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Colostomy irrigation: impact on quality of life

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Irrigación de colostomia: impacto en la calidad de vida

RESUMO

Objetivo: Relatar o impacto observado na qualidade de vida de usuários em meia idade com estomia em uso de irrigação e sistema oclisor de colostomia atendidos em um Centro de Referência para atendimento a pessoas com estomias. Métodos: Estudo descritivo, do tipo relato de experiência, realizado por profissionais atuantes em um Centro de Referência para atendimento a pessoas com estomias em uma cidade do sul do Brasil, em janeiro de 2021. Resultados: Analisando a influência na qualidade de vida, a irrigação proporciona uma melhora substancial aos indivíduos. Verifica-se a satisfação com o método empregado, trazendo melhora na autoestima, confiança, melhora no humor, no relacionamento com parceiro, maior liberdade para uso de vestuário e alimentação e retorno das atividades sociais. Conclusão: O uso da irrigação e o oclisor proporciona uma relação mais harmônica do usuário com sua estomia, tornando possível o controle fecal, com melhora da autoestima e da segurança necessária para realizar atividades que haviam sofrido impacto desde o surgimento da nova condição.

DESCRIPTORIOS: Estomia; Qualidade de vida; Cuidados de Enfermagem

ABSTRACT

Objective: Observed on the quality of life of middle-aged users with a colostomy in use of irrigation and colostomy occlusion system served in a Reference Center for care of people with stomas. Methods: a descriptive study, of experience report type, carried out by professionals working in a Reference Center for people with stomas in a city in the south of Brazil, in January 2021. Results: by analyzing the influence on the quality of life, the use of irrigation provides a substantial improvement to individuals. One can verify the satisfaction with the method employed, bringing improvements in self-esteem, confidence, and improvement in mood, in the relationship with their partner, greater freedom to use clothing and food and return to social activities. Conclusion: the use of resources such as irrigation and occlusion provides a more harmonious relationship between the user and his or her stomach, since fecal control becomes possible, leading to improved self-esteem and the safety needed to perform activities that have suffered an impact since the emergence of the new condition.

DESCRIPTORS: Ostomy; Quality of Life; Nursing Care.

RESUMEN

Objective: Reportar el impacto observado en la calidad de vida de usuarios de mediana edad con ostomía mediante irrigación y sistema de oclusión de colostomía atendidos en un Centro de Referencia para asistir a personas con ostomía. Métodos: Estudio descriptivo, tipo informe de experiencia, realizado por profesionales que laboran en un Centro de Referencia para atender a personas con ostomía en una ciudad del sur de Brasil, en enero de 2021. Resultados: Al analizar la influencia en la calidad de vida, el uso del riego proporciona una mejora sustancial a las personas. Se puede comprobar la satisfacción con el método empleado, aportando mejora en la autoestima, confianza, mejora en el estado de ánimo, en la relación con la pareja, mayor libertad para el uso de la ropa y la alimentación y retorno a las actividades sociales. Conclusión: El uso de recursos como la irrigación y el oclisor proporciona una relación más armoniosa entre el usuario y su ostomía, ya que es posible el control fecal, lo que conduce a una mejora de la autoestima y la seguridad necesaria para realizar las actividades que se ven impactadas desde la aparición de la nueva condición.

DESCRIPTORIOS: Ostomía; Calidad de vida; Atención de enfermería.

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INTRODUCTION

The opening of an intestinal stoma causes an important emotional impact for people with ostomies, given that there is a loss of control over the elimination of feces and gases, causing them insecurity due to the change in the body scheme, self-esteem, in addition to other associated disorders. In addition to the loss of fecal continence, the individual is faced with the need to use a collecting device. This dependence on use, fear of smell, changes in some lifestyle habits, can lead to feelings of worry and anguish in these people, turning this moment into a painful process. 1,2,3,4

In this sense, many individuals, after surgery, go through a process of non-acceptance of their body image due to the difficulty in living with the collection bag, the insecurity caused by the fear of the sound and that the collection bag leaks or detaches itself from the body. 4 This factor constitutes a strong critical knot that must be carefully observed by health professionals who care for people with a stoma, given that the way they see their own body can generate psychological satisfaction or suffering. Thus, it is very important to take measures that

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encourage the quality of life of these individuals, aiming that they can live happily and in harmony with their bodies in their context of life. 2,5

Within this scenario, it is seen, through other studies, the use of irrigation and the colostomy occluder system as important resources in the rehabilitation of people with an ostomy. It is noteworthy that the main reasons that lead them to choose these practices are related to the inadequacy to fecal incontinence and the indications and advantages of the irrigation technique. Currently, these two methods are the most used and are well accepted by users, generating the most effective bowel control, reflecting on their quality of life. 2,3,6

Colostomy irrigation consists of a mechanical method of regulating the activity of the intestine, performed by washing the intestine through the stoma every 24, 48 or 72 hours. In this procedure, a planned fluid volume, commonly water, at body temperature, is sent to the large intestine. It stimulates mass peristalsis and, thus, enables control of the elimination of feces through the colostomy, which can also be defined as programmed evacuation. Furthermore, there is a reduction in the production of

gases due to the reduction of the colonic bacterial flora. 6,7,8

The colostomy occluder system refers to a type of flexible and disposable plug used with the aim of occluding the distal end of the ostomy. Its use makes it possible to control intestinal incontinence and gas, providing a better adaptation of the individual with his stoma. In addition to the ease of insertion by the ostomy patient, there are no complications in colostomy or peristomal skin. 2

However, in addition to motivation and interest, there are some criteria that must be met in order to start training in irrigation and use of the occluding system: having a terminal colostomy in a descending colon or sigmoid of only one mouth and, preferably, definitive, without intestinal or associated diseases. 7,9

Due to the achievement of intestinal control and the suspension of the use of a collection bag, individuals feel more satisfied and perceive a great improvement in emotional and social adjustment due to the safety and reduction of anxiety, positively impacting their quality of life. 7 In this context, through this study, the objective was to report the impact observed on the quality of life of middle-aged users with ostomy using irrigation and colostomy occlusion system attended at a Reference Center for care for people with ostomy.

METHODS

This is a descriptive study, of the experience report type, carried out by professionals working in a Reference Center for the care of people with ostomies in a city in southern Brazil, in January 2021. The choice for the experience report method is supported by the contributions arising from the experience for teaching, aiming at solving or minimizing the problems evidenced in practice, 8 aiming at quality in the service provided to society.

The experience took place among students, professors, graduate students and service professionals during the practical curricular activities of a Federal University in January 2021. In addition, this report

includes the follow-up of cases of middle-aged adult users who opted for the use of colostomy irrigation, and carried out a nursing consultation in the service during the analyzed period. The option for this age group was because they are the youngest users registered in the service who use this resource and are in a greater phase of socialization than the older ones. The study setting is a Reference Center for the care of people with ostomies in the municipal health network, which works from Monday to Friday, offering appointments with prior appointments or by spontaneous demand.

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To support the results and the analysis of the experience, theoretical references that guide the theme were used.

RESULTS

This study was carried out in January 2021, and reports the experience of professional nurses, professors, students and nursing graduate students regarding the care of users with ostomy who perform intestinal irrigation, assisted in a Reference Center for people with ostomies located in a municipality in southern Brazil. The service where the study was carried out is located in a six-story building dedicated to health care for the population of this municipality, using resources exclusively from the Unified Health System (SUS - Sistema Único

de Saúde). The appointments take place from Monday to Friday in the morning for users with intestinal and/or urinary ostomies or who have skin lesions. Users residing in the municipality are assisted in this center, according to the coverage area previously determined by the Municipal Health Department (SMS - Secretaria Municipal de Saúde).

The service's flowchart begins with the registration of the ostomized user at the state level through a computerized system in which people are registered to receive collecting equipment and adjuvants for protecting the peristomal skin. This registration is carried out in person by the user or by a family member through the delivery of the documentation required by the system, which includes the medical report, identification documents, both of the user and the person responsible, proof of residence and the SUS National Card.

After completing the registration, the user has the right to remove all the material necessary for his condition, such as collecting equipment and skin protectors, in addition to nursing consultations with the professional stomatherapist nurse. During the nursing consultation, the stoma is evaluated and the best equipment and therapeutic possibilities are indicated individually.

It was identified that, of the 625 users with ostomies registered in the service, 35 perform colostomy irrigation to control their excretion and, of these, 14 users are aged between 40 and 60 years. Of the latter, during January 2021, two patients who underwent this procedure attended the nursing consultation, with the purpose of receiving guidance and answering questions.

Surprise and joy are observed when users are told about the possibility of no longer using the collection bag, considering that most of them are sad and discouraged by the definitive situation of their stoma. When there is an indication to perform intestinal irrigation, the user is instructed on how to perform the procedure and they are presented with the necessary equipment, so that they can become familiarized with the material used. After medical authorization

to use the resource, the user must attend three initial consultations, according to the protocol used by the service.

In the first nursing consultation, an assessment of the user's motor and cognitive conditions for irrigation is carried out, as well as a physical examination in order to verify the conditions of the stoma. The user is instructed not to be fasting for the procedure, avoiding the occurrence of a vasovagal reflex, with a feeling of fainting, malaise, nausea or vomiting. In the second consultation, the user must attend accompanied by an adult, who will help him in this process, and the nurse will carry out the irrigation, explaining step by step to them. Finally, in the third and last consultation, the user will carry out the procedure under the supervision of the nurse and, after that, the user will continue to carry out irrigation at their home, if necessary, more consultations can be carried out so that the user is confident in performing the procedure alone.

Thereafter, the monitoring must be carried out on a monthly basis for the evaluation and clarification of doubts. In the first month, irrigation should be carried out daily, always at the same time, recording all problems and difficulties encountered. After the first 30 days, the nurse assesses whether the irrigation was uneventful and the user is instructed to carry out irrigation every 48 hours. If there is any report of leakage of feces between irrigations or difficulty in entering water, the technique must be reviewed together with the user. After another 30 days, the user is instructed to carry out irrigation every 72 hours if there is no loss of feces in the intervals between irrigations. For some individuals, the spacing of 72 hours may not be the best choice, being necessary to keep the procedure performed every 48 hours, or even daily, depending on the eating habits that each person has.

In nursing consultations carried out by the service professionals, it is observed that many users are unaware of this therapeutic resource. For some, the possibility of reestablishing control over fecal elimination brings hope of being able to return to socialization in a safer way, since the procedure

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excludes the use of the collection bag and reduces fear of the perception of the ostomy condition by other people.

In this sense, observing the users served by the service who carry out irrigation, it was found that some do it daily and others every three days, given that the result of this method has a strong connection with eating habits, in which a diet highly rich in fibers favors the increase in intestinal transit, thus reducing the interval between one irrigation and another. However, regardless of the frequency required, satisfaction with the method used can be verified, improving self-esteem, confidence, mood, relationship with a partner and greater freedom to use clothing and choose food.

In addition, there was a change in their attitude in their daily lives, bringing an increase in security for the performance of social activities, such as trips to the supermarket, which represent something so commonplace for the population in general, but were appointments that generate stress for the ostomy due to the fear of the smell and gases eliminated in the collection bag.

Another impact factor observed refers

to the self-care of users with the stoma, given that, with the use of irrigation, it is facilitated by the interruption of bag changes or frequent cleaning during the day. In this context, it was found that users feel more comfortable with the irrigation routine, even when they perform it daily, as it represents a small fraction of the time and concern expended when compared to the use of a collection bag.

When analyzing the influence on quality of life, the use of irrigation provides a substantial improvement to individuals. It was observed that service users have greater control over colostomy eliminations, enabling them to return to socialization activities, and an improvement in their self-esteem was noted through the freedom to choose clothes and food.

DISCUSSION

Intestinal irrigation through colostomy is a procedure that must be carefully evaluated by the nurse during the nursing consultation, given that it can only be performed in users who have received medical authorization for this and who present the criteria for indication. In addition, the user must be able to carry out self-care or family support network, in addition to opting for the procedure, which also represents a therapeutic option. As a contraindication, it is mentioned to have kidney disease or heart failure, since irrigation can cause changes in the individual's water balance. 9

However, another study shows the lack of knowledge and unpreparedness of health professionals about the irrigation method, and these factors are responsible for the low indication of the procedure to users. Within this scenario, to reverse this limitation of use, it is important that this method be disseminated more widely by stomal therapist nurses and professionals able to perform the procedure, advising and encouraging users to discuss this possibility with their physicians, aiming at improving their quality of life. 10

Therefore, the important role that health professionals play in the care of these users is highlighted through the practice

of measures that encourage their quality of life, given that living with the collection bag causes insecurity due to the fear of sounds or from possible leaks. In this sense, irrigation and the colostomy occluder system are important resources in the rehabilitation of ostomy patients, being very well accepted by most users who choose to practice it and who have not adapted to fecal incontinence and the use of collectors. 2,3,4,5,6

The use of these two methods ensure more effective bowel control, making individuals feel more satisfied and resume their social activities safely and with less anxiety, which has a positive impact on their quality of life. 7

As a limitation of the study, the current scarce bibliographic reference on the colostomy irrigation method stands out, making it difficult to broaden the discussion with the research results. However, it is belie-

ved that this study can help health professionals in disseminating this possibility to users with colostomy, as well as instigating further research with other types of methodology on this subject.

CONCLUSION

This experience report, experienced at the Reference Center for care for people with ostomy, demonstrated the importance and relevance of nursing in humanized and individualized user care, as well as in service management. The experience showed that the use of resources such as irrigation and the occluding system provides a more harmonious relationship between the user and his ostomy, as fecal control becomes possible, leading to improved self-esteem and the necessary safety to perform activities that they had suffered impact since the

emergence of the new condition.

It is necessary that the health professional who works directly with colostomy users know the resource and its indications in order to offer this option as a way to assist in the process of acceptance and adjustment with the condition, in view of the benefits in the quality of life and well-being of users with ostomy.

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