

when managing peristomal skin complications and hypergranulation

Case study submitted by
Marjon Gerbrands,
Stomal Care Nurse, Netherlands

Background

- 69 year old lady.
- 2017: Rectal tumour treated with chemotherapy and radiotherapy. Remission and referred to a "Wait and See" study.
- 2019: Reoccurrence of rectal cancer resulting in a colostomy being formed.

Problems Experienced

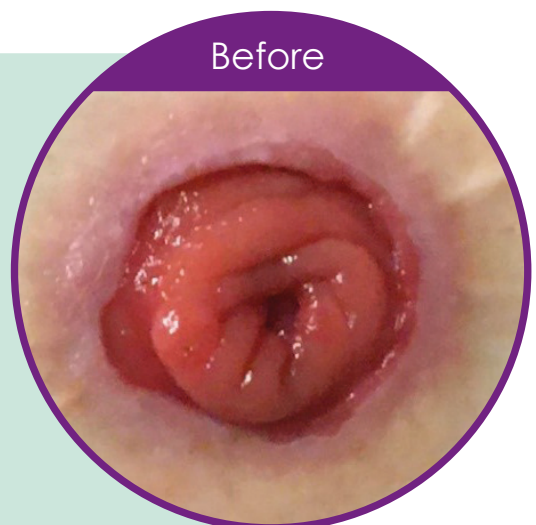
- From 2020, pain in stoma occurred without any visible abnormalities.
- Later in 2020 raised 'bumps' appeared at the mucocutaneous junction which appeared like superficial hypergranulation.
- Treatment with silver nitrate, Terracotril, Aldanex, Lidocaine, ostomy seals and Prontosan with no improvement
- 2021: Stoma refashioned but problems persisted and the **stoma retracted**.
- Very **painful superficial hypergranulation** reoccurred which was treated with silver nitrate. Although partially successful, painful skin remained.
- **Pouch changes were 2 - 3 times per day** due to **sore peristomal skin**.

Nurse Advice

Tried multiple seals and pouches with no success. Hypergranulation and sore peristomal skin remained.

eakin **freeseal**[®] with an **eakin**[®] soft convex pouch was introduced by Laura Han, Stoma care nurse Haaglanden Medical Centre.

Before



“ ...I finally have a
normal life again
and I have become a
regular ostomate!! ”

Solution with eakin freeseal[®]

After 2 years of searching for a solution, eakin **freeseal**[®] has changed her stoma care routine.

Skin: Hypergranulation has almost disappeared and peristomal skin has completely healed.

Stoma Management: Just 1 pouch change per day with no additional treatments needed.

Unstoppable: The lady feels safe in her routine, is pain-free and does not have to think of her stoma.



This is an individual case study and therefore claims made are the experience of the nurse and have not been further validated by eakin[®].