



- The DialogueStudy -
Results from The Netherlands & Beyond...

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*“Goedemiddag,
collega stomaverpleegkundigen”*



Keukenhof

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Agenda

- Introduction
- Rationale for the DialogueStudy
- Background –demographics, tools, methods
- Netherlands & Global Key Results
(physical & quality of life)
- Next Steps – “A Canadian Perspective”

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Thank you....

Partnerships which made this research possible:

- Patients
- Stoma Care Nurses
- Global Advisory Board members
- Industry – Coloplast



Adrienne van Galen Education Manager Coloplast Academy
Anne Steen Hansen International Senior Project Manager
Mette Kaad Jensen International Project Manager: DialogueProgramme

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- teaching hospital in London, Ontario, Canada
- merger of two nationally recognized hospitals - University Hospital and Victoria Hospital
- teaching, research, health-care facility - 700,000 inpatients, outpatients, emergency/trauma patients annually
- adult and paediatrics - 744 beds, 44 bassinets
- tertiary care and trauma centre



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Rationale for the DialogueStudy

□ R.I.C.H. □

- **R** □ **Real-Life Setting** - different people, different cultures
- **I** □ **Investigation** of relationships using *evidence-based tools*
(valuable data for our clinical practice)
- **C** □ **Challenges** - appliance leakage, peristomal skin disorders, QoL
- **H** □ **Healthy Peristomal Skin**
(appropriate ostomy appliance + stoma care nurse guidance)

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Why is the DialogueStudy important?

Peristomal skin conditions are very common and significantly impact quality of life¹⁻⁴

A need to demonstrate to people with an ostomy that they can improve/maintain their peristomal skin with the help of a SCN and by using an appropriate ostomy appliance

1. Ratliff CR et al. *J Wound Ostomy Continence Nurs* 2005;32:33-7
2. Herlufsen P et al. *Brit J Nursing* 2006;15:854-62.
3. Herlufsen P et al. Poster presented at WCET Conference, Hong Kong, China, July 3- 6 2006;
4. Jemec G et al., Poster presented at the ECET Conference in Salzburg, Austria, June 17-20, 2007

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How was this achieved...

Collaboration from around the world in developing the DialogueStudy...

- More than 3000 people with a stoma
- 500 Surgeons/Stoma Care Nurses collaborated from around the world
- 18 countries participated in the study
- In The Netherlands, 94 participants enrolled from 7 centres



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Assessment Tools

Ostomy Skin Tool

Objective, validated and structured way of monitoring and assessing peristomal skin

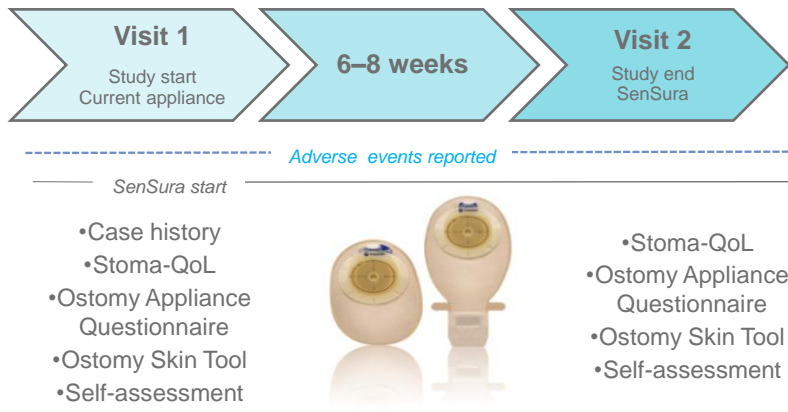


Stoma-QoL

Simple, validated questionnaire specifically designed for people with an ostomy

Statement	Strongly Dislike	Dislike	Like	Strongly Like
1. I would like to have a stoma.				
2. I would like to have a stoma.				
3. I would like to have a stoma.				
4. I would like to have a stoma.				
5. I would like to have a stoma.				
6. I would like to have a stoma.				
7. I would like to have a stoma.				
8. I would like to have a stoma.				
9. I would like to have a stoma.				
10. I would like to have a stoma.				
11. I would like to have a stoma.				
12. I would like to have a stoma.				
13. I would like to have a stoma.				
14. I would like to have a stoma.				
15. I would like to have a stoma.				
16. I would like to have a stoma.				
17. I would like to have a stoma.				
18. I would like to have a stoma.				
19. I would like to have a stoma.				
20. I would like to have a stoma.				

DialogueStudy Design Participant Involvement



The Netherlands & Global Pooled Data



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DialogueStudy Participants per Country

Country	Number of participants	Country	Number of participants	Total no. of participants 3,017 More than 500 health care professionals
USA	701	Japan	110	
France	522	Argentina	104	
Poland	261	Denmark	100	
Germany	166	Netherlands	94	
United Kingdom	140	Czech Republic	92	
Portugal	136	Iceland	73	
South Korea	132	Slovakia	61	
Spain	131	Canada	43	
Italy	115	Australia	36	

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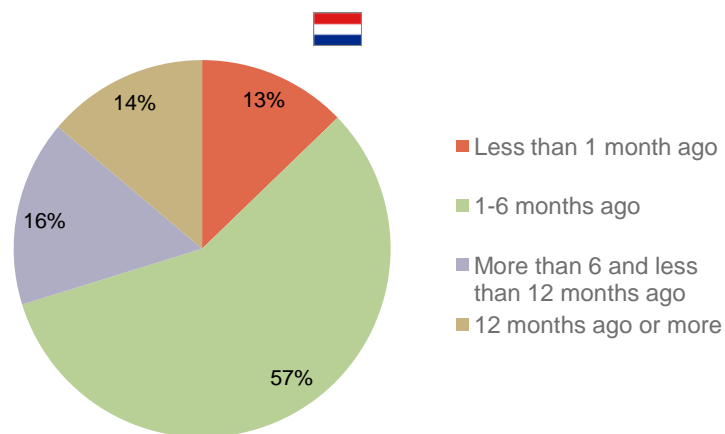
Participant Demographics

Parameter	 Participants	 Participants
	Mean age (years)	60.4 <i>Range 22-86</i>
Male	41.5%	49%
Female	58.5%	51%
Colostomy	56.4%	66.8%
Ileostomy	36.2%	31.6%
Urostomy	7.4%	1.5%

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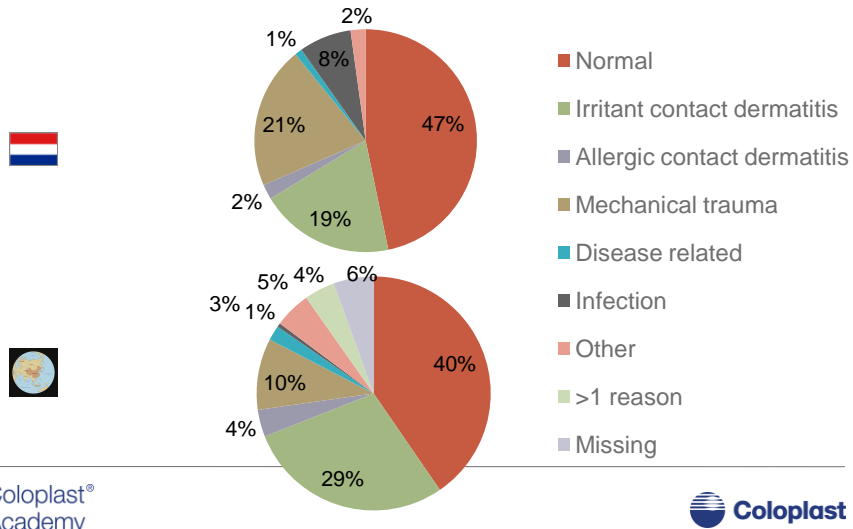
Frequency of Consultation with SCN



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Percentage of Peristomal Skin Disorders



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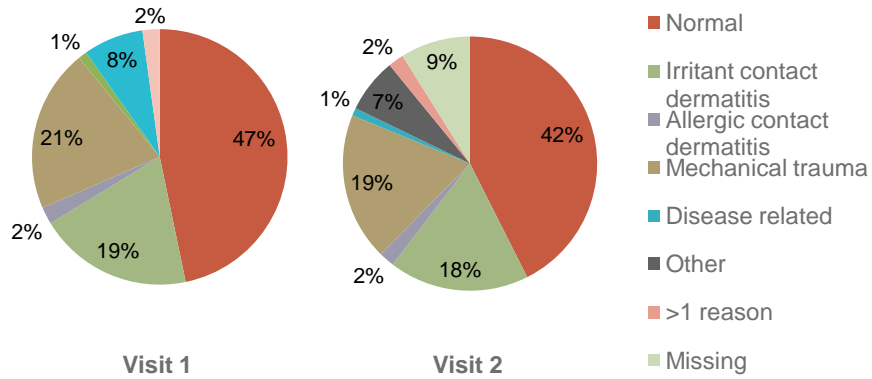
The combination of evidence-based nursing and SenSura® improved skin condition



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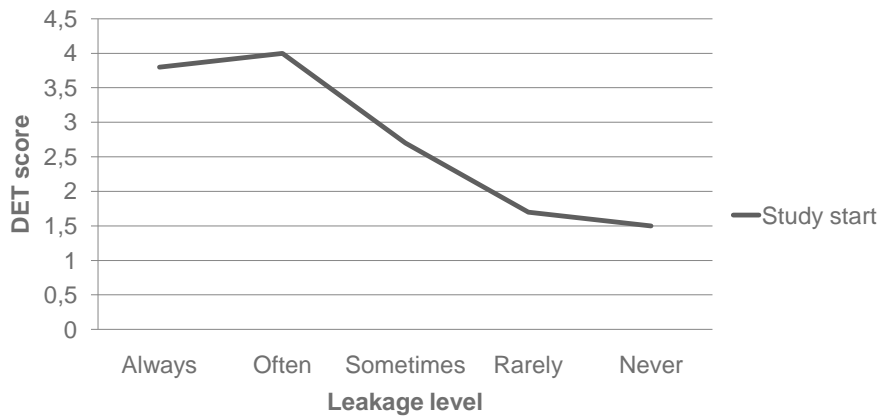
Skin disorders improved between study start and study end for the participants 



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The peristomal skin is affected by leakage... 




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Summary of Factors Affecting Peristomal Skin (start of the DialogueStudy)

 Significant effect	No effect
<ul style="list-style-type: none"> • Age • Time since surgery • Reason for ostomy creation • Type of ostomy (ileostomy vs. colostomy) • Leakage level • Temporary vs. permanent ostomy • Type of ostomy appliance (2-piece vs. 1-piece; convex vs. non convex) 	<ul style="list-style-type: none"> • Gender • Frequency of clinic visits prior to study start

Summary of Factors Affecting Improvement in Peristomal Skin (during the DialogueStudy)

 Significant effect*	No effect
<ul style="list-style-type: none"> • Severity of peristomal skin disorder at baseline • Time since surgery • Type of ostomy 	<ul style="list-style-type: none"> • Stoma-QoL value at baseline • Reason for ostomy creation • Age • Gender • Frequency of clinic visit prior to study • Permanent vs. temporary ostomy • Ostomy appliance (1-piece vs. 2-piece)

*Statistically significant change from study start to study end

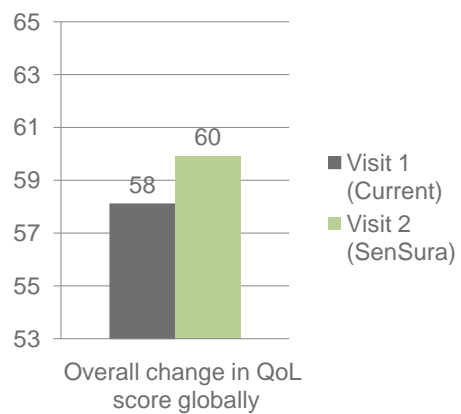
Global Pooled Quality of Life (QoL) Data



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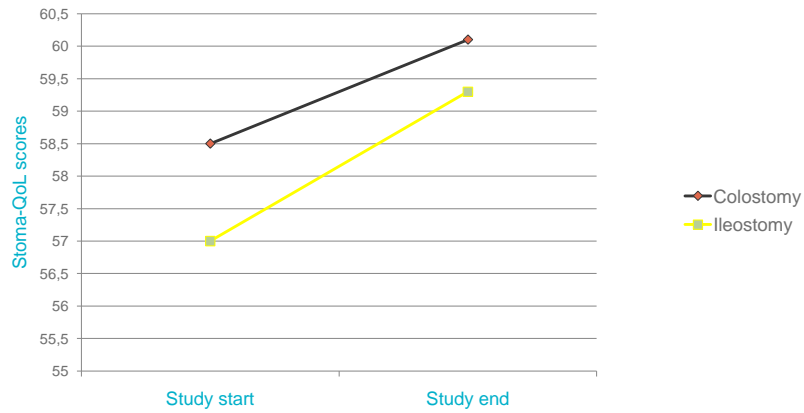
The overall QoL improved from study start to study end



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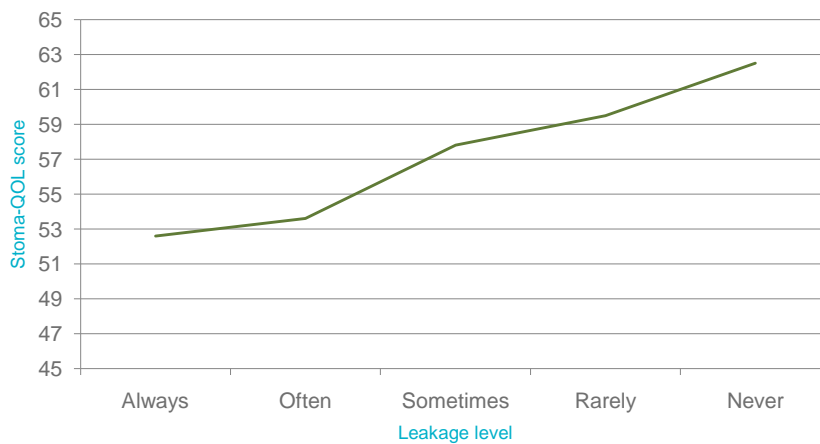
QoL improved for people with an ileostomy or a colostomy



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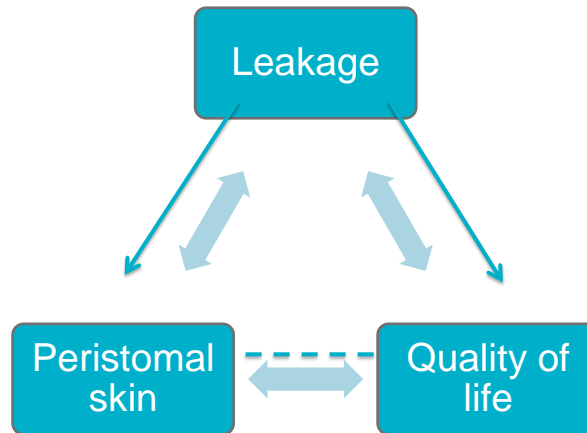
QoL is affected by leakage



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Leakage affects both QoL and the severity of the Peristomal Skin Disorder



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Summary of Factors Affecting QoL (start of the DialogueStudy)

 Significant effect	No effect
<ul style="list-style-type: none"> • Severity of peristomal skin disorder • Gender • The time since surgery • Years of age • Planned vs. unplanned • Leakage level • Reason for ostomy creation 	<ul style="list-style-type: none"> • Permanent vs. temporary ostomy • Type of ostomy • Frequency of clinic visits prior to study start • Ostomy appliance (1-piece vs 2-piece; convex vs. Non-convex) • Time since visit to stoma care nurse

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Summary of Factors Affecting the Improvement in QoL (during the DialogueStudy)

 Significant effect*	No effect	
<ul style="list-style-type: none"> • Male vs. Female • Leakage level • Stoma-QoL score at Visit 1 	<ul style="list-style-type: none"> • The time since surgery • Years of age • Type of ostomy • Permanent vs. temporary ostomy 	<ul style="list-style-type: none"> • Severity of peristomal skin disorder at baseline • Frequency of clinic visits prior to study start

*Statistically significant change in QoL from study start to study end

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Next Steps – “A Canadian Perspective”

- Dissemination of DialogueStudy data
- Best Practice Guidelines “Ostomy Care & Management”
 - supports the use of a validated instrument for assessing peristomal skin

Acute care + community care



Staff training using the OST and AIM Guide

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Canada

Danke u wel.....



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References

List is available upon request