restriction in ostomy appliance delivery on their behalf is inevitable. Enterostomal therapists, as specialists, comprehend this as injustice and troubles for ostomy patients. To limit the damage, we formed a document in which we determine basic criteria and guidelines for prescribing the appliances for ostomy patients. Document is a frame that helps nurses at consultancy and physicians at prescribing the appliances.

**Aim and method:** Aim of the project was to design the recommendations and orientations for prescribing appliances for ostomy patients. Literature examination was done to determine the needs of the patients and to find out references and arguments for document we intend to prepare.

**Result:** Extensive document was formed, witch includes recommendations for prescribing ostomy appliances for patients with colostomy, ileostomy, urostomy and enterocutaneous fistulas.

**Conclusion:** The document presents the guidance for physicians at prescribing the stoma appliances and for nurses, frame for consultancy to the patient with stoma and fistulas.

**Keywords:** prescribing, ostomy appliances, guidelines, recommendations, nursing care

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**P69**

**Oncosexology Suport For Male Ostomates**

Mrs. C Rocha Silva 1, S Martins 2, J Jorge Silva 2

1 IPO LISboa 2 - IPO Lisbon
Presenting the ostomates suport in IPO Lisboa Oncosexology outpatient clinic.

**Method:** The Portuguese Institute of Oncology of Lisbon, one of the main centers for Research and Treatment of People with cancer disease in Portugal, has since 2014 an Oncosexology outpatient clinic.

Intensive intervention programs in prevention and treatment of male sexual dysfunction, has been a fundamental tool for holistic monitoring of male ostomy patient. Referrals are made by stomatherapy nurses that identify the need for intensive intervention according to PLISSIT model. The Prevention and Treatment Program of male sexual dysfunction follows at this time 120 patients, 60 of which are ostomates.

The Analysis and Evaluation of Sexual Problems are performed by a Urologist and a Rehabilitation Specialist Nurse. IIEF-5 is given to the ostomate patient before and after intervention.
Result: The importance of multidisciplinary intervention in Oncosexology is reflected in the ostomates sexual function satisfaction and that is demonstrated by the increased in IIEF-5 index validated to Portuguese population.

Conclusion: Live in full with the presence of an ostomy lacks a process of acceptance and adaptation. Working on expectations, strategies and global satisfaction of sexual relationship is an obligation of all health professionals that accompany a person with a stoma.

P90

Stoma After Carcinoma Of The Vagina

Mrs. H Elhanani
1. Hadassah Hebrew University Hospital, Jerusalem, Israel

Aim: Describe a case of Stoma placement after surgery for vaginal carcinoma with partial obstruction of the rectum.

Method: 56 YO female, presented with pain during walking and sitting. Gynecological evaluation and CT exploration revealed a lesion in the left side of the cervix with narrowing of the rectum at the recto-vaginal septum. Treatment program included chemotherapy radiotherapy, and referral to surgery with future brachytherapy. In surgery: subtotal abdominal hysterectomy (above the cervix), bilateral oophorectomy, colostomy, and insertion of tubes for brachytherapy. The Stoma nurse assisted in promoting compliance with both physical and emotional impediments of the entire process. Stoma placement process was planned together with the patient before and after surgery, including making the choice between different Stoma brands. Intervention program included training for self-care of Stoma, and empowerment of patient and family by preservation of normal lifestyle.

Result: Patient selected ColoPlast set and learned quickly how to handle it. Patient is taking care of the Stoma with assistance from her daughter. Provisions were made for continuation of the treatment including specific Stoma brand, through community clinic.

Conclusion: Involvement of patient during the entire Stoma placement process helped achieving good acceptance in spite of the complicated medical situation.

P91

Two Stomas Or Stoma And Fistula? It Can Be Solved.

Mrs. L Illkova
1. University hospital VFN Prague

Aim: Healthy peristomal area is one of the most important elements when we talk about ostomy care and quality of life. Stoma care is more complicated if the patient has got 2 stomas or even fistula close to the stoma.

Method: My presentation will show different case studies covering stoma care for 2 stomas or stoma and fistula. The work will be documented by many pictures showing the progress of the treatment, selected ostomy care and device and the results of such treatments.

Conclusion: The presentation will show that it is possible to cope with such complications with modern treatment and modern ostomy devices and accessories. Finally, it also gives some thoughts how to prevent and eliminate such complications.

P92

Computerized Data Base For Stoma Patients

Ms. R Efargan
1. Rambam Health Care Campus

Aim: There is a need to collect data on care of stoma patients during hospitalization. A digital data base is important for monitoring of stoma care, quality control, and as a tool for preparation of transfer of responsibility to the community clinic. Collective data will be used as a feedback apparatus for the stoma nurse regarding the quality and efficacy of treatment of all personnel involved in the process. Data collected as well as effectiveness the data base will be presented.

Method: Data base includes patient diagnosis, type of surgery, patient marking prior to surgery, type of stoma, follow-up on stoma and skin, and treatment details. Stoma data is from multiple surgical departments in our medical center.

Result: Data from all patients treated during 2015 is presented. Analysis will include type of stomas, skin irritation during hospitalization and towards hospital release, extent of independency of the patients towards release, and the means of care transfer to the community clinic. Comparison between various surgical departments will be presented.

Conclusion: Data base incorporating details on hospital care of stoma patient is an important tool for monitoring treatment of the stoma patient.
P94

The use of Mic-key button as a continent vesicostomy in children: a clinical report from a Swedish pediatric surgical center

Mrs. K Gustafsson1, M Doroszkiewicz1, M Leidzen1, G Holmdahl1
1. The Queen Silvia Childrens Hospital Department of Pediatric Surgery Gothenburg Sweden

Aim: To present clinical experiences of using vesicostomy button in children.

Method: A protocol for follow-up encompassing registration of indications, size of the button, date, need of sedation for button change and complications was used in fifteen children, five girls and ten boys (22 months -17.3 years) who had a vesicostomy button inserted during June 2012 to March 2015.

Result: The children treated with vesicostomy button suffered from bladder dysfunction due to neurogenic bladder or VUR association, posterior urethral valves with polyuria, bladder exstrophy. The average duration of use was 11.9 months (1m-27 m). The button change was performed every three months at the hospital. Sufficiently many of the children managed this procedure with sedation using nitrous oxide or midazolam. Minor complications occurred; local infection (n=3), granulomas (n=5), urinary tract infection (n=3), muddy urine (n=2) and obstruction of the button (n=1). No one had problems of leakage.

Conclusion: The use of vesicostomy button in children can be beneficial for bladder drainage. Minor complications seem to occur. Importantly it is a good alternative to a suprapubic line, when clean intermittent catheterization through urethra is impossible and there is not yet indications for a Mitrofanoff continent urinary diversion.

P96

A New Use For Radiation Therapy Temporary Mark Covers: Adaptation And Incorporation Into Ostomy Clinical Practice For Stoma Site Marking

Mrs. V Livingston1, N McEntee1
1. MSKCC

Purpose: The Ambulatory WOC nurses at a major Cancer Center are responsible for stoma site marking in clinic during the consent visit. Many patients are marked 30 days in advance due to their travel arrangements as they live in other cities. Some are marked for 2 stomas and in complex cases 2-4 marks are needed. It was essential to clinical practice to maintain the accuracy and longevity of these markings so an investigation into the best type of protective covers to preserve the temporary marks was initiated.

Objective: Previous methods included covering the indelible marker with a transparency, or gauze then a transparency. Some patients developed skin reactions, some transparencies came off before the 30 days and the marks needed reinforcement. The WOC nurses found a temporary mark cover used in radiation therapy and trialed it on stoma site markings and found that the patients were able to maintain the marks. There were no complaints of skin issues, and the surgeons reported easily finding their guiding marks. The temporary covers were easy to apply, pre-cut, and patients could shower yet maintain the stoma site marking.

Outcome: The temporary mark covers have now become the standard at this institution.

P97

Outcomes From The Implementation of a Content Validated Peristomal Instrument in Clinical Practice: Urostomy Patients Discharged With Convex Wafers

Mrs. V Livingston1, V Pfeifer1
1. MSKCC

Purpose: Clinical knowledge and the literature suggest that peristomal skin complications usually occur in the early post-operative phase. The purpose of this study was to track and assess post-operative urostomy patients with peristomal skin complications, and the type of skin barrier being used. The WOC Nurse focus was to prevent future skin complications.

Method: An observational study was conducted in which urostomy patients were assessed post-operatively at 2 weeks post discharge, and within the first 3 months for peristomal skin complications. The assessment instrument was used by the WOC Nurses to document the type of lesion, and location under the extended wear skin barrier. The type of skin barrier was also documented (flat, cut to fit, convex, or moldable).

Results: It was noted that 38% post-operative patients presented with a lesion. The majority (76%) within the first 3 months as a result of using flat cut to fit skin barriers. The WOC nurses decided to implement a change and discharge the patients who had flush, retracted and low profile stomas with convex moldable wafers. 8 months after this change it was noted that only 8% presented with these types of lesions so discharge with convexity is now standard practice.
**P99**

**Treatment Of Pyoderma Gangrenosum In Parastomal Area**

Mrs. A Slechtova

1. Nemocnice Horovice

**Aim:** Pyoderma gangrenosum is a rare disease that causes painful sores on the skin. It occurs in people with impaired immune systems, such as inflammatory bowel disease or rheumatoid arthritis. The first symptoms of pyoderma gangrenosum is a small reddish nodule, which within a few days turns into a painful open ulcer.

**Method:** I would like to present a case study of a patient with ulcerative colitis. Pyoderma gangrenosum with this patient occurred in parastomal area after continuing inflammatory activity within the residual rectal stump. The case study is accompanied by pictures monitoring the treatment and showing results.

**Conclusion:** Treatment of such diseases is very lengthy and arduous and psychological support is particularly important when caring for these patients. Only in this way it is possible to achieve good results, which will be reflected in the quality of life of the patient.

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**P100**

**Incidence Of Skin Lesions In Peristoma Skin In 2014**

Mrs. I Morais A. Santos

1. IPOCoimbra

In ostomy, may experience complications of peristoma skin. These may occur immediately or few years after surgery. The appearance of the lesions is related to multiple factors intrinsic or extrinsic to the person with ostomy, that apart from interference with a quality of life, can also carry high economic costs.

- Know the incidence of skin lesion in peristoma in 2014 by type of ostomy;
- Classify cutaneous skin lesions peristoma (cipe beta2).

Retrospective, descriptive study using Excel database, version 7.0, which serves as a matrix to stomatherapy query records of IPOCFG.

A total of 3079 consultations were recorded 90 people with skin lesions. 75 of these individuals (83%) had elimination ostomy, 8 (9%) feeding ostomy and 7 (7%) respiratory ostomies.

With regard to their classification, 30% (n = 27) of the lesions were erythema; 8% (n = 7) were erythema, and maceration; 4% (n = 4) erythema and ulceration; 46% (n = 41) maceration; 4% (n = 4) maceration and ulcers and 8% (n = 7) ulcer.

The results as well as identify skin lesions registered in 2014, assess criteria for recording and classification of same, allowed ET Nurses to obtain more reliable and closer to reality data.

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**P101**

**Validation And Implementation Of The Skin Scale**

Mr. M Castro 1, Mrs. I Morais A. Santos 2, Mrs. C Rocha Silva 3

1. Hospital S. João Porto 2 - IPOCoimbra 3 - IPO LISBOA

**Objective:** Presentation of the project “validation and implementation of the DET scale” for assessing peristoma skin lesions. Peristoma skin lesions are responsible for 1 out of 3 calls. Tool aims to evaluate them and propose the correct intervention adapted to the country reality.

**Method:** Project is divided into four parts. The first started in 2009 with the use of DET within the trial Dialogue where it was been translated, back translated and evaluated by an expert committee. In 2014 was reviewed in order to comply with ICNP standards. Second part was the training of nurses responsible for consultation in 47 centers, representing almost all of the country consultations. Training courses were given by a group of nurses with competencies in stomotherapy and belonging to the focus group. The third part, was the use of the scale in 10 patients per participant center and data collection. The fourth and final part follows the data analysis and evaluation of the reliability and validity of the scale in Portugal.

**Result:** The fourth part is presently ongoing proceeding with data evaluation.

**Conclusion:** Upon the ending of this process this tool will be available to be used in every stomotherapy consultation.

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**P103**

**Innovative Method To Provide Short-term Management Of A Prolapsed Stoma**

Ms. L Coulter

1. Cleveland Clinic

A prolapsed stoma occurs when the bowel protrudes through the stomal opening to an extent greater than anticipated. This can be very distressing and shocking for the patient. Not usually serious, a prolapsed stoma can make pouching difficult; is susceptible to trauma, distressing, and sometimes painful to the patient. Typical management involves support belts, which can take time to obtain, or surgical repair, which is expensive and inherently risky. This innovative management method can be used to maintain a reduced stoma, thus providing improved physical comfort and minimized distress. Most significantly it decreases the chance for stomal
trauma. Additionally this method can be done using products readily available in hospital, outpatient, and home care settings. The method involves fashioning a prolapse cap using a readily available convex pouch or wafer with belt loops and a belt. The cap is padded, then fit snugly, but not tightly over the stoma, to provide support while allowing effluent to flow unimpeded into the pouch. Patients using this system have reported improved comfort and management. In cases when the prolapsed stoma is not easily reduced or effluent is very thick/formed, the prolapse cap is not as successful.

**P105**

**Neck Abscess Management Using Garlic Ointment with Zinc Cream as Primary Dressing (Clinical Experience in remote area) Majene, West Sulawesi, Indonesia**

Mr. I Bauk \(^1\)
1. Ikram Wound Care Center

**Purpose:** This Study is a clinical experience in neck abscess management. And the patients are were visited in my private practice with wound condition infections (pain, Exudate purulent, odor and patients with a weakened state. The difficulty of getting modern wound dressing in my region so as cultivate the initiative garlic ointment and zinc cream for topical therapy (primary dressing) and antibacterial activity for treatmet wound infection (neck abscess management).

**Method:** Case report, was conducted of patients who were diagnosed as having deep (neck abscess) by doktor, the demographic data (age, sex), anatomical position involved in infection were collected. Patients treated with moist technique and TIME Management aplications. Dressing changes every 3 days and aplication garlic ointment as primary dressing and secundery dressing (gauze bandage, Foam and other dressing).

**Result:** Rapid decrease in infections (1 - 2 week) and average wound healing process in 1 - 2 month

**Conclusion:** Garlic ointment (traditional dressing) with zink cream and (secundery dressing) effective for wound (neck abscess) management.

**Key words:** Clinical experience, garlic ointment, neck absces management

**P106**

**Case Study: The Management Of Rectovaginal Fistula**

Miss. S Ahn \(^1\), Y Hong \(^1\)
1. National Cancer Center

**Background:** Rectovaginal Fistula sometimes has a difficulty in treatment. Vaginal fistulas occasionally develop secondary to pelvic irradiation or obstetrical trauma; and as a result the patient is incontinent of feces or urine through the vagina. The uncontrolled passage of feces or urine vaginally results in severe perivaginal skin denudation and discomfort. Aggressive nursing care is essential to prevent these complications.

**Aim:** The aims of this case are intended to share with you this case and nursing management of Rectovaginal Fistula.

**Methods:** Case Reports: We present a female that presented with complaints of stool by vagina. She had ovarian cancer underwent major operation

After operation, The patient had wound complication and continuously stool leakage by vagina.

we tried to insert foley cath. with baby nipple into the vagina and connected drainage system until decreased of vaginal discharge.

**Result:** Although the use of catheterization with baby nipple may not be suitable for all patients with rectovaginal fistulas, but patient said her QOL was quite increased and satisfied.

**Conclusion:** Rectovaginal Fistulas has a difficulty in treatment, especially cancer patient. We have presented a unique treatment, defined in the literature, of the use of catheterization with baby nipple until to repair a rectovaginal fistula.

**P114**

**The Importance Of The Work Of The Multidisciplinary Team, Associated With Nutritional Therapy And Dressing Of Polymeric Membrane With Silver, In The Improvement Of Healing In Skin Lesions: Case Study.**

Ms. E Rodrigues \(^1\), M Branco \(^1\), F Alves \(^1\), E Calheiros \(^1\), S Haiher \(^1\), L Lins \(^1\)
1. Hospital Samaritano

**Objective:** Check the size reduction and healing of lesions in patients using specific dressing and nutritional therapy accompanied by nutrition and nursing team.

**Method:** Four cases of patients with lesion using dressing of polymeric membrane with silver and nutritional therapy. Dressing of polymeric membrane with silver changed every 48 hours and sanitized with antiseptic (Polihexanida 0.2 %, Polidocanol and Alfa-Bisabolol). The evolution was verified with measurement of vertical x horizontal measures and photographic images.

**Results:**
- **#case 1:** 53 years old (lesion in the sacral region - second stage). Reduction of 6,0% vertical and 33% horizontal.
- **#case 2:** 31 years old (ankle dehiscence) Reduction of 40% vertical and 33% horizontal.
- **#case 3:** 61 years old (abdominal dehiscence) Reduction of 8,0% vertical and 13% horizontal.
- **#case 4:** 89 years old (lesion on calcaneus D - third stage). Reduction of 26% vertical and 35% horizontal.

**Conclusion:** The referred cases showed positive results with reduction of wound size and appearance improvement, providing greater life quality for these patients.

The work of the multidisciplinary team can ensure the success in the treatment as well as the prevention of lesions in hospitalized patients.
P118

**Does Irypump Affect Quality Parameters Of Colostomy Irrigation: A Sample Case**

Mr. A Karadağ¹, Dr. Z Göçmen Baykara², A Ören Hın³, E Akar⁴, H Acarlar⁵, S Leventoğlu⁵
1 - Koç University School of Nursing 2 - Gazi University 3 - Gazi University Hospital, Stomatherapy Unit 4 - Gazi University Hospital, Stomatherapy Unit 5 - Gazi University Faculty of Medicine, Department of Surgery, Colorectal Cancer Surgery

In the literature, there are a large number of studies demonstrating that CI is effective in decreasing physiological, psychological and social problems of an individual with stoma. The most important criticism on CI is that it is time-consuming. This led both WOC nurses and medical industry to seek a solution for the problem. IryPump has been produced in accordance with the purpose of performing more practical and efficient CI for patients. This presentation is about the results of a case of IryPump that we have tried on five cases. NI is applying CI by using a classic irrigation set system with 1000ml of tap water every 24 hours. Before using IryPump, CI fluid inflow time was 10-15 minutes, washout time was 30 minutes; therefore, total CI duration was 40-45 minutes. After using IryPump, inflow time decreased to 2 minutes, washout time to 11 minutes and total irrigation duration to 16 minutes. In the interview, it was found that the patient did not experience any discharge of stool, gas during the 24 hours. The patient indicated that he did not feel distention and discomfort after using IryPump as he did after using irrigation set for CI. On the basis of these results, it is recommended to make extensively sampled clinic studies about IryPump.

P120

**Clinical Experience Of Incorporating Phmb, Silver And A Wound Drainage Device In Treating Complicated Wounds In A Limited Resource Environment**

Clinical Experience Of Incorporating Phmb, Silver And A Wound Drainage Device In Treating Complicated Wound

Ms. M Second¹, B Scholtz¹
1. Business

**Aim:** To evaluate the efficacy in combining a PHMB Solution and Gel with a silver dressing in order to lower the bioburden, optimize wound bed preparation and achieve wound healing in the shortest time possible.

**Method:** 6 patients were included in this evaluation. The wounds were cleaned with a PHMB wound cleanser solution, covered with a PHMB wound gel and a nanocrystalline silver dressing. A wound drainage device was used where needed incase of high exudates volumes. The patients were seen a minimum of twice per week based on levels of exudates. Other medical conditions were treated as required.

**Result:** Viable granulation tissue was notice after first dressing changes.

Reduction in:
- Wound sizes
- Odour
- Pain

Healing was achieved in all cases between 6-8 weeks, less than half of normal expected healing time

**Conclusion:** In combining PHMB and silver for wounds with non-viable granulation tissue, combined with high bio burden and sloughy tissue, wounds heal in shorter period of time, patient quality of life is improved, it has a positive impact on the overall health economics.

Cost per patient per dressing R736.11. Device not included
Wound drainage device per use R581.40
Length of wound care +/- 16 dressings

P121

**A Fundamental Role: - Stoma Care Nurse Involvement In Product Development**

Mrs. M Parker¹, D Smith¹
1. Salts Healthcare

**Introduction:** The role of the stoma care nurse (SCN) is fundamental in supporting and managing patients with challenging stomas. As clinicians listening to patient’s experiences and needs, we are in a strong position to effect the development of commercial products that are essential to guarantee a good quality of life for ostomists. The SCN is only too aware of the vital requirements needed in a product, therefore specialist input from the initial concept stage of development is essential.

**Aim & Method:** This presentation will focus upon how the role of the SCN working within a Research and Development team can have significant impact on patient experience by advocating high quality products that are well designed and manufactured to meet specific ostomy needs. Two case studies will demonstrate this by detailing the benefits of soft convexity in managing some of the most challenging stomas.

**Results:** The development of a soft convex product has proved highly successful with valuable input from clinicians

**Conclusion:** Ongoing clinical involvement, at each design phase, contributes to meticulous product evolution to ensure the best outcomes for an improved quality of life for the ostomist and subsequent cost effectiveness for the National Health Service in the UK
P130

Prevalence And Factors Associated With Skin Tears In Elderly Long-stay Institutions.

Ms. G Peres¹, Prof. V Santos², K Strazzieri-Pulido³
1 - School of Nursing, University of São Paulo; São Paulo - Brazil - EEUSP
2 - School of Nursing, University of São Paulo 3 – EEUSP

Aim: Identify and analyze the prevalence of skin tears (ST) and demographic and clinical factors associated with its occurrence in institutionalized elderly.

Method: Epidemiological cross sectional analytical, exploratory study performed in three nursing homes of São Paulo. Data were collected by records consultation, interview with the resident/care giver and physical examination of the elderly. The following tools were used for data collection: socio-demographic and clinical data, Mini Mental State Examination test, Katz index and STAR Classification System. Data were analyzed using Fisher's test, Wilcoxon-Mann-Whitney test and logistic regression (backward stepwise).

Results: The sample of 69 residents was mostly composed by women (51 / 73.91%), Caucasians (50 / 72.46%), mean age 81 (SD = 9.30) years old, problem in mobility (gait) (58 / 84.06%), visual acuity problems (56 / 81.16%), dependence for activities of daily living (52 / 75.36%), cognitive impairment (51/73, 91%), presence of incontinence (45 / 65.22%). Eight subjects had 13 ST, resulting in an overall prevalence of 11.6%. The presence of hematoma (RC: 9,159 / p:0,017) and senile purpura (RC: 6,265 / p: 0,033) remained after logistic regression analysis.

Conclusion: The prevalence of ST was 11.6% and the factors associated are hematoma and senile purpura.

P133

Effects Of Chitosan And Zinc Oxide Ointment On Diabetic Wound Healing: A Case Series

Mrs. W Sri Gitarja¹, K Fajar¹, V Nurmala²
1.Wocare Indonesia 2 - Wocare Majapahit

No doubt that diabetic wound was difficulties to manage following with high of total cost in dressing changes. Based on concept of moist wound healing; wound care progress and dressings aspect in wound care, study created.

Method: This study designed to evaluate the effects of Chitosan and Zinc Oxide ointment on diabetic wound healing and created low cost topical dressing that used on that type of wound. The invensions of products were blended with purrifier water; paraffin oil and vaselline became emulted formula as a white ointment cream. Total of 150 diabetic wounds were studied since 2013. Patient criterias were including (1) Chronic wound more than 2 weeks; (2) patient aged among 35 - 55 years old; (3) Wound larged more than 5 centimetres; and (4) Blood sugar controled. Wound management used TIME concept and wound healing progress evaluation used Betes Jansen scale criterias.

Result: Eighty percent of diabetic wound were healing less than three months and total cost of dressing change reduced.

Conclusion: Benefits of topical dressing contains chitosan and zinc oxide can promote wound healing process with low of total cost in dressing changes and used as new topical dressing.

Key words: moist wound healing; chitosan; topical dressing

P139

Binding Technique In Stoma Granuloma Management In Medan, North Sumatera, Indonesia

Mr. A M.Kep¹
1.Asi Wound Care Centre

Background: Granuloma is a prevalent complication in patients with stoma. Commonly, granuloma is managed using silver nitrate. However, silver nitrate is not available in Medan. Therefore ET nurses in Medan should find an alternative solution to manage granuloma. One of the alternative method is binding technique.

Aim: The describe the effectiveness of binding technique in managing stoma granuloma.

Method: This is a case study of 2 stoma granuloma cases. Binding technique was used in stoma granuloma using catgut to block the blood flow to the granuloma tissue so that it became necrotic and broken. The catgut was used because it is easy to find, has a reasonable price, and easy to use.

Result: The binding technique was proven to block blood flow to granuloma tissue. As the result, the granuloma was displaced within the third and the fifth days consecutively.

Conclusion: This case study proves that binding technique is effective in managing stoma granuloma.

Keywords: stoma granuloma, binding technique, catgut

P144

Transitional nursing practice for colostomy patient based on information technology

Mrs. B Yuan¹
1.Affiliated Hospital of Nantong University

Objective: To investigate the effect of transitional care for colostomy patient based on information technology.

Method: For grade A hospitals colostomy surgery patients, we provide transitional nursing based on information technology. Hospital
patients and their families to watch video about ostomy care, ostomy care learning manuals patients after discharge by telephone, QQ, or we chat, blog, or e-mail and other information technology platform to obtain timely guidance and assistance of specialist nurses.

**Result:** Totally 152 cases of patients with stoma complications, there are 112 patients in the hospital without having to be able to solve the problem.

**Conclusion:** The majority of hospitals do not have the time dedicated telecare equipment, the use of patients or their families'smartphones, to provide patients with the information in the extended care can improve the quality of care, should be widely applied.

**P146**

**Soft Convexity ....is It The Panacea For All Stomas?**

Mrs. C Ryan¹, L Hannan²
1. Dansac Uk 2 - Dansac DK

The aim for this presentation is to review the contraindications for using firm convex products and demonstrate the use of soft convexity for a variety of different stoma conditions and problems.

The use of convex products has enabled secure pouching for difficult stomas for many years. However it has had its limitations as contraindications for use of a convex pouch have included damaged peristomal skin, prolapsed stoma, parastomal hernia and early postoperative use.

The development of ‘soft convex’ pouches has allowed the clinical nurse specialist to use a secure, comfortable convex pouch on a variety of problematic stomas which would not have been possible before.

The author will present a series of clinical case studies offering evidence to show how soft convex pouches can provide a secure fit on the most difficult stomas whilst not compromising the stoma or peri stomal skin. Discussion will include issues such as using a soft convex appliance in scenarios where traditional convex products have been contraindicated.

**References.**

Informa Healthcare. London UK


**P147**

**Three Case Studies Demonstrating The Benefits Of Hydrocolloid Containing Manuka Honey On Peristomal Skin Condition**

Dr. A Moavenian¹ ,Mrs. C Marsden¹
1. Welland Medical

**Aim:** To evaluate the effect of skin friendly Hyperflex hydrocolloid containing Manuka honey, on three patients experiencing allergic reactions to their current products.

**Methods:** Three patients experiencing allergic reactions to their existing products were placed on Welland's Aurum® pouch, with a skin friendly Hyperflex hydrocolloid containing Manuka honey. The first patient, a 69-year-old female presented to the clinic with a week long history of sore, wet, peristomal skin, which was preventing pouch adhesion and leading to leakage issues. The second patient, a 5-year-old boy suffering dermatitis, requiring 6 or 7 pouch changes a day with his existing bag. The third patient, a 71-year-old male presenting itchy, red and bruised skin. Each case was followed up by a stoma care nurse.

**Results:** All three patients' peristomal skin conditions were improved, from between one to eight weeks of using Hyperflex hydrocolloid containing Manuka honey. The pouch wear time was also increased for one of the patients from several hours to a day.

**Conclusions:** The case studies presented show that hydrocolloid containing Manuka honey such as Welland Aurum® can have a positive healing influence on damaged skin and may be advocated for use on irritated skin as well as healthy peristomal skin.

**P148**

**Promoting HISB (health Information Seeking Behaviour) Enhances Self-reliance And Problem Solving For Individuals With A Stoma**

Mrs. W Osborne¹
1. Coloplast

**Aim:** Identification of a credible programme to provide specialist information to individuals with a stoma.

Evaluation of the tool to promote self-reliance

Evaluation of the effectiveness of the online support programme

The Department of Health (UK) advocates individuals should take more responsibility for their own health and have access to information that encourages them to participate in their own care.

However, with contact to specialist support being variable and availability of inconsistent information on the internet; there is the need for trusted, reliable resources to support individuals to self-manage their stoma care.

**Result:** An online support programme has been developed to enhance access to credible information and deliver tailored information through email. A fundamental element of the programme is the self-check tool, which is prompted on a 6-monthly basis to encourage ostomates to proactively check their stoma, directing them to pertinent information to help them manage any issues they are experiencing.

**Conclusion:** his presentation will evaluate the effectiveness of this newly launched program as a tool to meet the goals of HISB.
A Study Of Nurses’ Knowledge And Practices About Pressure Ulcers

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1 - Koç University School of Nursing 2 - Kafkas University 3 - Gazi University 4 - Hacettepe University 5 – University

Aim: Aim of this study is to determine nurses’ knowledge and practices about pressure ulcers (PUs).

Method: The study was conducted with 347 nurses who attended four conventions and courses on wound care, between the years 2013 and 2015. The data were collected using a data collection form including 35 questions. The authors analyzed the data using counts and percentage calculations, Kruskal-Wallis test, and Mann-Whitney U test.

Result: The nurses’ mean score on the questions about PUs was 57.37±14.26 over 100. The calculation of the correct answers by the nurses indicated that the highest mean score was (63.79±11.55) obtained by the stoma and wound care nurses and the lowest mean score was (51.89±16.01) obtained by other nurses. There was no statistically significant difference between the nurses’ mean scores of correct answers by the nursing programs they had completed, the number of PU patients to whom they provided care weekly, the clinics in which they worked, the PU training they had received and considerations of own sufficiency in this field (p<0.05).

Conclusion: The study found that the nurses’ mean scores of correct answers were not at the desired level.

Quality Of Life In Individuals With Intestinal Stoma: A Multicentere Prospective Study

Dr. S Guler Demir¹, Dr. Z Göçmen Baykara², Mr. A Karadağ³, E Toglu², M Altunsoy³, H Acarlar³, Y Akıllı⁴, Dr. S Karadağ⁵
1. Gazi University Faculty of Health Science Nursing Department 2 - Gazi University 3 - Koç University School of Nursing 4 – Istanbul University Cerrahpasa Hospital Istanbul 5 - Istanbul University Çapa Hospital Istanbul 6 - Gazi University Health Practice and Research Center Ankara 7 - Cukurova University Balcali Hospital Adana 8 - Türkye Yuksek Ihtisas Education and Research Hospital

Aim: This study multicenter, prospective and descriptive research was conducted for the purpose to evaluate the quality of life (QOL) in individuals with intestinal stoma.

Method: The study sample constituted total of 222 individuals who had undergone recent colostomy/ileostomy procedures and had been followed up in 7 stomatherapy units in Turkey between January 1, 2014, and January 1, 2015. Data was collected using the Identification Form and a Stoma Quality of Life Scale (Stoma-QOL). In an analysis of the data, descriptive statistics and chi-square, Independent-sample T Test, Paired sample T Test, Mann Whitney U Test and Kruskal-Wallis H Test were used.

Result: In 65% of the individuals the stomas were opened due to cancer and 53% of the stomas was ileostomy and 58.9% transient. The area for stoma was marked before the operation in 59.9% of the individuals. The mean Stoma-QOL scores for the first and sixth months following the operation were 44.3±27.8 and 47.8±24.8, respectively and the difference between these scores was statistically significant (p<0.05). The QOL was significantly higher in individuals who live with their family (1st and 2nd Stoma-QOL) and in individuals who had not taken chemotherapy/radiotherapy (2nd Stoma-QOL) (p<0.05).

Conclusions: The QOL in individuals with stoma increases from the sixth month following the operation. The type of stoma, treatment course and living with family play important roles in increasing the QOL.

Experience Of Implementation Of The Clinical Practice Guidelines: Care And Ostomy Management And Evaluation And Management Of Diabetic Foot Ulcers In A Third Level Hospital Within The Program Best Practice In Spotlight Organization (bpso).

Miss. E Mateo¹, Ms. I Davin¹
1. Vall d’Hebron University Hospital

Aim: To describe the experience of implementation in our hospital of the Clinical Practice Guidelines of the Registered Nurses Association of Ontario (RNAO) in the program Best Practice Spotlight Organization (BPSO) of care and ostomy management and evaluation and management of diabetic foot ulcers.

Method: Ostomy guide was implemented between 2012 and 2014 while the implementation of Diabetic Foot was started in 2015. Several implementation strategies were used: Multimodal diffusion and dissemination activities with classroom training for professionals Disseminating of the guides in clinics and dissemination of the project Ensuring adequacy of resources, procedures and clinical histories in the application of healthcare management Participation of professionals in an organization created to facilitate the implementation of the guide: the implementers and the promoters. The recommendations of the Guidelines is also adapted for use within the context of our hospital.

Result: Improvement of stoma patient education in pre and postoperative stages and increase of patients’ knowledge of how to take care of themselves. The implementation of the Diabetic Foot Guide has provided tools for the opening of a multidisciplinary diabetic foot unit in our hospital.

Conclusion: The practice based on the evidence supports the excellence in care the health.
P157

Pediatric Ostomy Care

Mrs. O Harel
1. Sheba Medical Center

**Aim:** Describe ostomy care and crisis management in a premature baby. A new premature baby is both an exciting and stressful with implications on the entire family. This is augmented by the necessity to handle a stoma. We present the treatment program for this condition.

**Method:** Baby boy, first of twins, born on week 33, 1600 gr. was rushed on day 14 to surgery for perforation of the intestine with inflammation. At the surgery, cecum and the ileocecal valve were resected and ileostomy formed. The baby was transferred to neonatal ICU sedated and on a respirator. During the following month, parents had to learn to cope with the stressful, frustrating situation, on top of all other responsibilities. Stoma nurse of the neonatal department tailored a program including stepwise training, adapted to the condition of the baby. Special emphasis was given to the emotional condition of the parents.

**Result:** Hands-on experience of parents was gradually expanded, in parallel to emotional reinforcement. After 1 month, the baby (2300 gr) was released, with temporary, 2-part neonatal stoma. Parents assumed full technical and emotional responsibility.

**Conclusion:** A structured roadmap for premature-baby stoma can provide good acceptance in handling this delicate task.

P158

The Impact On Cost And Quality Of Life Using A Disposable Nwpt On Patients In A Large Teaching Hospital

Ms. L Pinnuck
1. Monash Health

**Aim:** to enroll 20 patients with wounds that did not exceed 18cm x 18cm over a 2 month period.

**Method:** patients were seen twice weekly in the clinic. exudate had to be less than 20 mls exudate daily. Data was collected regarding co-morbidities and the location of the wound. On completion of treatment patients were asked to fill in a satisfaction survey of this device. At the end we compared the total cost of treatment of electrical versus mechanical NWPT.

**Result:** using Smart Negative atmospheric Pressure (SNaP) was significantly cheaper than other forms of negative pressure. Patients much preferred the portable device compared to electrical powered devices, less noise, ease of use and allowed them to return to work sooner.

P162

Abdominal Catastrophe From The Perspective Of Stoma Care Nurse

Mrs. M Antonova, Z Sura
1. University hospital Brno 2 - FN Brno

**Aim:** Experienced stoma nurse is often forced to cope with the care of very complicated stomas. If the stoma is part of the problem, we call abdominal catastrophe, it requires the cooperation of the entire multidisciplinary team.

**Method:** We would like to demonstrate the importance of such co-operation to cope with serious medical conditions on 2 case studies from our workplace. First case study presents care for a patient with a cancer diagnosis, the second case study concerns patient with IBD disease.

**Conclusion:** We can achieve good results and healing of very complicated patients thanks to perfect team co-operation.

P163

A Clinical Experience On The Use Of Negative Pressure Instillation Therapy Combined With Phmb And Betaine Irrigation Solution In The Treatment Of Complex Wounds

Mrs. L Deletic
1. Wound clinic Milpark

**Aim:** To evaluate the efficacy of combining PHMB and Betaine irrigation solution and negative pressure wound therapy as a treatment plan of complex wounds.

**Aim:** Patients in a level 1 trauma hospital were identified based on level and complexity of injury and outcome of current treatment. Patients included in this case study are seven poly trauma patients, two pressure ulcers, one chronic venous leg ulcer. NPWT were applied and instillation with PHMB and Betaine irrigation solution were initiated. The wounds were instilled every 3 hours for a

**Results:** Wound bed preparation was achieved in a short period of time using this combination treatment. Within 2 - 4 weeks the wounds were ready to be grafted. Improved patient comfort and optimal health economics were also achieved.

**Conclusion:** By combining negative pressure instillation therapy with PHMB and Betaine irrigation solution, complex wounds can be treated effectively to ensure better outcome in a relative short period of time. This will ensure improved outcomes for the patient as well as the health institution and medical aid funding.
**P164**

**Innovative Use Of Flexible Soft Silicone Sealant In Conjunction With Negative Pressure Wound Therapy (npwt) In The Management Of Complex Wounds.**

Mr. R Rock

1. Cleveland Clinic

**Objective**: Demonstrate the use of an innovative flexible soft silicone sealant in conjunction with foam based negative pressure wound therapy.

**Background**: Complex wounds are a result of trauma, prolonged pressure, surgical debridement or post-surgical dehiscence. These wounds often include organs, tissue or bone which are difficult to manage due to drainage, location or surgical hardware. The flexible soft silicone sealant is an inert substance that allows for air tight seal in difficult to manage areas, yet not harmful to the tissue.

**Method**: The author identified innovative strategies using flexible soft silicone sealant in conjunction with optimally managed NPWT in complex wounds. Case studies will include failed abdominal repair after forty five surgeries; left hip disarticulation; spatial frame knee fusion with soft tissue defects.

**Result**: This novel combination of flexible soft silicone sealant and appropriately managed NPWT produced an airtight seal in the wound bed, accelerating the healing process.

**Conclusion**: The utilization of a flexible soft silicone sealant used as an adjunct to NPWT, conventional dressing applications, and appropriate medical management, can provide a mechanism to protect the periwound from potentially caustic drainage thereby maintaining the integrity of the dressing, providing an air tight seal enhancing healing of complex wounds.

**P167**

**An Easy And Safe Way To Treat Irritant Contact Dermatitis Around Ileostomy**

Miss. R Cohen

1. haemek medical center

**Introduction**: Surgery for inflammatory bowel diseases can result in a creation of a stoma. This life-saving solution requires a significant change in every aspect of patient's life, habits, intimate relations, employment, etc. Dealing with such a change demands mental strength. Stoma patients tend to suffer from anxiety, depression and low self-esteem, in addition to many difficulties in daily activities and morbidity.

**Method**: N.L., 79 years old widow + 1 child who underwent ileostomy procedure due to Gastrointestinal Ischemia. Few months postoperatively she developed erosions and Irritant Contact Dermatitis around the stoma due to acidic secretions' and was hospitalized in one of the Internal Medicine departments for further care and treatment.

**Goal**: the aim was to find an easy and efficient way to treat the secretions around the stoma, with the use of Hydrocolloid dressing, in order to treat and later prevent Irritant Contact Dermatitis.

**Conclusion**: Irritant Contact Dermatitis is a common complication in stoma patients, due to acidic secretions from the GI. This can influence the patients life quality. Hydrocolloid dressing can promote wound healing by absorbing the acidic secretions around the stoma, assist in autolytic debridement and reducing the pain. This is an easy, safe and efficient way to treat this complication.

**P172**

**Competences Of The Stoma Nurse In Portugal: Delphi Study**

Mr. I Morais, P Alves, B Araujo

1. Universidade Católica Portuguesa

Consequences of an ostomy are widely recognized, and have led to development of stomatherapy nurses. The study aims to establish an ostomy nurse's level of competency in Portugal, determining the skills and specific functions an ostomy nurse, but also validating these competencies with consensus established by experts - eDelphi technique. We developed a level I descriptive exploratory study, using a mixed methodology, building an ostomy nurse's competences questionnaire with 117 criterias of competence in two rounds. Researchers, professionals and experts in the field have defined and validated - with a conformity level equal to or greater than 75%, seventeen competences. These competences achieved are based on the CanMEDS framework: Differentiated Care - 3 skills at level of specialized care (knowledge, scientific / technical); Communication - 2 skills on relation/effective communication skills (between nurse, patient, family and professionals); Interdisciplinary Collaboration - 3 skills in team work/planning; Management - 2 skills care management, optimizing nursing answers; Training /Research - 2 skills on decision-making, interventions/knowledge; Professionalism/Ethics - 2 skills on professional and ethical exercise; and Health Promotion - 2 skills in Health promotion/intervention strategies. We believe to have contributed significantly to legal framework pertaining to ostomy nurse's skills in Portugal.
**P173**

**Evaluation Of The Cost-benefit Of Fournier’s Gangrene Treatment In Female Patient**

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1. State University of Piauí 2 - State University of Piauí - UESPI 3 - Hospital Geral Promorar 4 - Federal University of Piauí – UFPI

The Fourier's Gangrene is a progressive polybacterial infection that affects the genital and perineal region promoting the tissue necrosis predominantly in men and mortality ranging from 3 to 67%. Case study that aimed to evaluate the topical application of cost-benefit of Fournier's Gangrene in female patient during the period February to April 2015. The patient was accompanied with wound description, photographic record and cost of topical treatment in each dressing. S.L.F. 45 years old, female, got Fournier's Gangrene after shaving the genital region with reused blade. The initial wound area was 367.5 cm². It was used activated carbon with silver, followed by calcium alginate with a satisfactory response. After 16 exchanges performed during 12 weeks showed 24.5 cm² of lesion area. The direct cost for the treatment of healing topic was U$ 168.00 and average of U$ 10.5 for each dressing exchange. It was not included personal and indirect cost. It was observed after third shift significant increase in self-esteem, quality of life and satisfaction of patients regarding the care provided. There was a cost-benefit in the treatment due to reduction of the area of the wound, anxiety and fear of death of the patient.

**P176**

**Skin Lesions Associated With Care: Prevention Strategies**

Mr. G Matiz Vera¹, R González Consuegra¹
1. Universidad Nacional de Colombia

**Aim:** To identify the best strategies for the prevention of skin lesions associated with care.

Method: Systematic review in the years 2005-2015 in Medline, Science Direct, FECYT, Embase, Ovid Nursing, Scielo and care, related to the best nursing successful strategies for the prevention of skin lesions associated with care as ulcers pressure and incontinence associated dermatitis. The quality of evidence was evaluated using the GRADE system in Spanish, English and Portuguese.

**Result:** Diverse strategies have been documented in the scientific literature on the prevention of skin lesions in patients with limited mobility and who are hospitalized. The strategies are based on early identification of risk through the use of scales, use of special surfaces, prevention education in the health team and implementation accompanied by clinical judgment of nurses in the care of people with special protocols risk this type of lesions.

**Conclusions** Is necessary to provide comprehensive care based on scientific evidence conducive to establishing preventive measures to guide effective nursing intervention and individualized guarantor of damage limitation and timely rehabilitation of people with pressure ulcers, contributing to the development and visibility discipline.

**Keywords.** Prevention &Control; Strategies; Wounds and Injuries, Education; Pressure Ulcer (MeSH).

**P182**

**Comprehensive Treatment Of Elderly With Venous Leg Ulcer In Community Nursing Care - Case Report, Renata Batas, RN, ET: Community Health Centre Ljubljana; Nurses And Midwives Association Slovenia**

Mrs. R Batas¹
1. COMMUNITY HEALTH CENTRE LJUBLJANA /NURSES AND MIDWIVES ASSOCIATION OF SLOVENIA

**Introduction:** This paper describes the case of elderly people with venous ulceration, method of treatment and care, which allows for optimal healing.

**Method:** We conducted a qualitative case study, which was based on a review of documentation, interviews, work plan and monitoring of the patient with venous ulcers from November 2010 to March 2012.

**Result:** Elderly patient with venous ulcers had two venous ulcerations on left leg (8 x 4 cm and 3 x 5 cm). Ulcers were healed after one year and four months.

**Discussion and conclusion:** Venous leg ulcers occur in 80 to 85 percent due to chronic venous insufficiency and is most often in the lower leg and foot. The medical - educational work can successfully prevent its occurrence and the occurrence of secondary complications. With using modern methods (TIME concept), the use of modern materials for wound care, the psychophysical comfort the elderly with venous leg ulcers is much improved, healing is faster and with less or no pain. For optimal treatment and care is important that the patient is treated comprehensive, individual and multidisciplinary.

**Keyword:** elderly, venous leg ulcer, ulcer assessment, preparation a bottom of the wound
P184

Accessory For The Support Of A Pump Device Mechanical Movement

Mrs. T Campanili¹, Prof. V Santos²
1. InCor- HCFMUSP 2 – School of Nursing, University of São Paulo

Heart patients waiting for a transplant may need a mechanical device to replace the ventricular heart function, that is, an artificial pump. It is common that these pump devices in question is projected outside the body, connected to the heart by tubes that pass through the skin and therefore exposed to the action of gravity and possible shocks. The technology is designed to mitigate the consequences of using an artificial ventricle, especially in relation to the discomfort and risks associated with heart pump, positioned externally to the patient body. Solved these problems, the patient has greater mobility and freedom postoperatively and therefore can move more easily to your routine. The technology offers a safe and comfortable way to transport paracorporeal ventricle, keeping it trapped in a pocket close to the body by strips of fabric that form a kind of belt. Thus, the risk of shock or damage possibly caused by the weight of both the pump itself as the dressing is reduced. Finally, the pump is housed more appropriately under the clothes of patients requiring mechanical circulatory support as a bridge to heart transplantation, a bridge to recovery or bridge to decision.

P186

Analysis Of The Primary Action Of A Aborvente Dressing In Combination With Compression Therapy.

Mrs. T Campanili¹, L Marques¹, M Gonçalves¹, Mrs. T Campanili¹, A Magalhaes²
1. InCor- HCFMUSP 2 – Curatec

Objective: To evaluate the primary action of a non-woven compress, sterile, made inside of fibers with high capacity for exudate absorption, with surfaces coated with a lipid-colloid technology (TLC) in combination with a system of compression bandages.

Method: This is a case report of a patient with heart failure who was admitted to the Intensive Care Unit, a specialized hospital in cardiopneumology in Sao Paulo, Brazil, for the treatment of ulcer in the right lower limb triggered by lotion use of fatty acids for hydration. Dressings were performed weekly on injury and wound healing assessed through the evolution of tissue type, area and exudate characteristics presented by Pressure Ulcer Scale for Healing (PUSH).

Conclusion: The wound evolved with the area, and local cleaning with the association compress nonwoven and compression bandage, evidencing that the association contributes to the progress of healing. However exudation proved to be permanent is higher when the compression was carried out without damage to the healing process.

P189

Nursing Care En Complicated Enterocutaneous Fistula

Miss. C Hidalgo¹, M Perez², M Del Campo², Miss. C Hidalgo¹, E Pizarro¹
1.12th October Hospital (Madrid/Spain) 2 - 12 October Hospital (Madrid/Spain)

Introduction: Sixty-two-year-old female. After several surgeries she has short bowel, malnutrition and dehiscent abdominal laparotomy with high-output unwieldy enterocutaneous fistula.

Method: Owing to extent of wound, damage of the effluent to the perifistular skin and high output a large pouch that protects the skin and allows quantification fistula output is used. Cleanliness is performed with wound irrigation solution, and to dry the skin is used hydrocolloid technology (TLC) in combination with a system of compression bandages. Being and NOC [2210] Caregiving Endurance Potential.

Result: By using a special pouch for fistula, management of high output improved considerably, reducing the frequency of cures and health expending, thus increasing the comfort of the patient. Where it was possible, the main caregiver (her husband) was taught to perform the cure. This allowed early discharge.

Conclusion: The existence of special pouches for wounds with difficult management (large size, high output ...) reduces costs both in material and nursing time. In this case it allowed, with suitable monitoring, that cares were made by the main caregiver at home.

P191

The Useful Caregiver

Mr. M Garcia¹, Miss. C Hidalgo¹, B Aragones¹, S Bayon¹, J Gimenez¹
1.12th October Hospital (Madrid/Spain)

Aim: To identify overload detected in main caregiver of a dependent patient who requires highly complex cares due to short bowel syndrome and unwieldy abdominal enterocutaneous fistula.

To determine efficiency that involves the main caregiver intervention for the health system.

Method: Measurement of dependency levels for activities of daily living of the patient (Barthel Rate).

Measurement of overload caregiver through different instruments completed by the caregiver: Zarit test, evaluation of selected indicators of Nursing Outcome Classification NOC [2508] Caregiver Well-Being and NOC [2210] Caregiving Endurance Potential. Financial estimate of the cost of cares of caregiver (attention time and materials) and comparison with the same action carried out by
According to measurements the patient has a serious dependency level and caregiver a high level of overload. Caregiver intervention means a high savings in health resources.

**Conclusions:** To be able to count on an involved main caregiver can raise the carrying out of complex care in patients with severe dependence level in their own homes. To guarantee the success of this option is necessary to identify and meet needs of caregivers with adequate support: qualified professional support, access to material resources, etc.

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**P193**

Circular Low Temperature Pattern Indicate Presence Undermining At Pressure Ulcers: Case Report Using Pocket Thermography

Mr. S Yusuf¹, S Kasim¹, S Rassa¹, B Laitung¹. Griya Afiat Makassar

**Background:** In late phase pressure ulcer, usually associated with the presence of undermining. As a result the margin of ulcer becomes larger and difficult to heal. However, identification of early sign of undermining in quantitative measures remain unanswered

**Aim:** The aim of this study to evaluate non contact infrared pocket thermography to identify early signs of undermining in pressure ulcer

**Method:** This was a case report study in Griya Afiat Makassar-Indonesia. Demography data based on the minimum data sheet (MDS), Risk factor for pressure ulcer evaluated with Braden Scale, pressure ulcer status evaluated by using DESIGN-R and non contact infrared pocket thermography was captured with FLIR ONETM which attached to mobile phone (iPhone 5S, Apple Inc)

..**Result** Patient male with lymphatic cancer, Braden scale (10) and DESIGN-R (113U). Skin temperature was 28.5 0C, 36.6 0C and 34.4-35.4 0C at periwound, wound edge and wound bed respectively. We observed presence circular lower skin temperature pattern in the periwound area which become undermined one week from baseline data. **Conclusion:** Non contact infra red pocket thermography imaging has a potential ability to predict development of undermining in pressure ulcer.

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**P194**

Complicated Urostomy Treatment

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The number of patients in the Czech Republic with a bladder carcinoma resulting in ileal conduit urostomy (Bricker) most commonly in elderly polymorbid patients with a problematic peristomal site (obesity, skin folds, colostomy, etc.), has been increasing in recent years. If a patient is treated by an experienced stoma nurse and has the option of using a quality stoma system with flat or convex baseplate, they can live comfortably and enjoy quality of life.

Presentation of 2 Casuistic Entries

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**P195**

Irrigation - Assisted Defecation And Therapeutic Irrigation

Mr. I Otradovcova¹
1.Central Military Hospital Prague Czech Rp

A defecation enema is a lukewarm water injection into the bowel via the stoma performed to facilitate regular defecation. It is a more comfortable method of defecation management in colostomy patients. Irrigation improves their quality of personal, work, social and intimate life. The method is suitable for patients of all ages. There are only a few workplaces in the Czech Republic which use this method. Irrigation education is conditioned by the patient's interest and the presence of an experienced stoma nurse. A stoma nurse first educates the patient theoretically and answers their questions, sending them home with an educational DVD and information brochures. Next, the nurse obtains the irrigation set and sets an appointment with the patient for practical training on the entire procedure.

A therapeutic enema is an enema or bowel lavage via the stoma. Drugs are injected into the upper or lower intestine via the stoma. This procedure is most commonly performed in patients with IBD diseases (Crohn's disease and ulcerative colitis) and certain infectious bowel diseases (*Clostridium colitis*).
**P198**

**Effectiveness Of Wound Care Using Nacl 3% For Reducing Amount Of Exudate And Odor In Healing Of Diabetic Ulcer**

Ms. R Indra¹, Dr. D Dahlia², R Maria¹
1. Universitas Indonesia 2 - Universitas Indonesia

Diabetic ulcer is hard to heal because of prolonged inflammation process leads to chronic and infected wounds. The infection is characterized by increasing exudate production and odor. Previous studies on wound care had proved that NaCl 3% solution able to attract the wound exudate and reduces the odor because it is hypertonic.

**Aim:** This study was aimed to determine the effectiveness of wound care using NaCl 3% solution to decrease amount of exudate and odor of diabetic ulcer.

**Method:** The study applied randomized controlled trial with double blinded technique on 15 subjects blocked randomly allocated to NaCl 0,9% group and NaCl 3% group. Interventions performed for 14 days

**Result:** The result showed there was no significant difference in the amount of exudate between the groups however there was significant difference in the odor score after being analyzed by chi-square and Mann-Whitney test.

**Conclusion:** Wound care using NaCl 3% is no more effective to reduce the amount of exudate than NaCl 0,9% however NaCl 3% is effective to reduce odor score of diabetic ulcer.

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**P203**

**Topical Administration Of Colombian Honeydew Improve Cutaneous Wound Healing In Diabetic Mice**

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1. National University of Colombia 2 - São Paulo University 3 - University of São Paulo 4 - Universidad Nacional de Colombia

Deficient cutaneous wound healing, microvascular disease, and neuropathy are common complications of Diabetes Mellitus (DM), which together lead to the onset of difficult-to-heal chronic wounds, associated with the oxidative stress caused by chronic hyperglycemia.

**Aim:** to evaluate the effects of topical administration of Colombian honeydew in cutaneous wound healing in diabetic mice, compared with New Zealand Manuka honey, international standard.

**Method:** Was an experimental study using swiss type mice, induced to diabetes by administering alloxan IV. After 30 days of diabetes, a dorsal wound was performed and the mice were treated topically with Honeydew and Manuka during 18 days. Were assessed parameters as closure and histology of day 3. They were also characterized the physicochemical properties of honeys.

**Result:** Honeydew had less moisture, antioxidant capacity and higher pH than Manuka honey (14.2% vs 27.73%; 5.87 vs 15.90 mEqT; 5.25 vs 3.98 pH) respectively. The results showed a delay in wound healing in not treated diabetic animals (closing at 18 days vs 14 days for control animals). Diabetic and control animals topically treated closed at 15 day, with increased lesion areas and histological cell infiltrate in the inflammatory phase.

**Conclusion:** Honeydew and Manuka honey improve wound healing with similar performance.

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**P205**

**Hyperbaric Oxygen Therapy As Adjutant Treatment In Ischemic Trauma**

Mrs. D dos Anjos Freschi¹, A Moreira Rodrigues¹, B Costa¹
1. Hospital São Camilo

**Objective:** To report a case of traumatic ischemic lesion by smashing following a car crash, and discuss the context of hyperbaric oxygen therapy under the ischemic trauma treatment protocol. **Method:** It is the report of a case in the qualitative modality, carried out in a general hospital of the City of São Paulo. Patient who suffered a high-impact car accident, with exposed fracture of the humerus, neuronal and vascular lesion, initially treated with damage repair, fracture stabilization with external fixer, vascular lesion correction, preparation of the wound bed for grafting with hyperbaric oxygen therapy, appropriate antibiotic therapy, skin grafting and, then, definitive osteosynthesis with intramedullary stem. He was discharged from the hospital for outpatient clinic follow-up by the orthopedic and infections teams so as to continue with the motor rehabilitating process following a three-month hospital stay. **Final Remarks:** Hyperbaric oxygen therapy, when carried out early on and associated with an appropriate high-impact trauma treatment protocol, has shown to be very efficient in dealing with such cases. Due to the series of interventions, the patient had his member preserved, achieving good functional and anatomic results. Upon release, he presented preservation of the member, movements and tactile sensibility.
P213

When in Africa the ability to improvise and recycle garbage into equipment can be life changing.

Mrs. S Thiart¹
1. Private practise

A lack of resources in home nursing can become a huge obstacle in the successful treatment of a patient. This limited resources is not only present in rural areas. Innovation and improvisation can result in simple yet excellent solutions.

Presenting a cut-out cardboard box as a bed bow, that not only relieve the pressure from heavy bedding successfully but also act as heat isolation. As a bonus the box is being recycled into a piece of equipment that is essential for pressure relief. There is no cost involved and anybody can do it. The box should be clean and sturdy. It should be wide and deep enough to accommodate a standard pillow and high enough to accommodate the patient's feet when placed on its side. A window is cut out at the opposite side allowing easy access to observe the patients feet.

P214

The Reason For Delayed Wound Healing Can Be Skin Deep.

Mrs. S Thiart¹
1. Private practise

Hypothesis: To complete patient assessment and obtain a history, using the Wound Bed Paradigm of Prof Gary Sibbald, to identify factors that can influence wound healing, is not always as simple and straightforward as it seems.

Case Study: Mr. Y is a 28 year old male patient who suffered a traumatic partial foot amputation. He is healthy with no apparent comorbidities which may result in delayed wound healing. With a well prepped wound bed, he had a partial thickness skin graft with an Integra interface. The graft healed well but he developed an ulcer on the anteromedial side of his residual limb. There was no explanation for the cause of the ulcer. The ulcer healed where after a new one developed on a different location. This pattern of recurring ulcers continued. Maintaining the moisture balance was a challenge.

The patient was referred for X-rays when he reported severe pain over his medial malleoli once he started wearing his prosthetic foot. The X-rays revealed multiple staples beneath the graft site. Because of wound and mobility complications he developed contractures.

Mr. Y underwent revision surgery resulting in a through ankle amputation. The majority of the staples were removed.

P216

A Clinical Study : The Management Of Necrotizing Fasciitis By Wound Infection.

Mrs. Y Hong¹
1. National Cancer Center

Background: Necrotizing fasciitis (NF) is a rare, rapidly progressive its mortality rate is nearly 30% and potentially fatal soft-tissue infection characterized by widespread severe infection of the deep soft tissue, including fascia.

Aim: The aim of this case study is intended to share with you this case and nursing management of Necrotizing fasciitis

Method: Patient had rectal cancer underwent laparoscopic low anterior resection. After post-op 5 days, total colectomy with ileal-pouch rectal anastomosis, ileostomy d/t leakage, panperitonitis, However he had ileostomy revision and wound debridement d/t Necrotizing fasciitis.

This case take up case of wound management including debridement, drainage, modified Negative pressure wound therapy. Result: Patient was placed on NPWT until the wound was ready for split-thickness skin grafting. After the NPWT skin graft was successfully used and he was able to go home.

Conclusion: NF has a high morbidity and mortality and requires a considerably long-term treatment. For disease requiring a long-term care such this case, wound nurses' role is important because they are considerably accessible to patients and they are able to manage overall treatment including wound management

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Adhesive Remover Spray Silicone Used To Ostomy Patients

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Withdrawal from ostomy bag or card with no remover couldn’t to remove of epidermal cells, leaving the skin more susceptible to the action of the effluent. Also, can cause traumatic dermatitis, making it difficult to grip the new equipment. Objective: to evaluate the use of an adhesive remover spray composed of 100% silicone, in ostomy patients registered in service centers in city of Porto Alegre / RS Brazil. Methods: after using the remover spray, 15 patients answered a questionnaire that evaluated the use of the product. Only one patient (6.66%) already using some kind of adhesive remover results: all patients (100%) reported:. It was easier to remove the equipment with the product; it was easy to use remover spray; to continue using an adhesive remover spray and that all ostomy patients should receive the product. Conclusion: using the adhesive remover spray, removing the equipment becomes safer and more comfortable for the patient by allowing fast and efficient removal of device without traumatizing the peristomal skin
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Snowy Wound

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Wound management has become a global health problem and the financial burden in addressing the problem has increased tremendously. In a community perspective due to lack of resources, ignorant and financial allocation, most of the treatment are using the traditional method. Even sometimes using traditional method improved healing there are lack of research and understanding. My case study indicates that the patient did not comply with the treatment and started using Talcum powder on his wound. The wound became necrotic with uncontrolled pain with mildly serous discharge. He revealed that he applied “potatoes flour” that they named as a powder dressing. The foot was very dirty. His neighbor advised him to apply the powder which he believes can cure the wound. The use of modern dressing of implemented. Patient was taught about the needs of hygiene care for his foot, signs and symptoms of complications and nutrition. The necrotic tissue removed, exudates reducing, sloughy tissue and biofilm removed, and wound bed transform into healthy granulation tissue.

At last visit weeks 3 before discharged, patient wound close completely.

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Key Findings from the 2015 International Consensus Congress on the Use of Convexity

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Problem: There is a shortage of rigorous evidence about the use of convexity and existing reports are primarily reviews and case studies.

Purpose: To establish consensus from a group of international experts about use of convexity.

Method: Using structured processes as outlined by Murphy et al2, expert stoma care nurses from nine countries participated in a consensus development congress led by an expert facilitator. Panelists voted sequentially on structured statements.

Result: The panelists reached agreement on 26 definitive convexity statements.

Conclusion: Using a structured method of consensus development, global stoma care nurses provided clarity on use of convexity.

References:

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Cost-effectiveness Of Silver Alginate For Infected Hard-to-heal Wounds Treatment In Brazil

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Objective: Silver is used for years in reduction of bacterial load in wounds. We aimed at accessing cost-effectiveness of silver alginate versus calcium alginate for treatment of infected or critically colonized hard-to-heal wounds in Brazil.

Method: A decision tree was developed for modeling cost-effectiveness between these two dressings for: diabetic foot ulcers, leg venous ulcers and pressure ulcers. The analysis considered clinical data obtained from a systematic review of literature and total treatment costs estimated throughout secondary databases. All data were validated by Expert Panel.

Result: The systematic review was graded as “B”, according to the Oxford’s scale. Outcomes were clinical signs of infection and bacteriological status from lesions. Incremental cost-effectiveness ratios (ICER) have evidenced cost-savings of approximately 40 thousand Brazilian Reais per patient, independent on the subgroup. Such results are driven from treatment costs lower in 35 to 40% for the silver group, compared to the control, and better incremental effectiveness results (bacteriological status and infection signs avoided of 22% and 30% respectively).

Conclusion: Patients treated with silver alginate develop lower trends on worsening wounds infectious status and then lower treatment costs are achieved, offering a feasible alternative for infected or critically colonized hard-to-heal wounds treatment.