



Letter to Editor

Consensus on the Prevention of Peristomal Skin Disorders

Burlando Martina^{1*}, Guerra Eliana², Angileri Luisa³, Ferrucci Silvia Mariel³, Caroppo Francesca⁴, Cioni Margherita⁵, Belloni Fortina Anna⁴, Parodi Aurora¹, Maculotti Danila⁶

¹IRCCS San Martino Polyclinic Hospital, Di.S.Sal. Section of Dermatology, Largo Rosanna Benzi 10, Genoa, Italy

²Ambulatorio riabilitazione enterostomale, ASST Spedali Civili Brescia, Italy

³Unit of Dermatology, Foundation IRCCS Ca' Granda Ospedale Maggiore Policlinico, Milan, Italy

⁴Unit of Dermatology, Department of Medicine DIMED, University of Padua, 35128 Padua, Italy

⁵St Mary's Hospital, Imperial College NHS Trust, London, UK

⁶Ambulatorio Stomizzati, Istituto Ospedaliero Fondazione Poliambulanza, Brescia, Italy

***Corresponding author:** Martina Burlando, IRCCS San Martino Polyclinic Hospital, Di.S.Sal. Section of Dermatology, Largo Rosanna Benzi 10, Genoa, Italy

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Dear Editor,

The role of professional nurses with a specific training in peristomal skin lesions is well-recognized [1] as well as their collaboration with dermatologists for the management of patients with peristomal skin lesions. For this reason, an Italian panel of stoma therapists (n=20) and dermatologists (n=4) with documented expertise in stoma care was convened for a consensus meeting held in Milan, Italy, on 11 November 2021. The objective of the meeting was to develop a series of statements for preventing stoma damage. The method used to achieve consensus was the "nominal group technique" [2]. Thirty-one statements were developed and full consensus was reached for 29/31 statements, representing the opinion of the panel.

Briefly, the 29 items that gained full consensus regarded patients' characteristics (age, sex, weight, BMI, presence of caregiver, cognitive impairment, physical limitations, phototype, comorbidities); patients' habits; previous or current therapies; type of ostomy (the abdominal profile, the presence of laparocoele, hernia or prolapse, surgical drawing); stoma care (type of device, type of accessories, products used for cleansing, timing of the device change and its correct execution); follow-up and presence of the stoma therapist during the entire course of treatment.

The 2 items that were discarded regarded, respectively, patients' level of education and usefulness of haematochemical examinations.

This is the first time, to our knowledge, that stoma nurses and dermatologists have developed a consensual list of statements for prevention of peristomal complications. The upcoming goals of the panel will be: a) to apply these items in clinical practice; b) to observe/register the rate of peristomal complications; c) to create a joint risk chart. The latter could help prevent peristomal complications in order to improve quality of life in patients with peristomal skin lesions [3].

References

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