63 - FEELINGS EXPRESSED BY STOMIZED PATIENTS OF A PUBLIC HOSPITAL IN JOÃO PESSOA - PB

MARIA DO LIVRAMENTO NEVES SILVA[1]
EDIENNE ROSÂNGELA SARMENTO DINIZ[2]
SIMONE HELENA DOS SANTOS OLIVEIRA[3]
JACIÁRIA DE LIMA OLIVEIRA[4]
MERIFANE JANUÁRIO DE SOUSA[5]
1. Master's student, Federal University Federal of Paraíba
2. Master's student, Federal University Federal of Paraíba
4. Doctor, Associate Professor of Federal University of Paraíba, vinculated to Technical School of Health
5. Doctor, Associate Professor of Federal University of Paraíba, vinculated to Technical School of Health
4. Nurse, Edson Ramalho Military Police Hospital, João Pessoa (PB), Brazil.
5. Master's student, Federal University Federal of Paraíba
UFPB – João Pessoa (PB), Brazil.
marialns2010@hotmail.com

INTRODUCTION

Colon and rectum cancer occupies the third most common cause of neoplasia worldwide in both sexes, and it is the second cause in developed countries (WHO, 2002). Most of patients with cancer of colon and rectum are submitted to a surgical procedure that creates an opening, the stoma, into the colon when it is necessary to divert the normal transit of food and/ or deletions, temporarily or permanently (SMELTZER; BARE, 2005). Stomized people face real and symbolic losses that cause negative feelings in their relationships. This way, the services and the professionals of health, especially the nurse, have an important role in the physiologic, psychological and social adaptation of this person and their relatives in the process of stomized living (CASCAIS; MARTINI; ALMEIDA, 2007). Considering the professional experience of the researchers in hospital and due to the proximity to the stomized patient, it emerged the disquietude to investigate the perception of these patients in relation to their new life condition due to the stoma.

This research will serve as a subside to nursing professionals, contributing to the increase of psychosocial knowledge about the stomized patient, collaborating to a humanized care and favoring a link of trust in the patient-professional relation. In this scope, there is an urgent need to know the stomized patient, characterizing the types and causes of stoma and his feelings from this new reality.

METHODS

It is a transversal exploratory-descriptive research, with quantitative approach. The scenery was the surgical clinic of a public hospital in João Pessoa-PB. The study population consisted of all the patients admitted to this service, corresponding to a sample of 24 patients. In addition, the inclusion criteria were patients with elimination intestinal ostomy or urostomy, and being in the postoperative period. The data were collected from August 2010 to August 2011. The participation of subjects was voluntary, fulfilling the Resolution 196/96 of the NHC. Moreover, the present study was submitted to the Ethics Research Committee of Santa Emilia de Rodat College - FASER, under protocol n. 032/2010.

The data were collected by means of a semi-structured interview, constituted of two moments: first, the data which enabled the characterization of interviewees; in a second moment, the participants had the possibility of talking about the proposed theme, without prefixed answers or conditions by the researchers. The interviews were done by the researchers after the signature of the Term of Consent (TC).

RESULT AND DISCUSSION

CHARACTERIZATION OF SOCIO-DEMOGRAPHIC AND CLINICAL DATA

During the data collection, they were identified 24 patients submitted to stoma confection, 14 men (58.3%) and 10 women (41.7%). Age variation showed that most of sample was between 41 and 50 years: five (20.8%); from 51 to 60: five (20.8%); over 60: 10 (41.8%). The high number of elderly among stomized patients corroborates literature which affirms that one of the main markers to the identification of risk groups is age over 60 years (STUMM; OLIVEIRA; KIRCHNER, 2008).

In relation to marital status, most of interviewees were married and had children. It is possible to link this datum to the importance of family in the support to the problems of patients. The involvement of family and partners is indispensable to the development of positive attitudes face on the new situation, becoming the recuperation process faster and also helping the return of stomized patient to his daily activities, inclusive in relation to sexuality (PAULA; TAKAHASHI; PAULA, 2009).

It was still verified that 58.3% of sample were white and catholic; 23.8% were farmers and maids; 33.3% concluded high school and 41.7% had dependents. The obtainment of information about socio-demographic profile of subjects in a research is extremely important to subsidize the proposition of educative actions that are compatible to their characteristics, once it is necessary to adequate the actions to the group to whom they are destined. The level of education is an example. It is an aspect which can directly influence the understanding of information, orientations and/ or education actions in health and possibly influence in a positive way the adhesion to the health care recommended by the multidisciplinary team. According to Menezes and Quintana (2008), it is very important to know the schooling of patient because it is a datum that permits to the nurse the establishment of a compatible level of understanding.

The study reveals that among the performed ostomies, 21 were colostomy. From these, 17 (70.8%) were done on an emergency and 7 (29.2%) were elective surgeries. Two ileostomies were done on an emergency, and just one patient was submitted to an elective urostomy. In relation to the permanence of stoma, 12 were permanent, 4 were temporary and 8 patients did not know how long they would stay stomized. When questioned about the demarcation of the area in which the stoma would be done, 13 patients (54.2%) did not remember, and 11 (45.8%) affirmed that the area was not previously demarked.

Table 1 – Distribution of types and causes of stoma. João Pessoa, PB, 2011.

Surgery	Colostomy	Ileostomy	Urostomy	Total
Acute abdomen	02	01	-	03
Intestinal obstruction	04	-	-	04
Neoplasm	07	-	01	08
Appendectomy	02	-	-	02
Others*	06	01	-	07
?	21	02	01	24

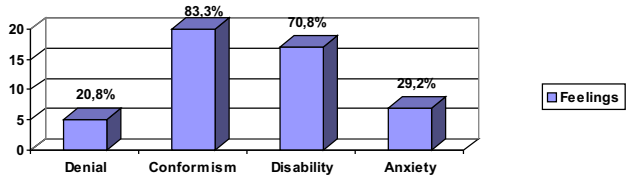
* gunshot wound, stab wound, traffic deviation for treating infected ulcers, drainage of subphrenic abscess, hernia and bowel necrosis, polyps and intestinal narrowing, and diverticulitis.

The main diagnostic that culminated with the confection of stoma was neoplasm; the most frequent type of ostomy was colostomy, followed by intestinal obstruction, acute abdomen and appendectomy. This finding corroborates with a study developed by Pereira Passos Institute (2007), which appoints that the main cause of ostomy is malignant neoplasm of rectum (42.16%).

About orientations for self-care, 12 (50%) patients answered they received orientations of the nurse of the Association of Stomized of University Hospital, 07 (29.2%) said they did not receive any information about self-care, and 05 (20.8%) patients did not know if they were oriented or not in relation to this procedure. This datum shows fragility in the care for this clientele by the service in which there are no stomatherapist nurses that provide a specialized care to this clientele.

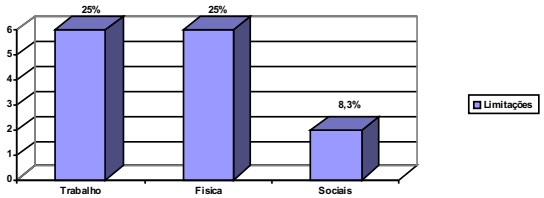
In relation to postoperative complications, just one patient presented dermatitis. This information is in concordance to another research which evidenced that dermatitis is one the most incident complication (42.89%) (PI CHILIDA et al, 2007).

Graphic 1 - Feelings of subjects facing the new reality, João Pessoa, 2011.



It is verified that most of individuals demonstrate negative or resignation expressions facing the new reality. This way, it is possible to affirm that stoma provokes psychological and aesthetic impact because this change in patient incites a negative view about the prospects of future life. However, some patients express a more conformist and resigned view in which the will of God is superimposed on its own. Researches find that religious beliefs have influence in the way people face problems and critical situations, contributing to a better acceptation and coping of problem (FARIA; SEIDL, 2006).

Graphic 2 - Impact caused by stoma in daily life, João Pessoa, PB, 2011.



The results show many implications of ostomy in the daily activities of subjects, covering various aspects of their lives. Restrictions in return to work, for example, it is a fact that provokes a great preoccupation to the stomized because it means a way of social acceptance, of feeling good and of preserving identity (MAURICIO, 2011). On the other hand, the physical alterations caused by stoma, which deprive the body of its autonomy, tend to provoke interior disequilibrium, reflecting on the sexuality of the stomized individual (PEREIRA, 2006). Despite the certainty of limitations in some areas of life, some patients consider they can live normally and without limitations. The uncertainty in relation to future changes can be justified by the fact of the stoma is recent and the patient is still hospitalized, restricting the future projection for daily activities.

CONCLUSION

This research enabled to characterize the stomized patient and show his understanding in relation to the modifications in his life from the stoma. Stoma causes a violation of corporal integrity, causing emotional and psychological fragility. These affirmations are evidenced by the perception of feelings of denial, conformism, disability and anxiety that are expressed by individuals on their new reality.

In the care to the stomized patient, it can be observed the need for stomatherapist nurses to help him from the preoperative period until hospital discharge, giving support to his biopsychosocial needs, orienting to self-care and favoring the construction of defense mechanisms and coping of the new reality.

REFERENCES

CASCAIS, A. F. M. V, MARTINI, J. G, ALMEIDA, P. J. S. O Impacto da Ostomia no Processo de Viver Humano. Texto Contexto Enferm, v. 16, n. 1, p. 163-7, Jan-Mar, 2007. Available at: <http://www.textoecontexto.ufsc.br/conteudo.php>. Access on: 15 Jun 2011.

FARIA, J. B.de; SEIDL, E. M. Religiosidade, enfrentamento e bem-estar subjetivo em pessoas vivendo com hiv/aids. Psicologia em Estudo, Maringá, v. 11, n. 1, p. 155-164, Jan./Apr, 2006. Available at: <http://www.scielo.br/pdf/pe/v11n1/v11n1a18.pdf>. Access on: 05 Jul. 2012.

IBGE. Instituto Brasileiro de Geografia e Estatística. Sinopse do Censo Demográfico, 2010. Available at: <http://www.censo2010.ibge.gov.br/sinopse/index.php?dados=12&uf=00>. Access on 03/27/2012.

INSTITUTO PEREIRA PASSOS. Estomizados recebem atenção especial no município, 2004. Available at: <http://www.armazemdedados.rio.rj.gov.br/arquivos/21_ostomizados%20recebem%20aten%C3%A7%C3%A3o%20especial.

PDF>.

MENEZES, A. P. S.; QUINTANA, J. F. A percepção do individuo estomizado quanto à sua situação.RBPS. Fortaleza, n. 1, v. 21. p. 13-18, 2008 . Available at: http://redalyc.uaemex.mx/pdf/408/40821103.pdf. Access on: 02 Jun. 2012.

MAURICIO, V. C. A pessoa estomizada e o processo de inclusão no trabalho: contribuição para enfermagem. 2011. Dissertação (Mestrado) - Universidade do Estado do Rio de Janeiro, Faculdade de Enfermagem. Rio de Janeiro, 2011. Available at: http://www.bdtd.uerj.br/tde_arquivos/20/TDE-2011-05-26T143105Z-1419/Publico/DISSERTACAO_FINAL_Vanessa_Cristina_Mauricio.pdf. Access on: 13 Jun. 2012.

PAULA, M. A. B. de; TAKAHASHI, R. F. PAULA, P. R. de. Os significados da sexualidade para a pessoa com estoma intestinal definitivo. Rev bras. colo-proctol, v. 29, n. 1, p. 77-82, 2009.

PEREIRA, A. P. dos S. Educação sexual de grupos de adultos portadores de estomas intestinais definitivos: processo da implantação e implementação. [dissertação] Escola de Enfermagem de Ribeirao preto – USP, 2006. Available at: <www.teses.usp.br/teses/disponiveis/22/22132/tde.../Pereira_APS.pdf>.

PI CHILIDA, M. de S. et al.Complicações mais frequentes em pacientes atendidos em um Pólo de Atendimento ao Paciente com Estoma no Interior do Estado de São Paulo, Rev Estima, São Paulo, v. 5, n. 4,p. 31- 36, 2007. Available at: <http://www.revistaestima.com.br/index.php?option=com_content&view=article&id=89%3Aartigo-original-4&catid=5%3Aedicao-54&Itemid=76&lang=pt>. Access on: 20 Jun. 2012.

STUMM, E. M. F, OLIVEIRA, E. R. A, KIRSCHNER, R. M. Perfil de pacientes ostomizados. Scientia Medica, v.18, n. 1, p. 26-30, Jan/Mar, 2008. Available at: <http://revistaseletronicas.pucrs.br/ojs/index.php/scientiamedica>. Access on: 10 Mar. 2010.

SMELTZER, S. C., BARE, B. G. Tratado de enfermagem Médico-Cirúrgica. 10. ed. Rio de Janeiro: Guanabara koogan, 2005.

OMS, Cuidados inovadores para condições crônicas: componentes estruturais de ação - relatório mundial. Brasília: 2002. Available at: <http://bases.bireme.br/cgi-bin/wxislind.exe/iah/online/?IsisScript=iah/iah.xis&src=google&base=LILACS&lang=p&nextAction=lnk&exprSearch=402056&indexSearch=ID>. Access on: 15 Sep. 2011.

FEELINGS EXPRESSED BY STOMIZED PATIENTS OF A PUBLIC HOSPITAL IN JOÃO PESSOA - PB

ABSTRACT

The study aims to know the stomized patient, characterizing types and causes of ostomy, and his feelings face on this new reality. It is a quantitative research, which was developed in a public hospital in João Pessoa-PB, from August 2010 to August 2011. The population was constituted by all the patients who were submitted to surgery in the studied period, in a total of 24 patients with stoma. The data were analyzed using MS Excel, enabling descriptive statistic and presentation of results through tables. In addition, the study was approved by the Ethics Research Committee of Santa Emilia de Rodat College – FASER, under protocol n. 032/2010. In the studied year, 24 patients submitted to the confection of stoma were identified. From these, 14 (58.3%) were men and 10 (41.7%), women. The age category presented the following data: from 17 to 20 years: 02 (8.3%); from 31 to 40: 02 (8.3%); from 41 to 50: 05 (20.8%); from 51 to 60: 05 (20.8%); over 60 years: 10 (41.8%). In relation to the kind of stoma, 21 patients (87.5%) had colostomy; two (8.3%) had ileostomy; and one patient had bilateral stoma (one colostomy and one ileostomy). Furthermore, it is verified that stoma provokes a violation to corporal integrity, causing psychological and emotional fragility in the stomized patient. Due to this gap, it is emphasized the importance of biopsychosocial care to the stomized patient by nurses specialized in stomatherapy that may assist the client since the preoperative period until hospital discharge.

KEY-WORDS: Ostomy. Preoperative period. Nursing Care.

SENTIMENTS EXPRIMÉS PAR LES PERSONNES STOMISÉES UN HÔPITAL PUBLIC DE LA VILLE DE JOÃO PESSOA-PB

RÉSUMÉ

L'étude vise à évaluer le patient stomisé, de caractériser les types et les causes de la stomie et leurs sentiments avant cette nouvelle réalité. Il s'agit d'une étude avec une approche quantitative. Il a été effectué dans un hôpital public à João Pessoa, de août 2010 à août 2011. La population étudiée était composée de tous les patients ayant subi à la chirurgie au cours de la période d'étude, l'échantillon comprenait 24 patients avec stomie. Les données ont été analysées à l'aide de la software Excel, permettant des statistiques descriptives et présentation des résultats sous forme de tableaux. L'étude a été approuvée par le Comité d'Éthique de la Université Santa Emilia Rodat – FAZER, avec le protocole n ° 032/2010. Dans l'année étudiée, 24 patients ont été identifiés qui ont subi de la realisátion de la stomie, et 14 (58,3%) hommes et 10 (41,7%) des femmes. Dans la catégorie d'âge il y avait: 17 à 20 ans: 02 (8,3%), 31 à 40: 02 (8,3%), 41 à 50: 05 (20,8%), 51 à 60: 05 (20,8%), plus de 60 ans: 10 (41,8%). En ce qui concerne le type de stomie de 21 (87,5%) avaient une colostomie, 02 (8,3%) iléostomie et 01 (4,7%) avaient bilatérale stomie (colostomie et d'iléostomie) Nous avons constaté que la stomie entraîne une violation de l'intégrité corporelle, ce qui entraîne une fragilité émotionnelle et psychologique. Face à cette lacune souligne l'importance de la assistance biopsychosocial par les infirmières spécialistes en stomathérapie qui peuvent aider le patient, de la pré-opératoire jusqu'a la sortie de l'hôpital.

MOTS-CLÉS: Stomie. Pré-opératoire. Soins infirmiers

SENTIMIENTOS EXPRESADOS POR ESTOMIZADOS DE UN HOSPITAL PÚBLICO DEL MUNICÍPIO DE JOÃO PESSOA – PB

RESUMEN

El estúdio tiene como objetivo evaluar al paciente de ostomia La caracterización de los tipos y causa de ostomias y sus sentimientos ante esta nueva realidad. Se trata de un estúdio con un enfoque cuantitativo. Se llevó a cabo en un hospital póblico em João Pessoa, desde agosto 2010 hasta agosto 2011. La población de estúdio consistió en todos los pacientes que se sometieron a cirugá durante el período de estúdio, La muestra fue de 24 pacientes con estoma. Los datos fueron analizados estadística descriptiva que permite Excel y presentación de los resultados en La forma de tabelas. El estúdio fue aprobado por el Comité de Ética en Investigación de La Faculdad de Santa Emília de Rodat (FASER), como el protocolo Nº 032/2010. En el año de estúdio, 24 pacientes fueron identificados los que se realizó La construcción del estoma, y 14(58,3%) hombres y 10(41,7%) mujers. En la categoria de edad se fue: 17 a 20 anõs: 02(8,3%), 31 a 40: 02(8,3%), 41 a 50: 05(20,8%), mayores de 60 años: 10(41,8%). En cuanto al tipo de estoma 21 (87,5%) tenían colostomia, 02 (8,3%) ileostomía y 01 (4,7%) tuvieron bilateral estoma (una violación de La integridad corporal, lo que resulta en una fragilidad ostomia emocional y psicológico. Ante esta brecha pone de relieve La importancia de La atención al paciente biopsicosocial para especialistas en hospitalaria preoperatoria.

PALABRAS CLAVE: Ostomía. Antes de La operación. Cuidados de enfermería.

SENTIMENTOS EXPRESSOS POR ESTOMIZADOS DE UM HOSPITAL PÚBLICO DO MUNICIO DE JOÃO PESSOA - PB

RESUMO

O estudo tem como objetivo conhecer o paciente estomizado, caracterizando os tipos e causas da estomia e os seus sentimentos diante dessa nova realidade. Trata-se de uma pesquisa com abordagem quantitativa. Foi realizado em um hospital público de João Pessoa-PB, no período de agosto de 2010 a agosto de 2011. A população foi constituída por todos os pacientes submetidos à cirurgia no período do estudo, sendo a amostra composta por 24 pacientes portadores de estoma. Os dados foram analisados através do software Excel possibilitando a estatística descritiva e apresentação dos resultados sob a forma de tabelas.O estudo foi aprovado pelo Comitê de Ética em Pesquisa da Faculdade Santa Emília de Rodat – FASER, conforme protocolo nº 032/2010. No ano estudado, foram identificados 24 pacientes submetidos à confecção do estoma, sendo 14 (58,3%) do sexo masculino e 10 (41,7%) feminino. Na categoria idade verificou-se: 17 a 20 anos: 02 (8,3%), 31 a 40: 02 (8,3%), 41 a 50: 05 (20,8%), 51 a 60: 05 (20,8%), maiores de 60: 10 (41,8%). Em relação ao tipo de estoma 21 (87,5%) tinha colostomia, 02 (8,3%) ileostomia e 01(4,7%) apresentava estoma bilateral (uma colostomia e uma ileostomia). Verificamos que o estoma causa uma violação a integridade corporal, gerando no ser estomizado fragilidade emocional e psicológica. Frente a esta lacuna enfatiza-se a importância da assistência biopsicossocial ao paciente estomizadoccbcb por Enfermeiros especialistas em estomaterapia que possam assistir ao cliente, do pré-operatório à alta hospitalar.

PALAVRAS-CHAVE: Ostomia. Pré-operatório. Assistência de enfermagem.