

# The role of a therapeutic team and The Pol–Ilko Association in readaptation of patients with a stoma to the life in a family and society in the 21st century

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## Abstract

Patients who crossed operation where exteriorization stoma was integral her part the aside from of cause, location and far-gone of illness which hereinto brought require special care. In moment of entry we to European Union should advert on introduction by us the surgeons of new operating techniques not only, but to attach importance to quality of sick's life after operations also, particularly these which violate beauty of our body. They are of the patients' groups the nation from stoma, particularly if cause the exteriorization stoma the state the neoplastic disease of alimentary canal or arrangement urinary. The stay in Clinic whether the surgical squad, perspective of operation which is final effect producing artificial accompanying urinary content tract intestinal or fecal it joins with high-level of phobia. The Information Bureau for Stoma in year 1993 at Medical University was created and on the basis of this the information bureau the therapeutic complex worked out own model of these patients' care over group. The model of care over sick from stomy hugs three periods: preoperative, early and late surgical period (ambulant).

On the basis of The Information Bureau from Stoma in 1994 year The Department was created of Podlasie the Society of Care over Patients from Stoma in Białystok – association of working on thing sick's good. Organization this assembles from stomy the men, their family and guardians, workers of medical service and different men of good will. Meetings are forms of working, which performance of bothering patient's problems connected with nurturing and

supply stomy is aim, and also psychical and help support in readaptation to life in family, company and society. The volunteers' training is to help different form of working this sick's group. Volunteer in this case – then living from stomy over year happily, adopted to life in every respect, person which exemplifies for sick prepared to operation positive (exteriorization stoma) or beginning one's "path stoma".

Both the analysis and opinion of work of therapeutic complex, as and the workings The Association be made by only patients, their family and guardians, and also the workers of medical service. The elaborate model of care over sick from stoma on the basis of Information Bureau is accepted universally and resoluteness improves quality of life of this patients' group. Patient in XXI age from stomia on Podlasie it can appropriately living in family, work professionally, grow sport and hobby not only thanks to work therapeutic complex, but also and men who earlier found oneself in similar situation, as he alone.

**Key words:** therapeutic team, patients with a stoma.

A stoma, in case of some abdominal disorders is an integral part of a surgical procedure and is established permanently, or reduces the tension beneath the anastomosis or the anastomoses of the gastrointestinal tract or urinary tract. In children, it is usually one of the stages in the treatment of congenital defects or the preparation to the final corrective surgery. After operation, something new, which works permanently and extracts urine, feces or gastric contents appears in the abdomen of a patient. It disturbs a patient's image, changes his/her figure and influences his psychical state. Patients, who underwent an operation, in which a stoma was an integral part of the procedure regardless of the disorder, its localization and severity, require a special care [1,2]. This situation forces The Health Care Institutions at various levels to create and realize the standards of therapeutic and nursing procedures. After Poland joining The European

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Union, surgeons should not only pay attention to the introduction of new operational techniques, but also to the quality of life of patients after operations, especially these distorting the beauty of their bodies and influencing significantly their mental state. Patients with a stoma belong to this group, especially when the disorder causing this surgical procedure is cancer of the gastrointestinal or urinary tract [3,4]. At present, when media propagate the beauty of the human body and present the methods of caring and keeping physical and mental conditions fit, a stoma present on the abdomen is seen by people as the cause of unfavorable appearance. A stoma is treated as a personal tragedy or a sentence regardless of the cause, which forced the operational team to perform this type of the solution. A patient's stay in hospital (the department or surgical ward) and the prospect of the operation, which will result in the creation of a stoma – an artificial way of urine, feces and gastric contents excretion is closely connected with a high level of anxiety. It persists not only in the perioperational, but also postoperational period. The unknown, uncertainty and lack of safety cause the fear in a patient. Taking into consideration all these factors mentioned above, there is a demand for therapeutical teams, which would take care about a patient at each stage of the treatment, his satisfactory mental and physical state, would restore his psychical balance and help readapt to the life in a family and society and his probable return to a professional career. In 1993, The Outpatient Clinic for Patients with a Stoma was established in The Medical Academy of Białystok and basing on this, a therapeutical team worked out its own model ensuring the continuity of the care about a patient [3,5-7]. It includes three periods: preoperational, early and late postoperational (ambulatory).

The preoperational period consists of:

- talking with a patient, presenting the type of operation, justifying the choice of this method basing on the subjective, objective and accessory examinations,
- getting to know each other [8,9],
- evaluating a patient's psychical state,
- estimating a patient's family, professional and social situation,
- evaluating patient's present knowledge on the diseases and the type of operation, determining the site of a stoma regarding a patient's different positions and his preferences [10,11].

The postoperational period consists of:

- protecting of a stoma in an operational theatre [12],
- customized stoma appliances chosen individually,
- teaching a self-care of a stoma connected with up-dated information on a patient's state,
- contacting a patient's family or his caretaker,
- psychological support [1].

Basing on the observation of our patients, it has been proved that a therapeutical team's care is essential in the perioperational period. A patient has the feeling of safety, not being left alone with his disease and such a significant change in his appearance. Teaching the self-care of a stoma in the early postoperational period enables to get used slowly to a new situation and believe that it is possible to return to the life in a family, society and to a normal professional career. The appropriate care of a stoma and selection of appliances are very important in this period. Patients are oversensitive about unpleasant smell,

so all measures must be undertaken to protect a stoma with stoma appliances and to guarantee the air, fluid tightness, and in this way creating the feeling of safety. In this early period, any event like the leak of feces, urine or gastric contents makes a patient feel nervous, frustrated or even depressed and he/she secludes himself/herself from the surroundings and the hospital environment. It would be ideal to hospitalize patients with a stoma separately, but when patients with a stoma are placed in a hospital room with other patients, the care of a stoma or the exchange of the appliances should be done in a separate room. Our observations indicate that these patients admit unwillingly to having a stoma to the outsiders and 67% of them conceal this fact, even when visiting the doctors of other specialties. Similarly, when they are waiting for an appointment and are asked by other patients what The Outpatient Clinic for Patients with a Stoma deals with, they explain that it is The Outpatient Clinic of Proctology.

In the late postoperational period (ambulatory), patients are divided into two completely different groups: patients, who were taken care of in the perioperational period and are still cared about in our Outpatient Clinic and patients who were operated on in other hospitals and were referred to our Outpatient Clinic where they are informed and taught about a stoma for the first time. In the late postoperational period, our therapeutical – nursing activities include:

- consolidating the knowledge and skills connected with the care of a stoma
- solving other health problems – enuresis, proctorrhoea, pain, supplementing hydroelectrolyte deficits in gastrointestinal disorders,
- dietary recommendations ensuring a normal stoma functioning,
- contacts with a patient adapted to the life with a stoma,
- consolidating a patient's psychological attitude concerning a normal life with a stoma,
- advising the family and caretakers about solving a patient's life problems,
- contacting a patient with a volunteer or other patient with a stoma who adapted to the life with a stoma and feels happy,
- colorectal irrigation,
- making the literature concerning a stoma care available to a patient, informing a patient about the activity of The Polish Care Society of Patients with a Stoma (Pol-Ilko).

Since in this period many local complications of a stoma are observed, patients are given medical and nursing advice about the provision of the appliances and qualification for a probable operational procedure [12-14].

Apart from therapeutical teams of The Outpatient Clinic for Patients with a Stoma and an organized professional care system, support groups and societies helping patients play an important role in a patient's readaptation to the life with a stoma. This refers also to all patients with chronic diseases. In 1994, in Białystok The Podlaski Branch of the Polish Care Society of Patients with a Stoma was founded on the basis of The Outpatient Clinic for Patients with a Stoma of The Teaching Hospital of The Medical University of Białystok. This organization works for a patient's good and embraces patients with stoma, their families and caretakers, health care workers

and other people of goodwill. Meetings are one of its activities, which aim at presenting the problems affecting patients connected with the stoma care and service as well as mental support and help in the readaptation to the life in a family, community and society. Training volunteers to help patients belongs to other forms of its activities. In this case, a volunteer is a person who has lived happily with a stoma for more than a year, has been adapted to the life in every aspect and who is a positive figure for a patient prepared for a procedure of creating a stoma or beginning this 'stoma path' [15]. A therapeutic team's work and the activity of The Society are analyzed and evaluated by patients, their families and caretakers as well as by health care workers. The model of the care about patients with a stoma worked out on the basis of The Outpatient Clinic is widely accepted, ensures the continuous care and improves significantly the life quality of patients with a stoma. In the 21st century, in the Podlasie Region, a patient with a stoma can live with dignity in the family, work, do sports and have a hobby thanks to not only a therapeutic team's work, but also other people, who experienced the same situation earlier and are ready to help others.

'Going through the life, leave the trace,  
which will be a signpost to happiness for  
other people'

Norbert Nieslony

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