

Case Study 1: Patient with Enterocutaneous Fistula

Gender: Male

Age: 83

Location: ZGT Hospital, Almelo, The Netherlands

Date of Study: January 2021



Initial Treatment Regime

- Patient presented with a high output enterocutaneous fistula with associated skin folds below the fistula. The skin around the fistula is fragile and red in colour.
- Patient who is being treated with chemotherapy is experiencing 4-5 leaks per day on average.
- Initial treatment regime is the use of a conventional ostomy seal along with a 1-piece Welland convex ileostomy pouch.



Revised Treatment Regime

- Substitute the regular seal with an Ostoform Seal.
- The non-absorbent Ostoform FLOWASSIST spout fits well into the Welland ileostomy pouch. This results in protecting the Seal from erosion while better directing the fistula output into the Welland convex ileostomy pouch.





Results

- 3 days post change of treatment regime.
- No leaks of the fistula output noted after the change of treatment regime.
- Patients skin is healing well.

1. Kelleher K et al., 2019. A Single-arm Practical Application Assessment of User Experience and Peristomal Skin Condition Among Persons with an Ileostomy. **Wound Management & Prevention.**, **65(1)** pp. 14-19

2. Hunt R et al., 2018. Changes in Peristomal Skin Condition and User Experience of a Novel Ostomy Barrier Ring with Assisted Flow. **J Wound Ostomy Continence Nurse.**, **45(5)** pp. 444-448

3. Quigley et al., 2021. Evaluation of a Novel Ostomy Barrier Ring with Assisted Flow for Individuals with an Ileostomy. **Advances in Skin & Wound Care**, **34** pp. 1-5