

Management Of A Complex Enterocutaneous Fistula In Palliative Patient

Nisara Jeenyoo MNA.,ET

Siriraj Hospital, Mahidol University, Thailand

Patient nursing care in patient with enterocutaneous fistula is complex and challenging to health provider. ET nurse is coordination of care between multi-disciplinary team that maintenance of patient comfort, protect perifistula and control odor strategies.

Case Report

A 76 years old woman was diagnosed with Right psoas abscess with sepsis, had a history of bladder cancer and sigmoid involvement and she had received pelvic LN dissection on 2011 with radiation. Management of right psoas abscess was percutaneous drainage but it did not work that extended leakage and developed enterocutaneous fistula scar at midline and fistula to vagina (Enterovaginal fistula). Problem in case, she had two fistulas. Perifistula scar at midline had erosive skin lesion and sometime had hypergranulation. It is very difficult to management. Then she was much suffered relate to pain,itching , discomfort and affect to sleep from change dressing every 1-2 hours.

Intervention

The goal of management was to effectively collect effluent, treat and protect perifistula skin and decrease the frequency of dressing change and increase patient comfort.

Process of care on enterocutaneous fistula scar at midline

1. Cleansing with normal saline
2. Protected perifistula skin from effluent by barrier film.
Apply with skin barrier paste
3. Pouching with one-piece pouch for collect effluent.
4. Sometime cauterized hypergranulation with AgNO₃.

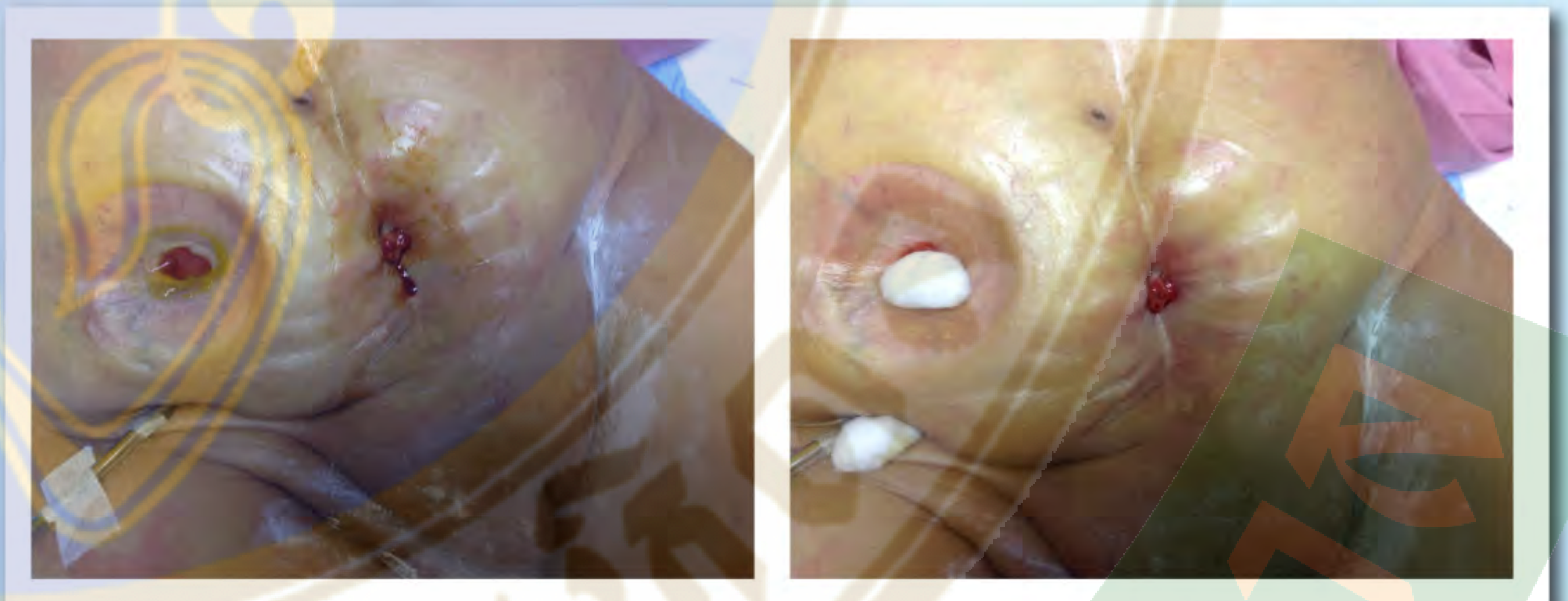


Process of care on Enterovaginal fistula.

1. Spray with Easi clearise (no-rinse cleanser spray) at perineum for clean.
2. Apply barrier cream and sanitary pad.

Result

About 1 week after intervention perifistula in two areas improved skin would substantially decrease the frequency of dressing change. The patient became comfortable and pain decreased.



Conclusion

The goal of management for complex enterocutaneous fistula in palliative patient included as following to protect perifistula, to keep effluent, accurate measurement of fluid balance, to control odors and to maintain the patient comfort and quality of life.

Reference

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