

ASSOCIATIONS BETWEEN FINANCIAL RESPONSIBILITY FOR OSTOMY POUCHING SYSTEMS, POUCHING SYSTEM CHANGE HABITS AND PERISTOMAL SKIN CONDITION

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Introduction

Irritation of the peristomal skin is a significant concern for ostomates, and factors affecting its occurrence are of interest to WOC Nurses. This retrospective study identifies relationships between financial responsibility for pouching systems and change habits, and between pouching system change habits and peristomal skin condition.

Methodology

Data source:

Ostomy Comprehensive Health and Life Assessment (N = 1507)

Subset (n = 1256) includes:

Single colostomy, ileostomy or urostomy stoma

Eighteen years of age or older

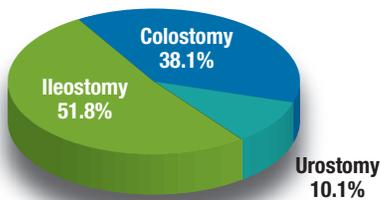
Indicated that cost of ostomy pouching systems were either:

- Paid entirely by user
- Paid partially by insurance
- Paid entirely by insurance

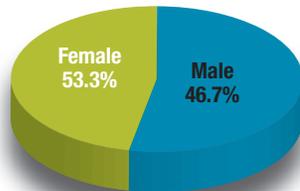
Profile

The sample includes 1256 people with ostomies between the ages of 19 and 90 reporting a median of 70 months since surgery. An overview of other characteristics is shown in the accompanying graphs.

Stoma Type



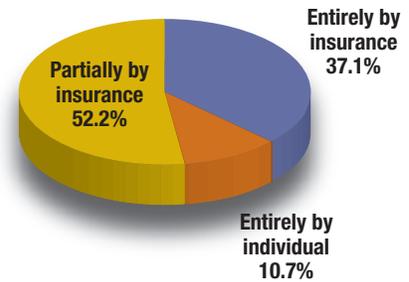
Gender



Financial Responsibility

Participants were asked to indicate whether the cost of ostomy pouching systems was paid entirely by them, partially paid by insurance, entirely paid by insurance or "Other." Participants responding "Other" (n = 34) were not included in this analysis.

Financial Responsibility

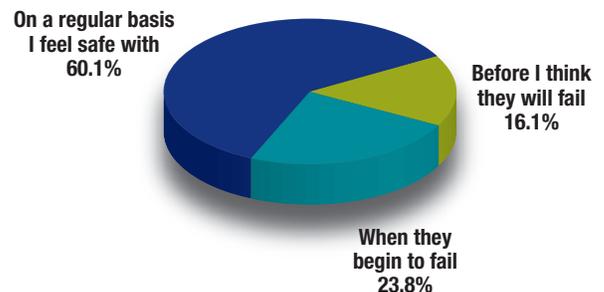


Pouch/Barrier Change Habit

Participants were asked to indicate whether they normally change pouches/barriers, "when they begin to fail (leak, odor, feel loose, irritate skin, etc.)," "before I think they will fail," or "on a regular basis that I feel safe with."

Pouch/Barrier Change Habit

"Normally I change pouching systems"

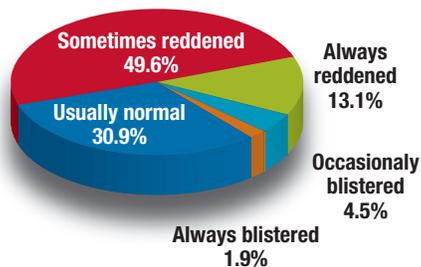


Peristomal Skin Condition

Participants were asked to choose a response to describe the condition of the skin around their stoma. For this analysis, each response was given the rank shown below:

- Usually normal appearing without any irritation or skin problems (rank = 1)
- Sometimes reddened or irritated by stomal discharge or adhesives (rank = 2)
- Always reddened or irritated by stomal discharge or adhesives (rank = 3)
- Occasionally blistered or damaged (rank = 4)
- Always blistered or damaged (rank = 5)

Peristomal Skin Condition



Results

Participants paying the entire cost of their ostomy pouching systems were more likely than those receiving at least partial payment by insurance to report changing pouches/barriers only when they begin to fail (Chi-square, $p < .0001$, Figure 1). In addition, compared to participants who reported changing pouches/barriers before they are expected to fail or on a regular basis they are comfortable with, those who reported changing pouches/barriers only when they begin to fail also reported higher levels of peristomal skin irritation on a five-point ordinal scale (Wilcoxon rank-sum, $p < .0001$, Figure 2).

Conclusions

The data suggest that changing an ostomy pouch/barrier before it begins to fail may be associated with lower levels of peristomal skin irritation, and those who receive financial assistance for their ostomy pouching systems may be more likely to follow such a regimen. While the data do not support a direct causal relationship between financial responsibility and skin irritation, they may provide the justification for a prospective study of relationships between reimbursement policies, patient financial concerns and patient outcomes.

Figure 1

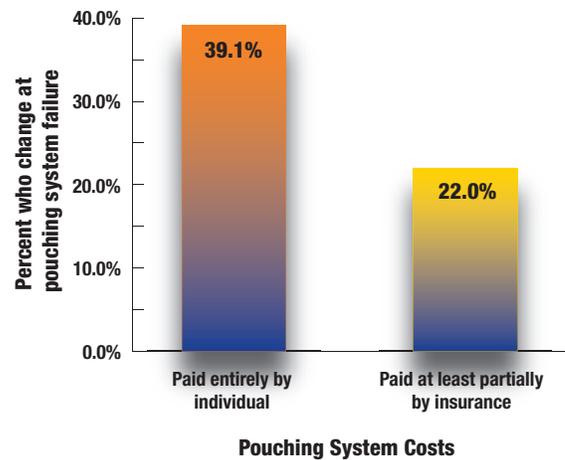
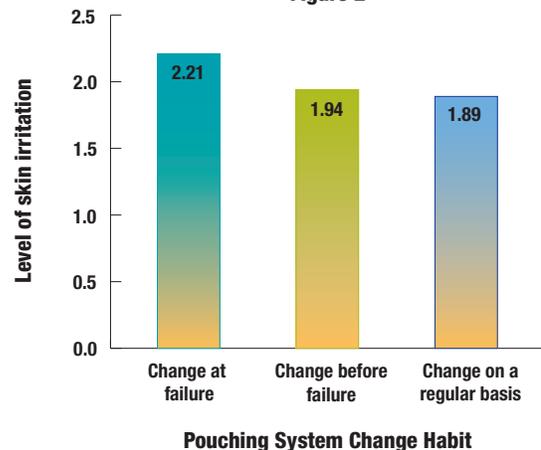


Figure 2



As Presented at

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FINANCIAL ASSISTANCE/DISCLOSURE

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