



Letter to the Editor

Dear Editor,

I thank Amy Sappington, MSN, APRN, ACNP-BC, and Dr. Izi Obokhare, MD, FACS, FICS, for their original article in the West Texas Journal of Medicine on the breakthroughs and barriers to stoma education.¹ The outcomes of the study presented key information regarding the successful post-operative phase for patients who are home- or facility-bound after abdominal surgery requiring an ostomy. The study touches on multiple categories that factor into the ostomate's success in the postoperative phase and throughout their lifespan. This research emphasizes areas of care that show weaknesses and room for improvement that we, as healthcare professionals, can provide for our patients.

The study discusses the variability of ostomy supplies, the ability to obtain them, and the importance of interdisciplinary team involvement. It stresses the necessity of comprehensive discharge planning, especially for those with limited access to healthcare due to location or financial concerns. Finally, the article offers future considerations regarding counseling and assistance in the form of peer support groups. These are all wonderful considerations, yet I urge us to look further to expand our horizons of care for our ostomate patient population.

The Ostomy and Continent Diversion Patient Bill of Rights² is a tool for patient self-advocacy, urging patients to speak up and be heard. It states that ostomates should have resources for specific patient-centered situations, including supplies, patient health insurance circumstances, and access to healthcare professionals knowledgeable about each individual patient's needs in all settings. It also underscores the need for

ongoing emotional support, which is a huge aspect of living this life.

In healthcare, we do an excellent job of discussing patient care and the need to address patient-specific challenges but have an exceedingly difficult time following effective implementation. Instead, I plead that we, as a profession whose job is to provide the ultimate service to those around us, truly take the time and energy required to begin to put these implementations into action. Perhaps in further development, we could form a standardized way of care for all patients receiving ostomies. I can, in fact, speak of the importance of such care because I am a nurse and an ostomate myself. I have had to find my own way countless times without the support or information supplied to me during my hospital stay and beyond. As such, my personal goal within the next year or two is to initiate an ostomy support group in my local community, in conjunction with the local trauma center where I work. At the support group, I plan on incorporating social support for patients, but also resources such as ostomy supplies and physician input and education, including an ability for networking amongst fellow ostomates to share information, suggestions, and the emotional support of knowing they aren't alone.

I feel very passionately about being able to provide this immensely needed help to those who are just like me and who struggle needlessly to carry on a "normal" life. It would seem to me that if I can make it

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happen, then so many other healthcare professionals can also make it happen by simply starting to think about what they would appreciate being offered if they were in a similar position themselves.

Sincerely,
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