Stoma and continence: Adhesive removers

Adhesive removers are designed to facilitate easy, non-traumatic removal of adhesive dressings and appliances. They are often used to assist with pouch removal in people with a stoma. Medicines optimisation projects in this area focus on selecting the most cost-effective, appropriate products and avoiding waste.

Key recommendations

- Input from local stoma experts should be sought when determining local policy on adhesive remover prescribing. There are conflicting opinions as to whether adhesive remover use in those with a stoma should be routine, or based on individual circumstances.²⁻⁵
- An individual assessment should generally be undertaken prior to the use of a stoma accessory.⁶ Stoma nurses are best equipped to determine the cause of sore peristomal skin and recommend effective solutions. An exception to this may be if adhesive removers are offered routinely, where the person is not experiencing any issues with their stoma or peristomal skin.
- Local formularies should guide primary care prescribers to select appropriate and cost-effective adhesive removers.
- Silicone-based, alcohol-free preparations are preferred.^{7,8}
- Sprays are generally more cost-effective than wipes.
- Wipes should be available for those that need them, e.g. for people who lack the manual strength or dexterity to use a spray.³
- Either a spray or wipes should be prescribed, not both.
- The quantity of adhesive remover required will depend on the frequency of appliance change. As a general rule, 1-2 cans of spray or 30 wipes are needed per 30 bags (or base plates where a two piece appliance is used).²
- Excessive ordering of adhesive removers should be questioned. It may signify that the person is having problems and needs a stoma assessment, or be due to an issue with the repeat ordering process.
- Local agreements should be in place that define the responsibilities of the stoma nurse. Consider including specific responsibilities regarding prompt communication with GPs when the stoma nurse recommends initiation of a stoma care product. Details of the product, expected monthly usage, expected duration of treatment and monitoring arrangements should be communicated to the GP.⁹

Supporting evidence

Specific guidelines discussing the use of adhesive removers in those with a stoma are not available. However they have an accepted role in managing sore skin around stoma sites.

Opinions vary as to whether all people with a stoma should use adhesive remover routinely. Stoma care guidance from the Association of Stoma Care Nurses UK categorise adhesive removers as routinely recommended accessories.² Evidence based on 54 questionnaires in people with a stoma showed that most people found adhesive removers made their appliance easier to remove.³

However other stoma specialists consider that they are not necessary for everyone. ^{4,5} Some advocate their use based on individual circumstances, e.g. if there is pain on appliance removal, or if skin is fragile and at risk of breakdown. ⁶

Savings

In England and Wales in excess of £18.2 million is spent annually on adhesive removers (ePACT September to November 2017). It seems likely that savings could be made by prescribing the most cost-effective, appropriate products and avoiding waste.

Annual savings for prescribing sprays that cost 15 pence/ml or less (see bulletin for costs of products)	£2.8 million
Annual savings for prescribing wipes that cost 31 pence/wipe or less (see bulletin for costs of products)	£716,000
Total annual saving	£3.5 million

References

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- 4. Burch J. Caring for peristomal skin: what every nurse should know. British Journal of Nursing 2010;19(3):166-172.
- 5. Great Ormond Street Hospital for Children NHS Foundation Trust. Stoma Care Guideline, version 1.2. First approved 12/05/15, next review 12/05/18. Accessed 31/01/17 via www.gosh.nhs.uk/health-professionals/clinical-guidelines/stoma-care
- 6. Burch J. Choosing the correct accessory for each stoma type: an update. British Journal of Nursing 2013 (Stoma supplement);22(16):S10-S13.
- 7. Geng V, Cobussen-Boekhorst H et al. European Association of Urology Nurses. Good Practice in Health Care Incontinent Urostomy. Issued March 2009. Accessed 27/01/17 via nurses.uroweb.org
- 8. Black P. Accessories in stoma care. Nursing & Residential Care 2015;17(2):68-70.
- 9. PrescQIPP Stoma Bulletin (Bulletin 105). Published September 2015. Accessed 08/03/17 via www.prescqipp.info

Additional resources

	Bulletin	Audit product list	https://www.prescqipp.info/b189-stoma-and-continence-adhesive-removers/category/436-continence-and-stoma-adhesive-removers
<u>i</u>	Data pack	https://pdata.uk/#/views/B189_Stomaandcontinence-Adhesiveremovers/FrontPage?:iid=1	

