



RESEARCH ARTICLE

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## THE URINARY DERIVATION IN REFERRAL UNIT: A CASE REPORT

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### ABSTRACT

This study aims to present a case report of a bypass, in which the care provided to a person with ostomy and the importance of holistic care. This case report was conducted at the Reference Service for the Care of People with Ostomy, in Belém, Pará, Brazil. Data were collected during the nursing consultation, consisting of interview, physical examination, ostomy evaluation and peristomal skin. Nursing care: cleansing with skin cleanser. There was a need for guidance from the nurse to the user and family members in the adaptation process to reduce ostomy complications and improve their quality of life.

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### INTRODUCTION

Urinary derivation consists of an opening in the skin through a surgical intervention that allows urine to flow from the kidneys, ureters or bladder.

Among the various types, the most common is Bricker's urostomy, in which a small intestine fragment is used, which is externalized in the skin and to this fragment are attached the ureters (SENA et al., 2014). Among the main complications or difficulties in management, the impact of the ostomy presence

is highlighted, due to the rupture with its usual elimination pattern and, consequently, alteration in life perspective due to the stoma associated with the collecting bag. Thus, changes will occur in the elimination pattern, eating habits, hygiene and the use of collecting equipment. These have a direct relation in the self-esteem of people with an ostomy, compromise sexuality and lead to social isolation; In other words, these changes are manifested by physical, emotional, social and family maladjustments that interfere not only with rehabilitation but also with the quality of life (SILVA *et al.*, 2014). Regarding management, the main complications are an inadequate adaptation of the ostomy plate due to the inadequate location of the ostomy in the abdominal wall, peristomal dermatitis, ischemic necrosis, retraction, prolapse, stenosis, peristomal fistula, peristomal hernia, peristomal abscess, and cancer (Federação Gaucha de Estomizados, 2019). Given this, nurses must know the needs of people with ostomy based on Nursing Care Systematization that includes the elaboration of nursing diagnoses, expected results, and interventions to achieve better resolution and quality of care (SOUZA *et al.*, 2016). This study aims to present a case report of a urinary bypass, in which the care provided to a person with an ostomy and the importance of holistic care of the service were identified to meet their basic human needs by considering the three levels of classification: psychobiological, psychosocial and psycho-spiritual (HORTA, 2011).

## MATERIALS AND METHODS

This is a descriptive study, case report, conducted at the Reference Service for People with Ostomy Care in the city of Belém, Pará, Brazil. Data were collected during the Nursing Consultation, consisting of an interview, a physical examination, an evaluation of the ostomy and peristomal skin. The research participant signed the Informed Consent Form and Image Registration Term. After data collection, outpatient nursing diagnoses and management were determined. The Ethics and Human Research Committee of the Universidade Federal do Pará under opinion No. 525.319 approved this study.

## RESULTS AND DISCUSSION

On March 6, 2014, an elderly woman was received at the service to register her husband who has a urinary diversion, she reported being responsible for direct full-time care to him. It was observed that the wife was tiredness, emotionally unstable, crying during the service. She was welcomed by the team, received 1 two-piece system kit, 38mm flange adhesive base, and basic ostomy care guidelines and should return within 24 hours for the Nursing Consultation. On March 7, 2014, she returned with her husband, a 70-year-old man, who has a surgical site with a skin suture, a laminar drain insertion site protected with an adhesive plate and an occlusive dressing. Careful removal of the collector equipment for clinical nursing evaluation showed dermatitis and skin fold. This is probably a risk factor for effluent leakage characterizing an Impaired Skin Integrity Nursing Diagnosis. Performed cleaning with soap and water of the ostomy and peristomal skin; application of the cream, hydrocolloid powder, filling with protective paste on the irregularities of the skin of the abdomen and applying the two-piece system equipment, 38 mm flange adhesive base, drainable transparent pouch. Guided user and wife about the

use of the bed bag, given 10 kits 38 mm (URO) and a belt. Forwarded to psychology and nutrition. On March 13, 2014, he returned accompanied by his wife for follow-up Nursing Consultation. Reports that since the last exchange held on March 7, 2014, the equipment has had the durability of two days, being re

placed on March 9, 2014. On the night of March 12, 2014, leakage was evidenced and his wife applied an adhesive to seal the leak until the opening hours of this service. The old man reports improved sleep at night, satisfactory nutrition, satisfaction regarding the comfort and durability of the equipment. His wife reported having managed to change the equipment and was congratulated by the group. Physical Exam: Walks with the help of his wife. Evaluation of the ostomy: equipment in use and gauze cover were removed at the EF drainage site and the surgical site in the midline of the abdomen with cutaneous points. Urostomy, functioning clear urine, bright red mucosa, diameter 20 mm in QID of the abdomen, skin fold causing leakage of effluent. Peristomal skin with irritant contact dermatitis.

Nursing Diagnosis Harmed Skin Integrity. Nursing care: cleaning with a skin cleanser, applying barrier cream, after its absorption applied the crushing technique, applying the paste to fill skin irregularities and then adapting equipment 2 pieces with cutaneous barrier for a urostomy. Makes use of the support belt. He was apprehensive during the procedure due to irritation around the ostomy. Provided two kits and nine protective film sachets, scheduled for return on April 11, 2014. Based on this information, it was observed the emotional fragility of the wife when faced with the difficulties caused by changes in family lifestyle because of the urostomy. From the first consultation, the emotional support of the nurse is essential in the rehabilitation process and needs to be performed to motivate the patient and family to adapt to the new routine. For this, the user needs to feel the respect, encouragement, attention, and safety of the professional and family so that they do not have the feelings of embarrassment, stress, discrimination, discomfort and low self-esteem potentiated by presenting the urostomy (MARQUES *et al.*, 2016). Thus, it is noteworthy that the family constitutes supportive support to promote the improvement of self-esteem and reintegration of the person with an ostomy in society. Therefore, it is also subject to physical and emotional distress and should have, as well as the patient, emotional and psychological accompaniment to promote their own health and perform care to the person with an ostomy. Thus, the affective bond that exists between family members and the person with an ostomy can negatively influence the emotional factor, subjecting them to deprivations and changes in their lifestyle and, consequently, influencing their quality of life (RAMOS *et al.*, 2013). It is noted from the case evaluation that the patient's spouse was directly involved in the treatment process, knowing the complications in the husband's ostomy, contributed to the treatment not only in direct care, as well as providing important information to health professionals. service on the main difficulties suffered, enabling more effective assistance (MERANDY *et al.*, 2017). In general, the spouse is inserted as a fundamental component in the adaptive process of the person with an ostomy since numerous physical and psychological changes occur after the procedure. From living together, family members can provide important

information, such as habits and preferences, to help formulate and execute a therapeutic plan (WILD *et al.*, 2016). Thus, the reported case expresses the importance of nursing care related to the guidelines of proper handling of protective and safety collection and adjuvant equipment for ostomy with interface in the use of technologies in each nursing consultation in the outpatient clinic, in the office, at home, in the company, at school, in recreational clubs and in all spaces that require professional care. The contribution of nurses by guiding handling and care with equipment and encouraging family integration in care, which contributes to the quality of life by reducing physical, mental and social disorders, is important. Regardless of the subjectivity of each person with ostomy and family, health education stands out as a way to promote quality of life, especially when it comes to self-care. Self-care should be encouraged by the professional, enabling the individual's autonomy and participation in society (BRAZ *et al.*, 2017). The guidance provided by the nurse was effective as it enabled the ability of the master's wife with an ostomy to handle the equipment and care with the urostomy. Therefore, the patient, in turn, reported improvement in the quality of life and comfort in adapting his activities.

### Conclusion

The nurse's orientation to users and their families regarding self-care with the ostomy is an important part of the extremely differentiated adaptation process. This case report points out that the orientation of the nurse to the user and family members is fundamental in the adaptation process. Besides performing the care and management to the stoma, it also teaches the person with an ostomy and their families to perform the necessary care, thus attenuating complications and improving the quality of life. It was also noted the fundamental importance of the nursing care systematization process, through the evaluation of the patient's clinical condition, the identified diagnoses, the elaboration and implementation of care and the user's evolution annotation, it was possible to meet the needs of this individual.

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