Quality of Life of Ostomates

Aditi Sinha

The quality of life (QOL) is of central concern in any evaluative research. Improved quality of life is probably the most desirable outcome of all health care policies (Farquhan M, 1995). Quality of life is defined as degree of satisfaction or dissatisfaction felt by people with various aspects of their lives (Abrama, 1973) it includes both conditions of life and the experiences of life (Cambell et al. 1976).

The individual with colostomy or deostomy undergoes a complex treatment with a wide range of adjustments affecting the individual's social and psychological functioning. Quality of life is an outcome measure worth considering for developing a holistic approach for measuring the impact of treatment to maximise the quality of life of the individual.

A person who is living with the dreadful duo of cancer & colostomy has to cope up with the emotional trauma of his new body image & the daily care of his stoma. In such a situation, the role of nurse as an emotional supporter and patient educator becomes especially important. Guidelines to help the patient to cope with stoma will help the health professionals to provide counselling.

A co-relational survey was undertaken to assess the quality of life of ostomates with selected factors in a selected hospital of Delhi to develop guidelines for the health professionals to improve the quality of life of ostomates.

The Author is Sister Grade-I, Type-II/ 15, AIIMS Flats, Masjid Moth, New Delhi-110 049

Objectives of the Study

The objectives of this study were to :

1. assess the quality of life of ostomates.
2. identify the factors associated with quality of life of ostomates.
3. seek relationship between selected factors and quality of life of ostomates.
4. develop guidelines for the health professionals to improve the quality of life of ostomates.

Methodology

The conceptual framework adopted for the study was based on Orem's Self Care Model. The research approach adopted for the study was correlational survey. The study was conducted on 50 ostomates from Surgical Oncology OPD of BRA Institute Rotary Cancer Hospital, AIBVtS. Purposive sampling technique was employed to select the sample subjects.

A structured interview schedule was developed for data collection. Structured interview schedule consisted of 3 parts. Part -IA: dealt with demographic data; Part-1B: dealt with ostomy related information; Part- II: dealt with assessment of quality of life; Part- III: dealt with symptom-related quality of life. The tool was validated by nine experts from the field of surgical oncologists, enterostomal therapists, psychiatry etc.

Reliability of the tool was estabalished by using Cronbach Alpha formula and Alpha coefficient was found to be 0.74.

A guideline was prepared for health professionals to improve the quality of life of ostomates and was validated by 7 experts from various fields like surgical oncologists, enterostomal therapist, etc. The data collected was analysed using both descriptive and inferential statistics based on the objectives in terms of frequencies, percentage, mean, chi square, t test.

Major Findings of the Study

Sample characteristics

- 54 percent of ostomates were in the age group of 41-59 years.
- Most (70 percent) of ostomates were males; most of them 84 percent were married.
- Only 44 percent of ostomates were graduates.
- Fifty-four percent of ostomates were from the income group of below Rs. 5000 per month.
- Forty percent of ostomates were working in private jobs.
- Fourteen percent of ostomates were businessman and 12 percent were retired.
- Fifty-two percent of ostomates were with the

diagnosis of carectum.

- Majority (70 percent) of ostomates had colostomy.
- Majority (76 percent) of the ostomates had 0-10 years of duration of ostomy.
- Thirty-four percent of ostomates had a change in their clothing style because of ostomy.
- Majority (66 percent) of the ostomates had a change in their diet because of ostomy.
- Thirty-eight percent of ostomates had problem while travelling due to ostomy.
- Forty-eight percent of the ostomates were practicing irrigation to regulate their bowl.
- Forty percent of ostomates were using two-piece pouches.
- All (100 percent) of ostomates felt comfortable with their ostomy care.

QOL Scores of Ostomates

- The range of QOL score were from 50-150.
- Majority (44 percent) of ostomates were in the range of 117-150.
- The mean QOL score was 106.04, median 107.07 and mode 111.02
- The standard deviation of QOL score has 23.76.
- Thirty-six percent of the ostomates possessed poor QOL and with least (20 percent) possessed moderate QOL.

Relationship of QOL Scores with Selected Background Factors

- Ostomates in the age group of below 40 years had higher mean QOL scores (108.91) than ostomates above 40 years of age group (102.82). It is evident that as age increases QOL scores decreases.
- Female ostomates had higher mean QOL (118.33) than males, mean QOL scores (108.54).
- Unmarried ostomates mean QOL scores were higher (110.00) than married ostomates, mean QOL scores (106.42).
- Ostomates above secondary education had higher mean QOL scores (109.48) than below secondary education (98.80).
- Ostomates who were unemployed had higher mean QOL scores (117.21) than ostomates who were employed (109.10).
- There was a significant association between (i) age and QOL scores; (ii) sex and QOL scores; (iii) education and QOL scores; (iv) income and QOL scores; (v) occupation and QOL scores; and (vi) duration of surgery and QOL scores.
- There was no significant association between (i) type of ostomy and QOL Scores; (ii) marital status and QOL scores; and (iii) mean QOL score of colostomates with mean QOL score of ileostomates.

Conclusion

Majority of above 40 years of age group had ostomy. Majority of them were males; majority of them were married; and majority of them were educated. Majority of the ostomates had income below Rs. 5000 per month. Majority of the ostomates were working, had Ca rectum; majority of the ostomates had colostomy; and possessed best quality of life.

All of the ostomates felt comfortable with ostomy care. Further, there was a significant association between QOL score of ostomates with age, sex, duration of surgery, education, income and occupation; there was no significant association found in QOL scores of ostomates with marital status and type of ostomy. There was no significant difference found in QOL scores of ostomates with type of ostomy.

Implications

Findings of the present study have implications for Nursing Practice, Nursing Administration, Nursing Education and Nursing Research.

Nursing Practice

- Nurses are required to be accountable for the quality of patient care they deliver. To ensure quality nursing, nurse must aim to address on holistic care of the ostomates.
- The existing health services have emphasis on medical aspects of the care of ostomates but the psychological care is unfocused. A more holistic approach is required to improve health outcomes and increase QOL.
- Nurses have a great role to play in the physical, psychological, economical, social, familial and sexual aspects in the care of ostomates and to offer psychological support and empathy, to reinforce coping skills to promote an optimal quality of life. As she

spends ample time with ostomates, she has a great role to influence and educate all the aspects of care to the patients and their relatives.
- Nurses have accountability for health education of patients and relatives regarding care of wound, so they need to take responsibility of educating the patients and relatives regarding care of the wound or stoma.

Nursing Education
- The nursing education programme must be oriented towards primary health care approach, thus enabling prospective nurse to be well prepared to assist clients and community at large to focus/ maintain/ improve their QOL.
- Learning opportunities should be given to the Nursing students in encouraging clients to restore their QOL. Earlier the emphasis was only on curing the symptoms but now the emphasis is on maximising the QOL.
- Clinical nurse specialists and certified nurses with advanced practitioner skills should be prepared. They can serve as resource persons for patients, families, Nurses and Nursing students. They can work to determine appropriate care and resolve stoma related problems.
- Communication techniques and therapeutic communications should be given more emphasis in all subjects.

Nursing Administration
- The staff development programme for Nursing personnel in the clinical area is inadequate in the existing health care system. The nurse administrators should organise continuing education programme to update the knowledge of nurses so that they can assist the ostomates to improve their QOL.
- Nurse administrators in oncology unit should closely supervise the work of subordinates to ensure that none of the dimensions of QOL is neglected.
- Efforts should be made in preparing patient education material for home management of ostomates.

Nursing Research
- Research studies conducted by Indian nurses in this area are very few. It is time that all Nursing personnel join hands to provide scientifically tested materials or programmes towards assessment of QOL of ostomates and improve it.
- Research studies in this area will provide sound body of knowledge on which the nurses will be able to build their nursing care.
- Nursing research should be directed to further explore and update knowledge and attitude of Oncology unit nurses towards patients. This can enhance quality of life of these patients.

References

- Abdellah FG, Levine E, 1979. Better patient care through nursing research, New York: McMillon Publishing Company
- Black Joyce M, et al. 2002. Medical surgical nursing clinical management for positive outcomes, 6th edn, Philadelphia: WB Saunders Company
- Fawcett J, 1985. Analysis and evaluation of conceptual models in nursing, Philadelphia: F.A.Devis Co.
- Garrett MNE, 1981. Statistics in psychology and education, 10th edn, Bombay: Vakils Feffer and Simon Ltd.,
- Polit and Hungler, 1999. Nursing Research: Principals and Methods. Philadelphia: JB Lippincott Company
- Orems DE, 1980. Nursing concepts of practice, Newyork: Mcgraw Hill Book Company
- Breckman Brigid, 1981. Stoma care - A guide for nurses, doctors and other health care workers, England: Bea Consfield Publishers
- Grubb and Vukovitch, 1977. Care of ostomy patients, 2nd edn, Saint Louis: C.V. Mosby Company
- Miaskowski, Christine and Buchsel Patricia, 1999. Oncology nursing - Assessment and clinical care, 1st edn, Saint Louis: Mosby Company
- Antai Otong, Deborah, 2003. Psychiatric nursing; Biological and behavioral concepts, Australia: Thompson Company
- Barry DP, 1996. Psychosocial nursing, 3rd edn, Philadelphia: Lippincott Company