



Original article

Marital interactions in partners of ostomized patients[☆]



Ana Lúcia da Silva^{a,*}, Andréa Mathes Faustino^a, João Batista Sousa^b,
André Luiz Vianna^b, Paulo Gonçalves Oliveira^b

^a Department of Nursing, Universidade de Brasília (UnB), Brasília, DF, Brazil

^b Department of Surgery, Universidade de Brasília (UnB), Brasília, DF, Brazil

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ABSTRACT

Objectives: The present study aimed to investigate the sociodemographic profile of ostomized patients, describe their daily marital interactions, and identify these individuals' health demands.

Method: The present investigation consisted of a descriptive and quantitative study of partners of ostomized patients.

Results: A total of 36 individuals were interviewed, of whom 24 (66.7%) were female. Participants were aged between 31 and 70 years, and reported an annual family income of \$20,000. The present study found that the stoma surgery did not lead to significant changes in marital relationships. The study participants appeared to be significantly invested in overcoming the barriers imposed by their partner's condition. Respondents also demonstrated dedication, sensitivity and a willingness to help their partner adapt to physiological and gastrointestinal changes.

Conclusion: The changes following stoma surgery also have an impact on patients' partners, and both individuals must work together to keep it a secret if necessary. The present results made it clear that respondents empathized with their partners, and agreed that undergoing stoma surgery is a difficult ordeal.

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O cotidiano da convivência conjugal com a pessoa estomizada

RESUMO

Objetivos: Conhecer o perfil sócio-demográfico dos participantes, descrever o modo de convivência no cotidiano na condição de parceiro do estomizado e identificar a demanda de cuidados no contexto familiar.

Métodos: Trata-se de estudo descritivo, de natureza quantitativa, realizado com parceiros de estomizados.

Palavras-chave:

Cônjuges

Estomia

Relações Familiares

Adaptação psicológica

[☆] This study was conducted in the Graduate Program of Medical Sciences, School of Medicine, University of Brasilia, Brasília, DF, Brazil.

* Corresponding author.

E-mail: analucia@unb.br, formato@scientific.com.br (A.L. da Silva).

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Resultados: Foram realizadas 36 entrevistas com parceiros de estomizados, sendo 24 (66,7%) do sexo feminino. A idade dos entrevistados variou entre 31 a 70 anos. A renda familiar mensal da maioria dos entrevistados equivale cerca de 20.000 dólares anuais. As alterações no cotidiano na vida do casal não geraram mudanças significativas nos seus hábitos em consequência da estomia. Os entrevistados procuram superar os obstáculos do enfrentamento da nova condição do seu parceiro estomizado e demonstram dedicação, apoio e acompanhamento, no tocante a adaptação das modificações fisiológicas e gastrointestinais. **Conclusão:** As mudanças impostas ao estomizado é uma situação partilhada entre o casal com o objetivo de manter a condição em sigilo. Ficou claro e explícito na pesquisa que, na interpretação do entrevistado, a condição de estomizado é muito difícil.

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Introduction

In recent decades, an increasing number of studies have been conducted on patients who underwent stoma creation. Most of these studies have investigated stoma care, skin protection and types of ostomy equipment. Although the emotional, familial and social aspects of the relationship between ostomized individuals and their partners may also have an important impact on patient health, this line of research has been neglected in the literature.

Marital relationships are distinct from other social relations in that they require both emotional and physical involvement between two individuals. The stability of marital relationships has been suggested to be one of the strongest determinants of quality of life in couples. Studies of family dynamics have suggested that marital satisfaction and stability must be more comprehensively studied, especially through investigations of the daily frequency of positive and negative interactions between couples.¹

A recent review of urinary incontinence in men highlighted the psychological suffering of the patients' partners due to the emotional, sexual and social impact of the men's condition.² Similarly, the changes experienced by patients after an ostomy surgery may also have an impact on their partner's behavior. Given their proximity to the patient, the partner is often involved in daily stoma care, and may at times take on the role of a caregiver.

Individuals with intestinal stoma often report difficulties in interacting with their partner in a natural way, as they believe that it may be difficult for the partner to be physically close to them, to participate in the same social activities, and to eat with them at family meals. Due to loss of sphincter control, the involuntary release of gas, feces and unpleasant odors is a common occurrence in these patients, and may consist of an additional barrier to social interactions.³ In light of this situation, it is important to quantitatively assess the behavior of ostomized patients and their partners, so as to better comprehend their social reality and to know how best to assist these individuals. Therefore, the present study was guided by the following research questions: How does intestinal ostomy surgery affect the patient's and their partner's life? What is the impact of such a procedure on daily family and social activities?

Based on these questions, the present study aimed to investigate the sociodemographic profile of ostomy patients and to describe their relationships with their partners.

Method

This was a descriptive, quantitative study, conducted on partners of ostomized patients. The present investigation was approved by the Human Research Ethics Committee of the University of Brasilia School of Medicine, under protocol number (CEP-FM 011/2009).

Data was collected from the treatment registry of the Stoma Care Unit of the State Department of Health (SESDF). As of October 2011, a total of 685 adult and pediatric ostomized patients were registered at the Outpatient Health Service.

In the present study, the spouses or partners of ostomized patients were interviewed, regardless of their legal marital status. The following inclusion criteria were used: agreement to participate in the study and ability to provide written informed consent; age 18 or over at the time of the study; fluency in written and spoken Portuguese; having lived with the ostomized patient for at least one year before the stoma procedure, and continuing to live with them afterwards.

Data were collected between October 2011 and May 2012, using a questionnaire designed specifically for use in the present study. The instrument was developed based on the present authors' extensive clinical experience with ostomized patients, with whom the authors have been closely involved for over 20 years.

The questionnaire was analyzed by five specialist judges with experience in questionnaire development, linguistics and health research. The following aspects were assessed by the judges: semantic equivalence; ability to assess the intended measure; relevance to the goals of the study. The questionnaire was modified according to the judges' recommendations until it was deemed adequate for use in the study.

The instrument was then administered to five partners of ostomized patients so as to assess the comprehensibility, clarity and unambiguity of items in the questionnaire. Since no problems with the questionnaire were identified and the instrument was not modified any further, these five participants were included in the final sample.

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