

# Experiences of colostomized people- Integrative Review

## Vivências de pessoas colostomizadas- Revisão Integrativa

### Experiencias de personas colostomizadas- Revisión integrativa

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## REVISA

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#### RESUMO

**Objetivo:** Analisar a qualidade de vida em relação ao uso da bolsa coletora em pessoas ostomizadas. **Método:** Este estudo teve como base uma abordagem qualitativa e método de revisão bibliográfica integrativa. **Resultados:** No presente estudo, foram analisados 22 (vinte e dois) artigos que atenderam aos critérios de inclusão. Dos achados da pesquisa foram criadas 8 categorias. **Conclusão:** O estudo buscou uma maior conscientização sobre as necessidades das pessoas ostomizadas durante e após o uso da bolsa coletora, para que enfermeiros e familiares deem o suporte necessário, compreendendo os sentimentos que são despertados e como a situação afeta a vida de cada ostomizado.

**Descritores:** Estomia; Colostomia; Enfermagem.

#### ABSTRACT

**Objective:** To analyze the quality of life in relation to the use of the collection bag in ostomized people. **Method:** This study was based on a qualitative approach and an integrative literature review method. **Results:** In the present study, 22 (twenty-two) articles that met the inclusion criteria were analyzed. From the research findings, 8 categories were created. **Conclusion:** The study sought greater awareness of the needs of ostomates during and after the use of the collection bag, so that nurses and family members provide the necessary support, understanding the feelings that are aroused and how the situation affects the life of each ostomate.

**Descriptors:** Ostomy; Colostomy; Nursing.

#### RESUMEN

**Objetivo:** Analizar la calidad de vida en relación al uso de la bolsa colectora en ostomizados. **Método:** Este estudio se basó en un enfoque cualitativo y un método integrador de revisión de la literatura. **Resultados:** En el presente estudio se analizaron 22 (veintidós) artículos que cumplieron con los criterios de inclusión. A partir de los resultados de la investigación, se crearon 8 categorías. **Conclusión:** El estudio buscó una mayor conciencia de las necesidades de los ostomizados durante y después del uso de la bolsa de recolección, para que los enfermeros y familiares brinden el apoyo necesario, comprendiendo los sentimientos que despiertan y cómo la situación afecta la vida de cada ostomizado.

**Descritores:** Ostomía; Colostomía; Enfermería.

## Introduction

Ostomy, which can also be called an ostomy or stoma is the name given to the surgical procedure consisting of performing an orifice in some part of the urinary system, respiratory system and digestive tract in favor of opening a path that works alternatively by communicating from the internal to the external environment facilitating the exit of feces, urine or assisting in feeding and/or breathing the user.<sup>1</sup>

There are terms that are used to characterize the stoma and this characterization happens according to the part of the body that was affected, and can be divided into ileostomy, when a channel is created for communication from the small intestine to the outside, colostomy, when communication of a part of the large intestine to the outside and urostomia, when a path is made to the elimination of urine alternatively<sup>2</sup>.

Such a surgical procedure is done in cases of cancer, accident, intestinal diseases that cause inflammation and in cases of malformation incompatible with the proper physiological functioning of some organic system. The stoma may be of permanent or temporary use<sup>3</sup>.

The feeling of shyness as well as that of difference is very frequent in the lives of ostomized people, and this ends up bringing difficulties in the search for new friendships and hindering good social interaction. The loss of self-esteem in relation to stoma and the use of the collecting bag imply the development of depressive conditions and even for thoughts focused on suicide<sup>4</sup>.

In view of the above, this study went on to the following question: how can the use of the collecting bag compromise the quality of life of ostomized people?

This study is important, as it can contribute to all people who use the collection bag, as well as to the family and nursing professionals, making there an awareness about the subject. With this, professionals will be able to encourage actions aimed at the target audience, which encourage discussion, empathy and greater clarification on the subject.

In this sense, the objective is to analyze the quality of life in relation to the use of the collecting bag in ostomized people.

## Method

This study was based on ludke and andre's<sup>5</sup> assumptions using the qualitative approach and bibliographic review method.

The bibliographic survey of the data occurred from February to March 2022 with a structured search in the Scientific Electronic Library Online Database (SciELO) and Nursing Databases (BDENF). The following Keywords were used from the search for Health Sciences Descriptors (DeCS): Ostomy, Colostomy, Nursing.

For the selection of articles, the following inclusion criteria were considered: articles that fit the objective of the study, published

exclusively in Portuguese (Brazil), with abstracts and full texts available in full and online.

Exclusion criteria focused on articles published in English with titles and abstracts that did not fit the proposed theme.

Initially, exploratory readings of titles and abstracts were performed to identify articles that met the eligibility criteria.

Then, the previously selected articles were read completely, and these were resubmitted to the inclusion and exclusion criteria.

After the selection of the final sample, the following variables were extracted from the publications and comprised the table of this review: titles, authors, year, type of study and area.

The final sample consisted of 22 scientific articles, selected by the previously established inclusion criteria.

The collected data were digitized in a word document, organized and grouped into the thematic categories that configure the central focus of this study.

## Results and Discussion

In the present study, 22 (twenty-two) articles that met the inclusion criteria were analyzed. The following is an overview of the articles analyzed. Table 1 represents the specifications of the articles selected for the study.

**Chart 1.** Articles used for data collection.

Titles	Year	Type of Study	Field
The ostomy changing life: face to live.	2013	Exploratory and descriptive field research, with a qualitative approach.	Nursing
Quality of life of patients with intestinal ostomy: a narrative review.	2012	Narrative literature review.	Nursing
Emotional perceptions influenced by an ostomy.	2009	Descriptive-exploratory study with qualitative methodological approach.	Nursing
Influence of Eating Habits On The Social Reintegration Of A Group Of Stomized.	2010	Qualitative study.	Nursing
Feelings Of The Person Submitted Intestinal Ostomy - A Holistic View of Nursing.	2013	Descriptive, qualitative study.	Nursing
Ostomy, A Difficult Adaptation.	2008	Literature review.	Nursing

Feelings and Perceptions of Ostomized People.	2016	Descriptive and exploratory research	Nursing
Physical, psychosocial changes and the feelings generated by intestinal ostomy for the patient: integrative review.	2017	Integrative review.	Nursing
Body awareness of people with intestinal ostomy: phenomological study.	2017	Descriptive study with qualitative approach.	Nursing
Perception of patients with intestinal ostomy in relation to nutritional changes and lifestyle.	2019	Exploratory and descriptive study, with qualitative approach.	Nursing
Experience of stomized patients: a contribution to nursing care.	2011	Exploratory and descriptive research,	Nursing
Quality of life of people with intestinal ostomy: integrative review.	2015	with a qualitative approach.	Nursing
Quality of Life and Nutritional Profile of Colostomized Colorectal Cancer Patients.	2010	Integrative review of the literature.	Nursing
Self-esteem and quality of life related to the health of stomized patients.	2016	Cross-sectional study with quantitative approach	Nursing
Changes in the quality of life of intestinal ostomized patients.	2019	Integrative review of descriptive type.	Nursing
Quality of life of people with elimination intestinal ostomies.	2017	Descriptive and cross-sectional study.	Nursing
The impact of ostomy on the process of human living.	2007	Literature review.	Nursing
Social adaptation of colostomized patients: challenges in nursing care.	2016	Integrative review of the literature.	Nursing
Colostomy: the construction of autonomy for self-care.	2020	Integrative research.	Nursing

Quality of life of individuals with intestinal stomies.	2013	Qualitative descriptive study.	Nursing
Sexuality in the ostomized patient: exploratory study.	2014	Cross-sectional study.	Nursing
Perception of the person with stoma about their sexuality.	2019	Qualitative descriptive study.	Nursing

For the discussion of the theme, the data found were organized in the form of categories, where they are presented in number of 8 categories, as follows:

### **Ostomy after anatomophysiological changes**

The anatomophysiological alterations that occurred in the ostomy powders are mostly very significant for patients. Studies reveal a series of psychological desequilíbrios caused by the feeling of insecurity that is triggered in ostomized from the moment they had body alteration, where they lose sphincter control. This implies a process of adaptations necessary to the new life condition of these patients<sup>6</sup>.

Without sphincter control, the ostomized begins to deal with the fact that their evacuations no longer happen voluntarily, but involuntarily. Thus, the ostomized will have to live with the physiological changes that involve the way in which the feces will be excreted, because in the face of this new reality, their feces always come to be in front of their eyes and it is still possible to live with the effects that come, such as the odor in greater evidence, the possible leakage that is a cause for concern and the use of the collecting bag there in your abdomen.<sup>7-8</sup>

Most ostomized people are concerned about the odor of feces, gauze and diarrhea that can end up increasing the size of the collector bag, generating an embarrassing situation. The production of gases also results in a problem, because it makes the collecting bag fuller and more distended, being possible its detachment accidentally<sup>9</sup>.

Thus, losing control over bowel movements can lead the ostomized to face a fall in their self-esteem, triggered by the fear of suffering some kind of prejudice in the midst of society<sup>10</sup>.

### **Emotional changes caused after ostomy**

The person when he is ostomized faces a path full of changes, among them, it is possible to cite emotional change. Living with the collecting bag can generate conflicting feelings, difficulties and concerns when dealing with this new reality.

The emotional phase of denial is accompanied by a decline in self-esteem, leading to self-mutilation and the feeling of exclusion of oneself and others. Feelings such as incompetence and lack of prestige can affect their social relationships, keeping them away from friends and family, creating a dangerous focus on themselves, leading to the occurrence of the development of disorders, for example, depression. The feeling of uselessness can also be present in the life

of the ostomized, because it is very common to meet people who in the first instant carry the idea that they no longer possess their productive capacity, causing a mixture of feelings, such as fear and sadness<sup>11</sup>.

The new condition of being ostomized often attributes on the person a non-adaptation, thus, the daily life is taken by a situation of denial, where the activities performed before the ostomy are affected, focusing on the stress that can be correlated with the presence of ostomy and the use of the collecting bag, which can cause an emotional disorder<sup>6</sup>.

Thus, it is evident that the ostomized being goes through numerous variations of feelings for having in its body a modification that will be part of its trajectory. The ostomized faces a new reality, with this, behaviors, reactions, perspectives of life and feelings are revealed to the fore, one can also cite the embarrassment on the part of each one, from the idea that they are different and no longer belong to groups as it was in the past<sup>12</sup>.

### **Changes in body image**

Body image is intimately linked to self-esteem, self-concept, self-image, body scheme and body concept, which are important components in the creation of your identity. Thus, the ostomized person may present a strange behavior of his body because he ends up feeling different after the surgical intervention, causing a lower confidence and a lower respect for himself, being very common that the shock caused by the immediate observation of his new condition occurs soon after the surgery, causing, often, a dislike<sup>11</sup>.

For ostomized people, the changes are related to the difficulty of living with the collecting bag and with the new reality, because now their body image gains a new meaning, becomes another and does not fit within the normality imposed by the population<sup>7,13</sup>.

The ostomized person begins to attract indiscreet looks and speculation on the part of family members and curious people. The scars from the surgery do not leave marks only on the body of those who go through the process, but also have a relationship with a history that goes beyond the surgical act. Ostomized people become hostages to the ideas that the people around them have about them, especially when the gaze is stigmatizing, merciless and begins to exclude from social life<sup>14</sup>.

The ostomized patient finds himself in a state of denial and simply goes on to no longer accept the body as it will be from now on, because in his head is not the ordinary body and seen as standard. For each place, the image changes in relation to the eyes of other people with whom relationships are established. The body is seen by the other people of their conviviality as strange and difficult to look at<sup>14</sup>.

Therefore, during the change process also happens the adaptation phase, the person submitted to ostomy undergoes a body alteration, and begins to see his body in another way when leaving the operating room, being necessary support and guidance to better adapt<sup>10</sup>.

### **Changes in eating habits**

In relation to food, it is remarkable to notice the changes that occurred after ostomy, for example, the decrease in fruit consumption so that intestinal transit

is not accelerated, the exclusion of meat from the food routine and the exclusion of groups that are important for a balanced diet. The realization of these changes ends up interfering in the nutritional status and affecting the psychological state and social interaction, causing a decay in their quality of life<sup>15</sup>.

Ostomized people have a fear of consuming food in public because they feel ashamed, which leads to a decrease in food pleasure and social exclusion or isolation<sup>16</sup>.

Food is an important requirement for a good quality of life, food consumed in the wrong way cause the emission of flatulences, which generates a problem resulting in social isolation, and consequently affects the quality of life of ostomized people<sup>17</sup>.

After the intervention, ostomized become more selective with regard to foods that will be consumed, many foods end up being left aside because they are no longer part of the new condition<sup>9</sup>.

Facing changes that have occurred in the diet, the ostomized start to avoid food on their own. This attitude exposes the need to carry out nutritional monitoring, so that the necessary guidelines for nutritional improvements can be<sup>18</sup>.

It is worth noting that exercise and eating can help maintain the balance that is often balanced with ostomy. The use of nutritional supplements acts as a useful tool in combating the possible nutritional failures caused by the inability to absorb nutrients<sup>13</sup>.

### **Nursing care to improve the quality of life of ostomized patients**

Understanding the self-esteem and quality of life related to the health of people with ostomy, and the changes they induce in their daily lives, provides subsidies to professionals, especially nurses who plan to participate in care.

The knowledge of nurses contributes in a certain way to the development of interventions in order to reduce the impact of ostomy, as well as the possibility of training professionals involved in nursing to improve care<sup>19</sup>.

It is noteworthy that the nursing team is responsible for exclusive actions in the preoperative, transoperative and postoperative periods, aiming at a good adaptation and the promotion of a better quality of life. It is important to highlight that it is necessary that nursing professionals recognize and understand the changes caused by the presence of ostomy, in order to provide qualified care and make the acceptance process easier<sup>20</sup>.

It is necessary interventions that involve information, such as, guiding the person on changes in the elimination of feces and flatulences, length of stay, guidance on the changes that will be made in what involves food, possible impacts on body image, changes in clothing, personal relationships, sexuality, routine activities and prepare the ostomized for their self-care<sup>21</sup>.

It is necessary for the nursing team to perform activities in all meetings with ostomized patients, so that there is the creation of a stimulus so that they always attend the consultations, for example, exchange of reports between patients so that experiences and experiences are exchanged<sup>16</sup>.

Health services and professionals can play a decisive role in the physical, social and psychological adaptation of the ostomized and their families, through adequate care planning, including support and health education, developing the individual's self-care capacity, thus contributing to significantly improve the

quality of life<sup>22</sup>.

Thus, nursing occupies an important and decisive role in the promotion of care to ostomized patients, through knowledge to develop autonomy, so that they may re-perform their daily activities from which they ended up moving away due to the limitations imposed by the new condition attributed under them. It is needed that professionals seek specializations on the subject so that they can offer quality care, based on communication, respect, taking into account the well-being of the patient and his family. In this sense, the care programs developed for the ostomized have a good contribution to the rehabilitation<sup>23</sup>.

### **Changes in work, recreational and lifestyle activities**

The presence of the stoma will cause profound changes that will alter the lifestyle of the ostomized and hinder its reintegration into society, because the voluntary excretion of fecal and gaseous content raises concerns about the choice of clothes and the odor<sup>24</sup>.

As a way to circumvent the situation, in search of disguising or hiding the presence of the collecting bag, ostomized people choose to wear loose, dark clothing to contain the body. They also often use large objects, such as a pouch, to place them on the stoma<sup>15</sup>.

People who have ostomy show fear when performing daily activities, especially when physical work is needed, and feel unsafe to leave the house due to possible complications related to the stoma and the collecting bag<sup>25</sup>.

It is possible to observe that ostomized people often have a social stigma and end up feeling different from society and the family, which ends up hindering their own process of adaptation, acceptance and causing the individual to be excluded<sup>18</sup>.

### **Sexuality**

Another change observed was the emergence of common problems related to sexual experience and sexual dysfunction, because as the body is remodeled, the ostomized being begins to feel powerless in the relationship with the partner, which can lead to family rupture. The sexual experience of those who make the use of the collecting bag is expressed through negative emotions such as pain, fear, worry, isolation, shame, desire control and low self-esteem. These emotions allow us to feel that they imply that their bodies are different from before, and reveal changes in sexual activity due to physical discomfort, embarrassment<sup>12</sup>.

For ostomized people, it can be difficult to resume sexual activity out of shame of the new image or disapproval of the partner. Sexual experience is psychologically and physically affected by surgery, where structures adjacent to the genitals can be damaged. Difficulties seem to be associated with insecurity, involuntary elimination of flatulences, fear of bolsa rupture, fear of rejection and odors<sup>26</sup>.

The effects on sexuality are affected even with age, which is accompanied by the triggering of changes such as decreased ehistines, decreased vaginal lubrication and changes in the type of ostomy<sup>26</sup>.

It was noticed that the physical transformation caused by the presence of the stoma affects the perception of the patient's own body, interferes in his sexual life and thus generates social isolation. The sex life of people with ostomy is

affected by being closely related to the concept of self-image and the consequent decline in self-esteem and perception of sexual attraction<sup>27</sup>.

The patient and his/her partner need information about their sexuality, because in this initial phase it can be configured as a period of crisis during which both the ostomized and their partner need to seek adaptation. Due to the state of psychological imbalance, this moment can be configured in dangerous crises, aroused when the individual is in a situation that he considers threatening<sup>27</sup>.

## **Quality of Life**

The quality of life of a person with ostomy is closely related to the ability to maintain the autonomous performance of daily tasks and the strategies they adopt to adapt to these changes, from this their experiences begin to contribute to the rejection or acceptance of living with ostomy<sup>20,25</sup>.

The rehabilitation of ostomized patients aims to restore social activities and improve quality of life in the face of the effects that ostomy causes. The first step in the process is for the patient to accept the condition in which he/she is and understand that ostomy exists to protect his health. From there, it is necessary to take care of food and hygiene, so that improvements and the re-establishment of quality of life is achieved <sup>21</sup>.

## **Final Considerations**

Most ostomized patients experienced abrupt changes in their lifestyles, especially with regard to physical and emotional changes, changes in eating habits, clothing, daily activities, leisure, work, social and sexual relationships and quality of life.

Regarding the role of the nursing professional, the same is responsible for informing, welcoming and guiding the patient's family so that he is ready to help him or her. It is necessary to inform the family of the whole process that the person will go through, from the diagnosis to the treatment of the disease.

Care for ostomized patients should begin with indications and diagnoses in order to obtain a good recovery and minimize suffering. Nursing can be cited as the center for the development of self-care and recovery of people with ostomy.

Support and encouragement from the nursing team can help patients overcome feelings of hopelessness through psychological support to give them better support for coping with acceptance difficulties.

Therefore, the study sought a greater awareness about the needs of ostomized people during and after the use of the collection bag, so that nurses and family members give the necessary support, understanding the feelings that are aroused and how the situation affects the lives of each ostomized.

## **Aknowldgment**

This research was not granted to be done.

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