Quality of Life of Clients with Post Colostomy

Thesis

Submitted for partial Fulfillment of the Master Degree
in Community Health Nursing

By

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B.Sc. Faculty of Nursing – Ain Shams University (2000)

Faculty of Nursing
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Acknowledgement

First and foremost, thanks to ***Allah, the Most Gracious the Most Merciful.***

I would like to express my true and deep gratitude for ***Dr. Nadia Hamed Farahat,*** *Assistant Professor of Community Health Nursing, Faculty of Nursing, Ain Shams University, for her precious help and beneficial advices throughout this thesis. It has been a great honor to work under her supervision.*

Words stand short to express my deep appreciation for ***Dr. Hala Mohamed Mohamed,*** *Assistant Professor of Community Health Nursing, Faculty of Nursing, Ain Shams University, who kindly helped me in this study. Thanks a lot for her efforts and time she has devoted to accomplish this work.*

Many thanks to my Family for pushing me forward in every step in my life.

Finally, I would like to thank the clients who participated in the study sample.

Fatma Abd El-Latif

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List of Abbreviations

ABCRs : American board of colon & rectal surgery

ACS : American center society

CAARD : Colostomy association about rectal discharge

ET : Enter stoma therapy nurses

FAP : Familial adenomatous polyposis

GIT : Gastrointestinal tract

IBD : Inflammatory bowel disease

NCI : National Cancer Institute

ONS : Oncology Nursing Society

QOL : Quality of Life

UK : United Kingdom

UOAA : United ostomy association of America

UOAP : United ostomy association of population

WOCNS : Wound, Ostomy & Continence Nurses Society

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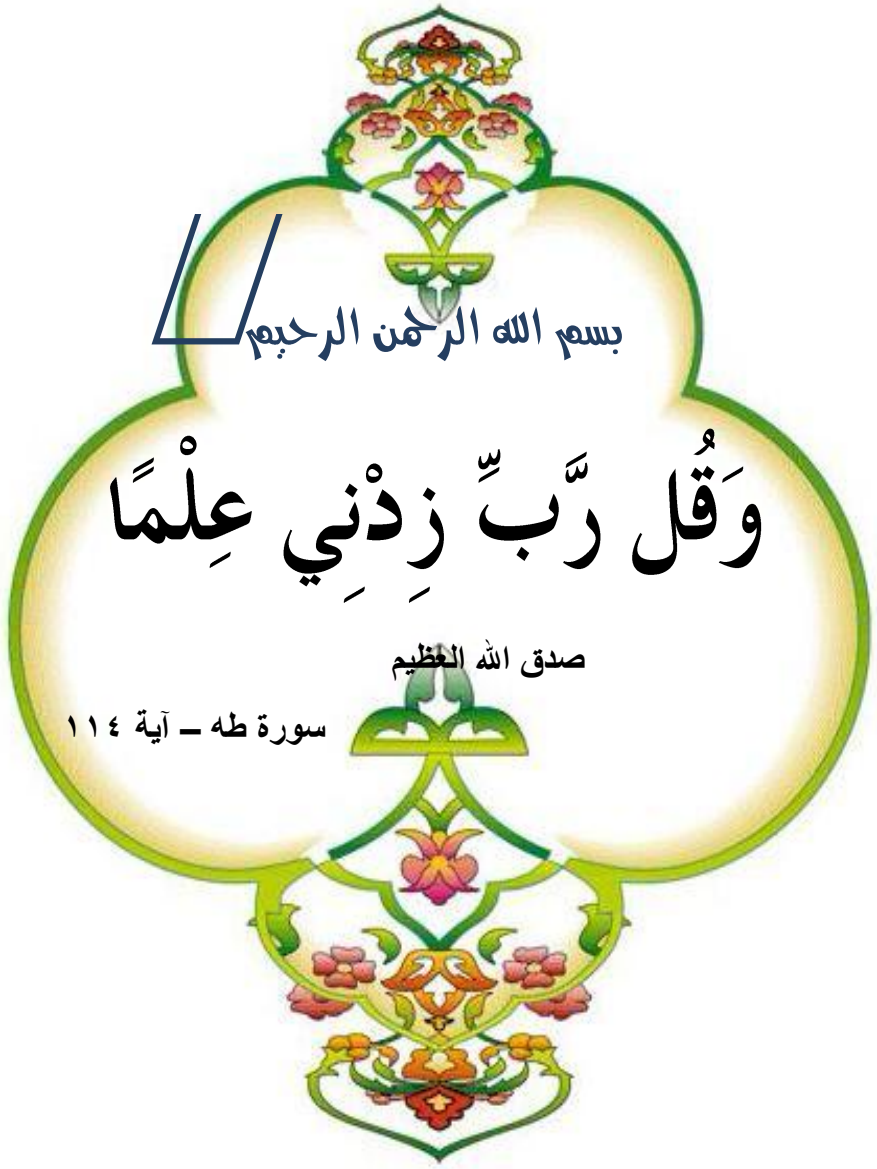
Abstract

- Colostomy is a procedure that is implemented to treat several conditions, including acute diverticulitis, rectal cancer trauma or inflammatory bowel disease as well as reduce patient's pain & discomfort. **Aim:** This study was aimed to assess quality of life (QOL) for clients with colostomy. **Design:** Descriptive design. **Setting:** At the outpatient clinics in the Ain Shams specialist hospital & radiation unit oncology nuclear medicine cancer at Ain Shams University Hospitals. **Sample:** A purposive sample of (244) adult clients from both sexes with temporary or permanent colostomy. **Tools:** One tool structured interviewing questionnaire sheet it was developed by investigator it constricted 4 parts. **Part I:** Client's socio demographic data. **Part II:** Client's knowledge about colostomy. **Part III:** Clients practical care with colostomy. **Part IV**: QOL for clients with colostomy. **Results:** Overall, the study has indicated that more than half of clients had satisfactory knowledge about colostomy, while majority of clients had psychological problems with colostomy. In addition, two thirds of clients had adequate level of self-care of colostomy. Also, a highly statistically significant difference was found between clients' knowledge & practices related to colostomy, QOL & their practices level **Recommendations:** Developing an orientation and teaching programs about knowledge, practice, and improvement QOL should be prepared for clients with colostomy.

- **Key words:** Colorectal surgery, colostomy, quality of life.
- **Master thesis** –Faculty of Nursing –Ain Shams university


بسم الله الرحمن الرحيم
وَقُل رَّبِّ زِدْنِي عِلْمًا
صدق الله العظيم
سورة طه – آية ١١٤

Introduction

Physical illness is a multifaceted phenomenon that includes biological, psychological, social, environmental, familial, psychosocial and psychosexual factors. It is an existential crisis involving issues of identity and daily life. Stoma patients have a surgically created opening on the abdomen involving parts of the gastrointestinal tract. Colostomy involves discharging feces from the large intestine through the surgical opening, due to this major change in physical appearance and bodily function, patients with stoma are challenged with a number of quality of life (QOL) issues ***(Geber & El Gmail, 2013).***

In colostomy surgery, normal bowel function is interrupted and waste is passed through the abdominal wall through an opening called a stoma into an appliance that must be emptied periodically. If the distal rectum and a rectal sphincter mechanism are removed, the colostomy is permanent. colostomy may be the best and safest form of treatment for a number of conditions including acute diverticulitis, rectal cancer, trauma, or inflammatory bowel disease ***(Kieghley, 2009 Pringle & swan, 2011 and Rafii et al., 2013).***

It is estimated that there are approximately 95, 000 people living with a colostomy in the UK and that around 7, 400 had permanent colostomies which carried out each year.

In the future, the number of colostomies may increase ***(Mohamed et al., 2012).***

The incidence of colostomy in National Cancer Institute in Egypt approximately 600/year. It differs from many other surgical hospitals ***(NCI, 2012).*** Patients with colostomy face many difficulties both physical and psychological, added to the long term problems and impact of colostomy on patient's condition and interference with day-to-day living. In such circumstances, it is worthwhile to assess life style in the evaluation of the outcomes of various therapeutic procedures along with their final impact on patients' lives. Making good decisions to control disease complications, treatment, and improving life style is a very important goal in treating and caring for patients with colostomy ***(Adel et al., 2008 and Cox et al., 2011).***

Furthermore, the bowel alteration such as diarrhea, constipation, impaction of stool and/or excessive gases is considered sources of problems for colostomy patients. In addition, other sources of problems include skin irritation, irrigation of colostomy and application of pouching system correctly, problems of leakage and/or presence of bad odor. Additionally, the presence of colostomy itself is considered as a big problem which affects the body image of those patients, reduction in pleasurable activities and creates