Elective colostomy following spinal cord injury

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- One of 12 UK regional spinal injury centres
- Specialist multidisciplinary team services
- Inpatient rehab and outpatient follow up
Effect of spinal injury on the bowel

Neurogenic bowel dysfunction:

- slower colonic transit
- no awareness of full rectum
- lack of muscle control to pass stool

To open bowels digital stimulation or manual evacuation performed.
Bowel care complications

- Autonomic Dysreflexia (AD)
- Faecal impaction
- Constipation (30-46%)
- Incontinence (75%)
- Haemorrhoids (23%)

- Rectal prolapse
- Anal fissure
- Reduced quality of life (32%)
- Lack of independence
- Feelings of degradation

Elective colostomy may be offered as a last resort when all else has been tried and failed.
Colostomy following SCI

- Less than 2% of patients
- Usually performed years after SCI
- High levels of satisfaction
- Wish they had it earlier
- Reduced time on bowel care
- Greater independence
A new phenomenon

Patients with SCI choosing a colostomy in SDH

"Early" colostomy
"Later" colostomy
Our questions

Why is it being requested earlier?
- Early bowel complications
- Feelings of embarrassment/degradation
- To make bowel care easier
- Prior knowledge
- Health professional advice
- Other patients

What are the longer term outcomes?
- Physical
- Psychological
The research

- Masters by Research
- Identified patient numbers
- Interviews with early and later groups
- Information from patient notes
- Develop a reliable and valid questionnaire for future testing
Progress so far
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