Colostomy Impact Score

Differences in perception between healthcare personnel and patients

By

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Disclosure

- I have no disclosures

Background

- Surgery for colorectal cancer results in a planned permanent stoma in 10–30% of the patients[1-2].

- The overall complication rate after stoma surgery varies from 21 to 70%[3].

1. American Cancer Society. Cancer Facts & Figures 2016. https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2016.html [accessed 8 November 2017].
2. Lindgren R, Hallböök O, Rutegård J, Sjödahl R, Matthiessen P. What is the risk for a permanent stoma after low anterior resection of the rectum for cancer? A six-year follow-up of a multicenter trial. Dis Colon Rectum 2011; 54 : 41–47.
3. Shabbir J, Britton DC. Stoma complications: a literature overview. Colorectal Dis 2010; 12: 958–964.

Colostomy

Colorectal Disease

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The colostomy imp
patient reported ou
with a permanent c

A. Thyø, K. J. Emmertsen, T.

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- Patient derived s
- From 17 items o
- 7 questions with
- 0-9 Minor impac

The Colostomy Impact Score

Do you experience embarrassing smells from your stoma-bag?
- ☐ No, never 0
- ☐ Yes, less than once a week 0
- ☐ Yes, at least once a week 2

Do you experience seepage of faeces under the sticking plaster?
- ☐ No, never 0
- ☐ Yes, less than once a week 2
- ☐ Yes, at least once a week 4

What is the consistency of your faeces?
- ☐ Hard and lumpy 8
- ☐ formed and soft 0
- ☐ Mushy 3
- ☐ Watery 6
- ☐ Variable 6

Do you ever experience pain in and around the stoma?
- ☐ No, never 0
- ☐ Yes 5

Do you experience any skin problems around your stoma?
- ☐ No, never 0
- ☐ Yes 4

Have you noticed a bulge around the stoma?
- ☐ No 0
- ☐ Yes, I have a small bulge (under 10 cm) 2
- ☐ Yes, a I have a larger bulge (over 10 cm) 7

Who manages your stoma care?
- ☐ I do it all myself 0
- ☐ I need support and instruction 8

TOTAL-SCORE ----------

Interpretation:
0-9: Minor Colostomy Impact
10-38: Major Colostomy Impact

Patient Reported Measures
OUTCOMES THAT MATTER TO PATIENTS

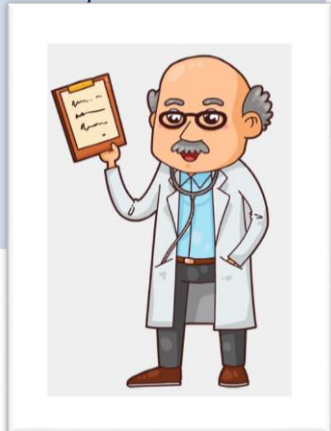
Aim

Using the patient-derived CI score as a reference, the aim of this study was to detect differences in the perception of the relative impact of colostomy-related problems on QoL between patients and healthcare professionals using the CIS.

Recruitment of the healthcare personnel:

Centers of collaborative research

- SL and PC.
- 14 centers.
- Consultants, trainees.



ASCN UK

- The Association of Stoma Care Nurses UK.
- Stoma nurses

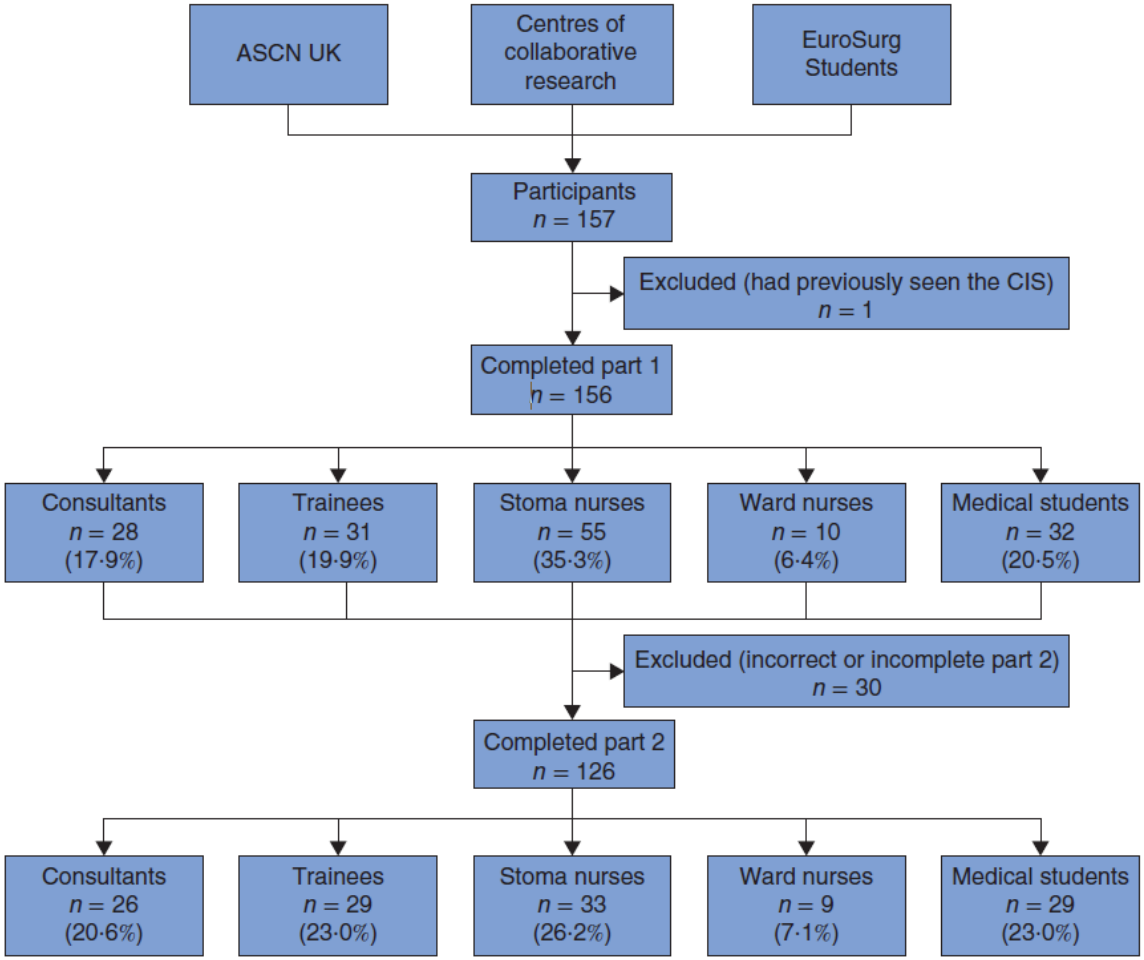
EuroSurg

- Medical student network.

Survey setup

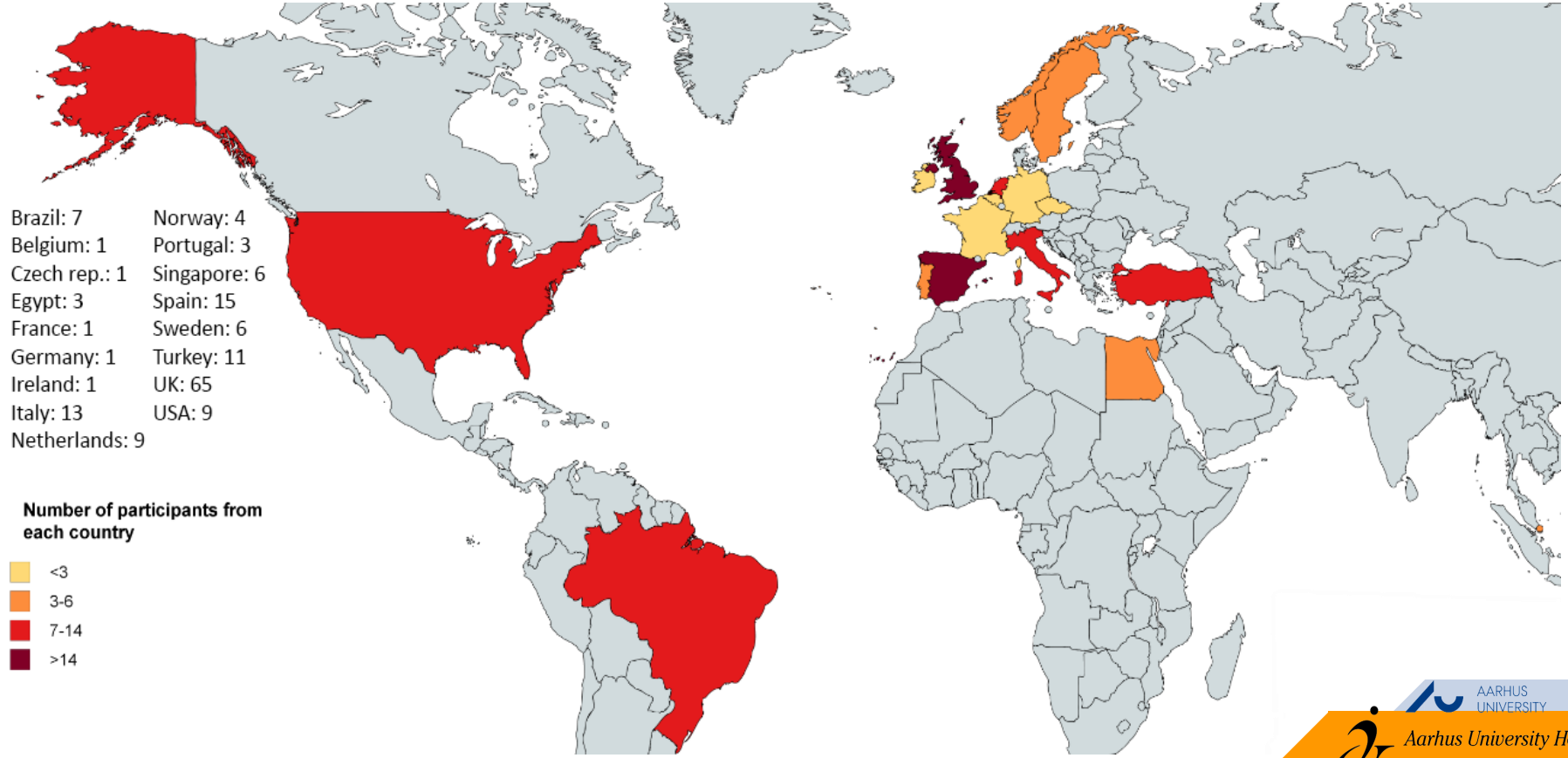
- The healthcare participant first received an email with an invitation letter, which also explains the study.
- After they had agreed to participate, they were given a link to the survey where they should complete a few background questions about their profession, years of experience, country of practice and whether they had previously seen the CIS.

Results


ASCN UK
Centres of collaborative research
EuroSurg Students
Participants n = 157
Excluded (had previously seen the CIS) n = 1
Completed part 1 n = 156
Consultants n = 28 (17·9%)
Trainees n = 31 (19·9%)
Stoma nurses n = 55 (35·3%)
Ward nurses n = 10 (6·4%)
Medical students n = 32 (20·5%)
Excluded (incorrect or incomplete part 2) n = 30
Completed part 2 n = 126
Consultants n = 26 (20·6%)
Trainees n = 29 (23·0%)
Stoma nurses n = 33 (26·2%)
Ward nurses n = 9 (7·1%)
Medical students n = 29 (23·0%)

Results

157 respondents from *17* countries all over the world.



Task 1

Selection of the colostomy related problems

Selection of items (Task one)

- By using the same **17** colostomy-related problems presented to the patients during the development of the CI score in the same order.
- Participants were asked to choose the **seven** that -in their opinion- would have the greatest negative impact on patients with a colostomy.

Analysis

Task one outcomes

Frequency of item selection.

Number of correct items in the original CI score

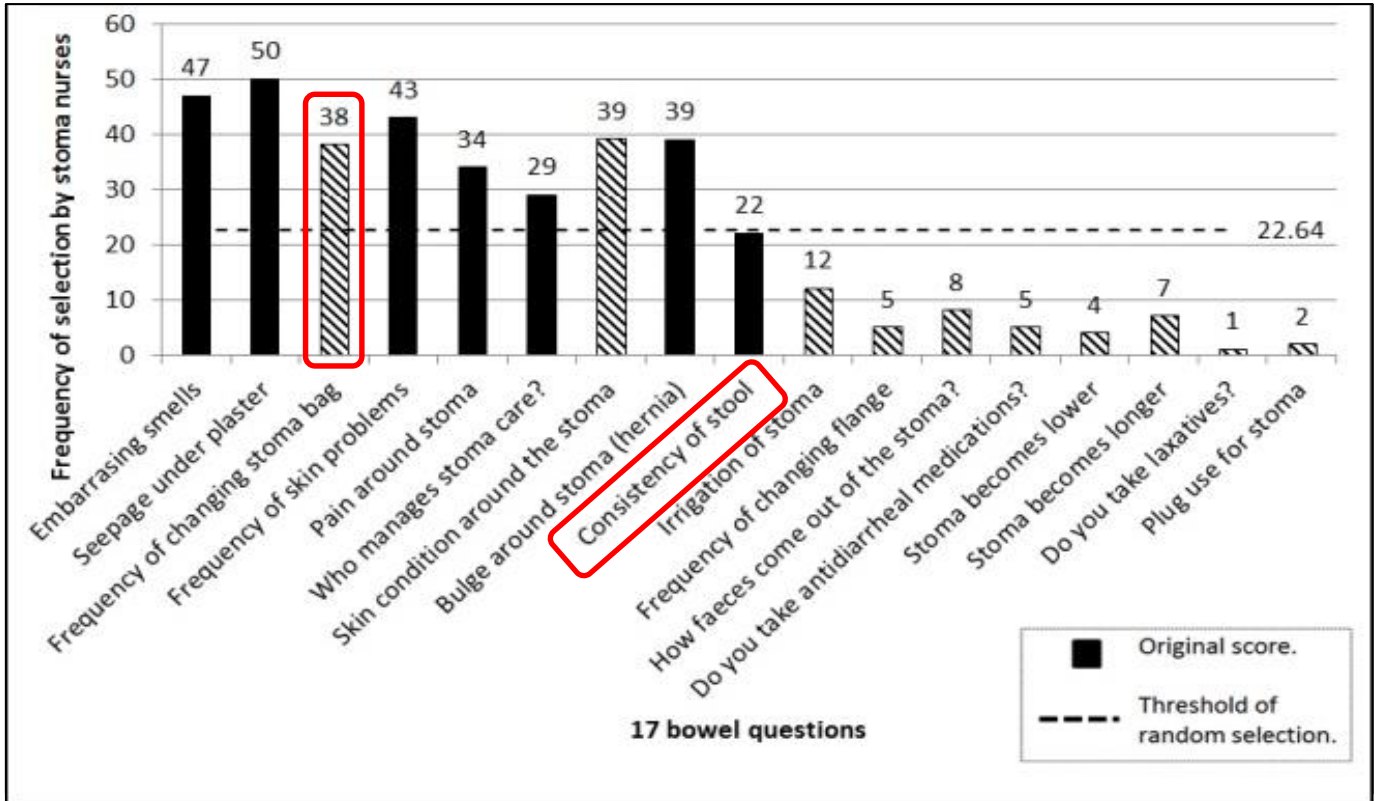
chi square test was used to compare between different professions

Results

No of correct selections	Stoma nurse 55	Consultant 28	Trainees 31	Ward nurse 10	Student 32	Total 156
≥ 5 correct selection	36 (**65. 5 %**) **2**	15 (53.6%)	21 (**67.8 %**) **1**	5 (50%)	12 (37.5%)	89 (57.1%)
P value		0.293	0.829	0.352	0.01	

***No sig. difference between the 5 professions, P value: 0.079**

Results (Task one)



All Stoma nurses Participants

Task 2

Scoring and ranking the responses

Ranking the responses of the original score (Task two)

- Once part one was completed, the next page opened up with no return back option.
- The original CI score with the seven items was shown, but without any values addressed to its 12 response answers.
- They were asked to rank the responses according to their opinion regarding the severity of the symptom; from the response of the highest to the lowest negative impact on QOL.

Ranking the responses of the original score

The Colostomy Impact Score

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- ☐ No, never 0
- ☐ Yes, less than once a week
- ☐ Yes, at least once a week

Do you experience seepage of faeces under the sticking plaster?
- ☐ No, never 0
- ☐ Yes, less than once a week
- ☐ Yes, at least once a week

What is the consistency of your faeces?
- ☐ Hard and lumpy
- ☐ formed and soft 0
- ☐ Mushy
- ☐ Watery
- ☐ Variable

Do you ever experience pain in and around the stoma?
- ☐ No, never 0
- ☐ Yes

Do you experience any skin problems around your stoma?
- ☐ No, never 0
- ☐ Yes

Have you noticed a bulge around the stoma?
- ☐ No 0
- ☐ Yes, I have a small bulge (under 10 cm)
- ☐ Yes, a I have a larger bulge (over 10 cm)

Who manages your stoma care?
- ☐ I do it all myself 0
- ☐ I need support and instruction

Statistical analysis

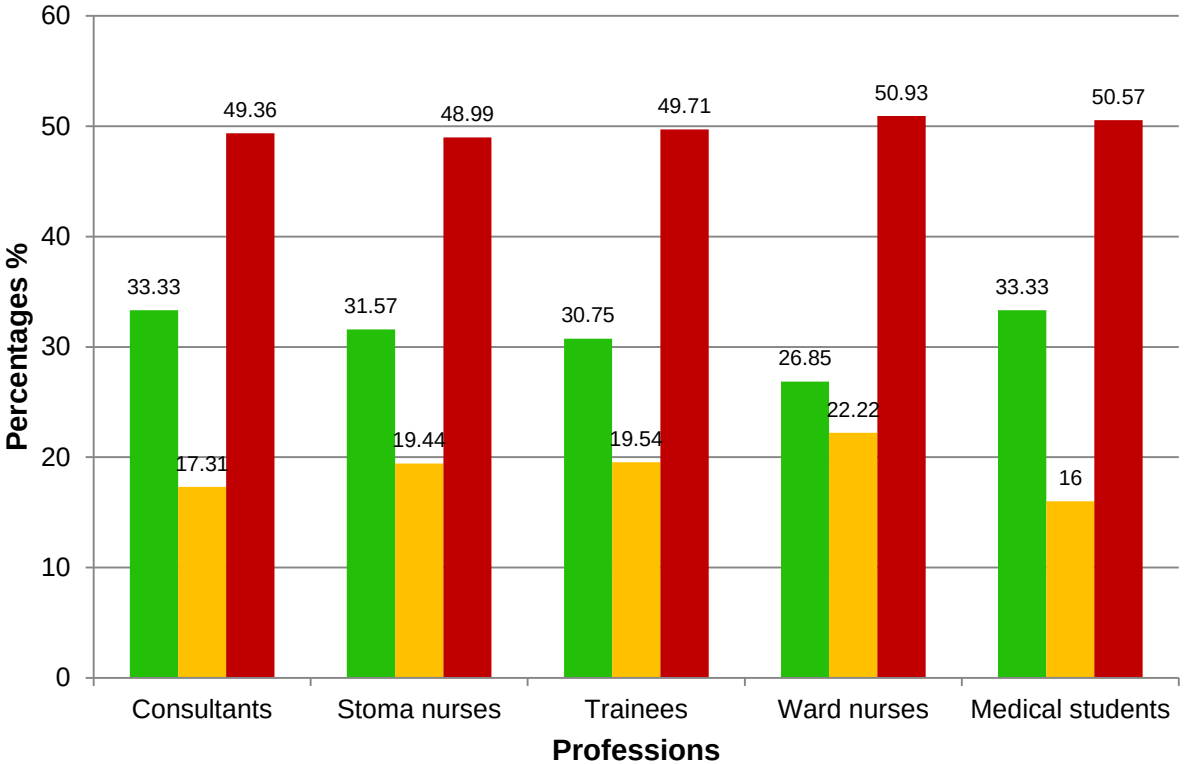
Good match ⟹ when the value is identical or differed by no > one point.

Moderate match ⟹ when the value differed by two points.

Poor match ⟹ when the value differed by more than two points.

Kruskal Wallis H test was used to compare between the responses values between the 5 profession groups.

Results (Task two)

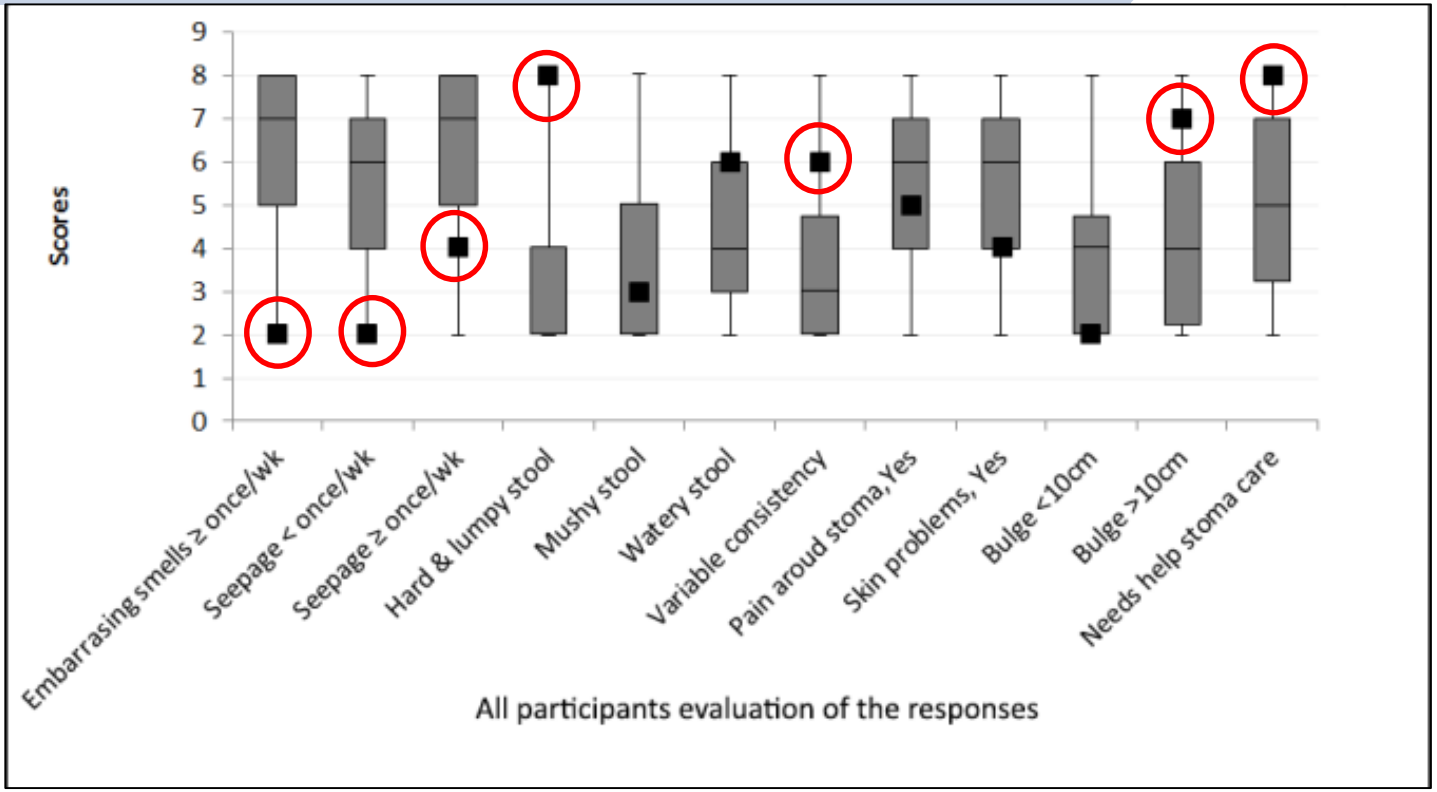


Good match

Moderate match

Poor Match

Results (part two)



Limitations

Recruitment was confined to

- The centers with collaborative research work with the dept.
- One stoma nurses association
- One student network.

Conclusion

- *The results of this study draw the attention towards the discrepancy in perspectives between colostomy patients and the healthcare providers.*

- *Further awareness and a better understanding of patients' perspectives are required; not only would lead to better preoperative counseling but also better post-treatment management and consequently improve patients' quality of life.*

Members of the Colostomy Impact Score study group:

- A. D'Hoore (Belgium)
- E. Espin (Spain)
- K. Buzatti (Brazil)
- M. Wong (Singapore)
- N. Smart (UK)
- N. Figueiredo (Portugal)
- P. Nilsson (Sweden)
- R. Madoff (USA)
- S. Wexner (USA)
- T. Cecil (UK)
- T. Oresland (Norway)
- W. Omar (Egypt)
- W. Borstlap (Netherlands)

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Patient and healthcare professional perceptions of colostomy-related problems and their impact on quality of life following rectal cancer surgery

H. Elfeki, A. Thyø, D. Nepogodiev, T. D. Pinkney, M. White, S. Laurberg, P. Christensen, the Colostomy Impact Score study group

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Thank You !

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