



# ALGINATE

## STOMA ADHESIVE

CASE STUDIES

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# Introduction

## Case Studies



Healthy peristomal skin is an essential aspect in the quality of life as an ostomist and yet recent studies have highlighted that peristomal skin complications are significant (Herlufsen et al 2006, Williams et al 2010).

Literature has shown that of those people with stomas, approximately one third of colostomy patients and over two thirds of ileostomy and urostomy patients experience peristomal skin problems (Lyon et al 2000). The United Ostomy Association conducted a survey in 2000 and found that peristomal skin complications were the most common reason patients visited a Wound Ostomy Continence nursing service (Rolstad, Erwin- Toth 2004).

One of the goals of good stoma management is to maintain healthy peristomal skin to the point where there should be no difference between the peristomal skin and the surrounding abdominal skin (Williams et al 2010). However the peristomal skin is extremely vulnerable and once damaged can be hard to treat, particularly with the problem of having to affix a skin barrier adhesive (Thompson et al 2011).

The Alginat baseplate (Oakmed Ltd, UK) has been designed to incorporate

alginates in the ostomy bag baseplate. This may help to promote skin health around the stoma.

The following case studies are testimonials by health care professionals and patients about their experiences using Oakmed's alginat bags. They report on the improvement in patient quality of life and cost savings in resources and clinical time.

## CASE DATA

Gender / Age	Female, 58 years old
Stoma type	Ileostomy
Initial condition of the skin	Parastomal ulcerations, reddened, moist
Product used	Oakmed Soft Convex Alginate (SCA45-4120KV) equivalent to STOMOCUR® Protect Alginate convex (IPA20V1).
Result	Significant skin improvement after 3 weeks
Accessories	None used

### MEDICAL HISTORY

The patient was presented with parastomal ulceration, sore, scraped and moist patches of skin. Previous appliances were leaking and caused discomfort.

### OBSERVATIONS ON REFERRAL

The patient presented with a large ulceration at the 2 o'clock position and a smaller one at the 4 o'clock position. The skin was red and moist (see Fig. 1.1).

### COMPLICATIONS OR PROBLEMS THAT ARISE

The skin around the ulcer was severely reddened and inflamed. The patient reported pain and emotional discomfort. The bags currently in use were leaking, which further exacerbated the complaints.

### COMMUNITY VISITS

Within about 3 weeks, four contacts took place. At the second appointment, the supply was switched to "Oakmed Soft Convex Alginate". On the third visit, the skin was significantly improved (see Fig. 1.2). By the fourth visit, the skin around the stoma had healed completely (see Fig. 1.3).

### TREATMENT

The family doctor prescribed antibiotics to treat the local infection around the ulcerations, and an ostomy appliance with alginate was used.

### RESULT

Within 20 days, a significant improvement in parastomal skin was seen, the skin was no longer reddened and sore. The patient's quality of life improved significantly, which gave the patient more confidence. The combined treatment of local antibiotic and alginate skin protection thus proved to be effective for the patient. In addition, the number of bag changes could be reduced and thus further relief for the patient could be achieved. It is also worth mentioning that no additional products were used, i.e. no cream/barrier wipes, so the patient's skin problems were treated in a very economical way.



**Figure 1:** At first contact, a parastomal ulceration with sore skin is visible (1.1). The skin condition improves through the application of skin protection with alginate and combined local antibiotic therapy (1.2), after about 3 weeks the ulcerated areas have recovered (1.3).

### WILL THE PATIENT CONTINUE TO USE THE PRODUCT?

Yes, the patient will continue to use alginate in the long term.

## CASE DATA

Gender / Age	Female, 75 years old
Stoma type	Not specified
Initial condition of the skin	Severe excoriation, reddened, inflamed
Product used	Oakmed Soft Convex Alginate Drainable equivalent to STOMOCUR® Protect Alginat konvex
Result	Significant skin improvement within 4 days
Accessories	None used

### MEDICAL HISTORY

75-year-old patient with severely inflamed peristomal skin. The patient needed daily clinic visits.

### OBSERVATIONS ON REFERRAL

Severe excoriation of the immediate and distal peristomal skin, severely reddened and inflamed, caused pain and distress (see Fig. 2.1).

### COMPLICATIONS OR PROBLEMS THAT ARISE

Leakage of the previous supply led to leakage of digestive enzymes, which severely damaged the skin.

### COMMUNITY VISITS

Before using Oakmed Alginate Ileostomy Bags, the patient had to go to the hospital daily to check the situation, which was difficult for her and also required more time for the clinic and nursing staff.

### TREATMENT

A convex drainable pouch with alginate was used to reduce the inflammation and improve comfort.

### RESULT

Within 4 days, the skin was practically healed, freedom from pain was achieved. Only a small macerated area around the peristomal skin remained (see Fig. 2.3 and Fig. 2.4).

The patient had more confidence in the stoma care again and was able to go outside more. She used fewer bags and did not use accessory products such as creams/wipes. This is a cost-effective way to treat the sore skin and reduce the time spent on care or clinic visits.

### WILL THE PATIENT CONTINUE TO USE THE PRODUCT?

The patient will continue to use the "Oakmed Alginate Soft Convex" bags as standard care in the long term.

“Product was magical”



**Figure 2:** At first contact, severe excoriation was shown (2.1). The skin improved within 24 hours (2.2) and 48 hours (2.3) respectively. On day 4, the improvement was significant and completely recovered except for a minor maceration around the stoma (2.4).

## CASE DATA

Gender / Age	Male, 46 years old
Stoma type	Colostomy (behaves like ileostomy)
Pre-existing condition	Crohn's disease, multiple surgeries
Initial condition of the skin	Excoriated, weeping peristomal skin
Product used	Oakmed Drainable Standard Alginate Soft Convex (SCA35-4120KV), equivalent to STOMOCUR® Protect Alginat konvex (IPA15V2)
Result	Treatment ongoing, regular monitoring
Accessories	Not specified

### MEDICAL HISTORY

46-year-old man with Crohn's disease and recurrent perineal abscesses. Operations: Hemicolectomy on the right, anastomosis of the small intestine to the transverse colon, Hartmann's procedure, proctomy (the colostomy thus behaves like an ileostomy). Since the stoma is flush with the skin, we asked surgical colleagues about a redesign, but since this patient has already had many operations, emergency surgery should only be performed if there are further problems.

### OBSERVATIONS ON REFERRAL

The peristomal skin was peeled off and weeping (see Fig. 3.1).

### COMPLICATIONS OR PROBLEMS THAT ARISE

Problems with the adhesion of the supply, associated with leakage. This led to a loss of confidence in the products.

### COMMUNITY VISITS

The patient was cared for several times in community clinics (stoma/gastro).

### TREATMENT

The patient has a colostomy, which behaves like an ileostomy, with fluid and irregular excretions. The stoma is flush with the skin, which led to further complications and concerns about skin health. The patient was switched to "Oakmed Drainable Standard Alginate Soft Convex" (SCA35-4120KV). The pressure of the convex skin barrier on the peristomal skin is intended to cause the stoma to protrude further into the pouch, preventing leakage. At the same time, systemic therapy with *Ustekinumab* was started due to a Crohn's relapse.

### RESULT

During the use of the alginate skin barrier, a slow but steady improvement of the skin condition can be seen (see Fig. 3.2 and Fig. 3.3). The treatment is continued, with a weekly check of the skin condition.



**Figure 3:** At first contact, the parastomal skin is excoriated and weeping (3.1). By using an alginate appliance, the skin condition improves slowly but steadily (3.2 and 3.3). The patient continues to use the product, with weekly monitoring of the skin condition.

## CASE DATA

Gender / Age	Female, 48 years old
Stoma type	Terminal ileostomy after emergency surgery for Crohn's disease
Pre-existing condition	Crohn's disease
Initial condition of the skin	Circular contact dermatitis, reddened, moist, severely itchy
Product used	Oakmed Drainable Standard Alginate Soft Convex, equivalent to STOMOCUR® Protect Alginat convex
Result	Itching stopped, significant skin improvement after 1 week
Accessories	None used

### MEDICAL HISTORY

Ms. A. underwent a terminal ileostomy in 2021 as part of an emergency operation due to Crohn's disease. She struggled to cope with the surgery and the ileostomy at first, but over time it got better and she was put on an ostomy care, which she had no problems with.

### OBSERVATIONS ON REFERRAL

The patient approached us in September 2022 because she had sore, excoriated skin. The following week, she was visited at home, where she was diagnosed with completely circumferential peristomal contact dermatitis. The skin was red and moist, which caused the patient a lot of trouble and discomfort (see Fig. 4.1). The itching was particularly bad.

### COMPLICATIONS OR PROBLEMS THAT ARISE

The stoma supply currently in use did not stick, leaks occurred, which made the situation even worse. The patient lost confidence in the care, which had an impact on the quality of life. She didn't dare to go out anymore and felt isolated.

### COMMUNITY VISITS

Eight home visits followed, during which two alternative manufacturers were tried out over a period of three weeks without any improvement in the skin, until finally switching to a product with alginate skin protection.

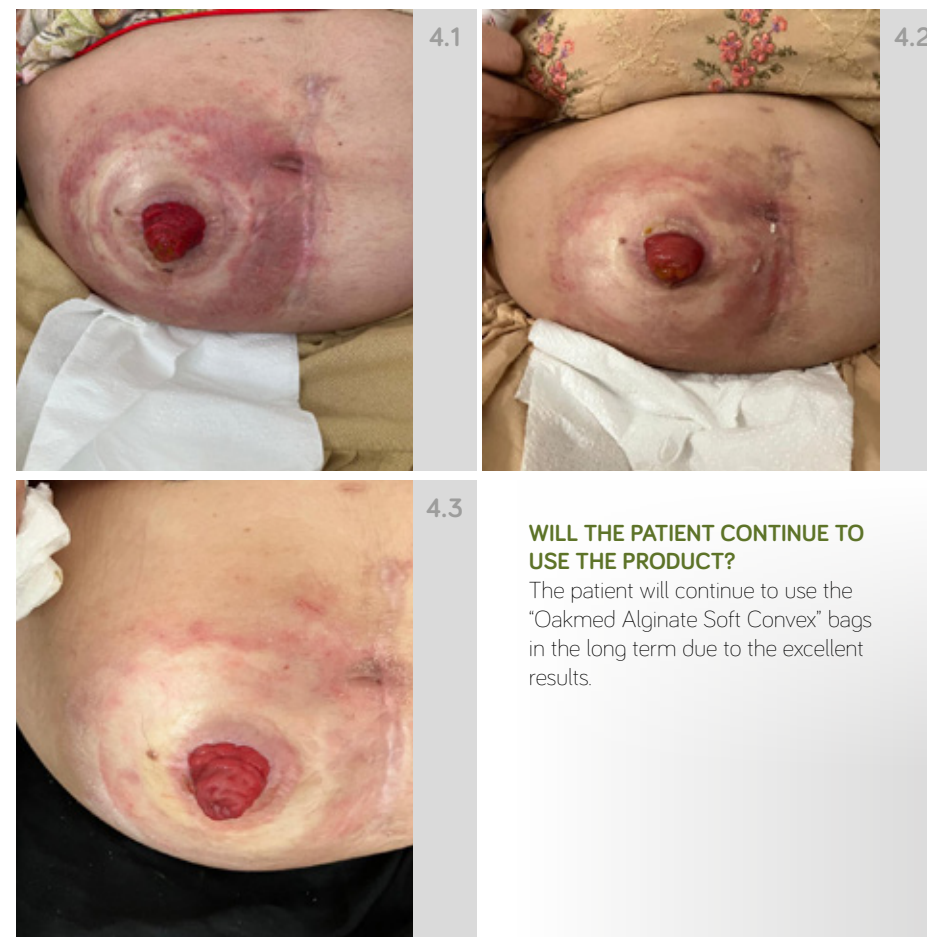
### TREATMENT

"Oakmed Drainable Standard Alginate Soft Convex" was used without any additional products. Within a week, there was a significant improvement in the condition of the skin. The itching stopped immediately, which brought immediate relief, and the skin condition began to improve. (see Fig. 4.2).

### RESULT

The patient's peristomal skin healed and the itching stopped. The Oakmed alginate bag adhered well to the skin and a recurrence of dermatitis was prevented (see Fig. 4.3). The patient had no further leaks and was very satisfied with the result.

No additional products were used on the skin, only the alginate skin barrier.



**Figure 4:** At first contact, contact dermatitis with severe itching was evident (4.1). After just one week, there was a significant improvement in the condition of the skin when using the alginate skin barrier (4.2). As a result, contact dermatitis has completely healed (4.3).

## CASE DATA

Gender / Age	Female, 78 years old
Stoma-Art	Terminal colostomy (inactive), functional jejunostomy (fistula)
Initial condition of the skin	Large parastomal lesion, uneven, sensitive skin, excoriated
Product used	Oakmed Options Soft Convex Alginate (SCA45-4120KV), equivalent to STOMOCUR® Protect Alginat konvex (IPA15V1)
Result	Significant skin improvement, longer wearing time, mobile again for the first time
Accessories	None used

## MEDICAL HISTORY

The patient is 78 years old and was involved in a traffic accident in mid-2010 in which she suffered abdominal injuries, including perforation of the small intestine and transverse colon. Both lesions were treated surgically. In the further course, however, ischemia developed in the area of the transverse colon, so that it was resected. A terminal colostomy was performed in the right upper abdomen and a mucosal fistula in the left upper abdomen.

## OBSERVATIONS ON REFERRAL

The patient was initially cared for in the intensive care unit and referred to the stoma nurses for treatment of the stoma and mucosal fistula. After being transferred to a surgical ward, she initially recovered well and coped with stoma care.

In the further course of the disease, a wound infection developed, as a result of which the wound dehiscated and left a large, open abdominal wound. A few days later, an intestinal loop became visible at the top of

the wound, preventing the use of VAC therapy. This intestinal loop later developed into an enterocutaneous fistula, which has served as a functional stoma ever since. The original colostomy then remained largely inactive.

## COMPLICATIONS OR PROBLEMS THAT ARISE

The initial complication was the treatment of a large, open abdominal wound with a highly secreting enterocutaneous fistula. After regression and healing of the wound, the fistula remained and has since functioned like a jejunostomy.

The fistula lies in an area of scar tissue, embedded in a pronounced skin depression. The surrounding skin is extremely uneven and very sensitive.

This results in a parastomal zone that is prone to skin defects, pain, and excoriations. It was hardly possible to achieve reliable adhesion of products or to achieve an appropriate wearing time (see Fig. 5.1).

The maximum wearing time was about 24 hours, but on average only 6 to 12 hours. As a result, the patient was effectively housebound, suffered permanently from a sore, excoriated skin condition and was almost completely dependent on the support of family and caregivers.

## COMMUNITY VISITS

During her inpatient stay, the patient was cared for daily by the ostomy team. To this day, she is seen every two to three weeks to support the care of the functional stoma and the fistula and to relieve the burden on the caring relatives.

## TREATMENT

About 20 different products from different manufacturers were used, all with hydrocolloid skin protection, mostly convex, each in combination with adhesive strips, pastes or both.

I finally introduced the "Oakmed Options Soft Convex Alginate" bag (item number SCA45-4120KV). On the next visit, I noticed that the patient continued to use the product and reported significantly improved adhesion, more comfort and longer wearing time (see Fig. 5.2). The first bag lasted 72 hours, the subsequent ones between 24 and 72 hours.

## RESULT

When the treatment was checked, the bag was intact, and the skin around the fistula had improved significantly compared to previous appointments, less discoloration, less pain. The patient can now leave the house for a short time for the first time in over 12 months with the support of her family.

*"I feel so much safer with this ostomy bag, I can finally go shopping and visit my family. My skin feels much less sore and I don't live with the constant discomfort I used to have."*



**Figure 5:** The patient has an inactive colostomy and an enterocutaneous fistula, which acts as a functional stoma. At first contact, the skin is uneven and excoriated (5.1). After switching to alginate skin protection, the skin condition visibly improves (5.2), pain decreases, and the wearing time is up to 72 hours.

# Executive Summary

## Case Studies

The general feelings and findings expressed by the patients and healthcare professionals in these case studies are that the Alginate product may have contributed to:

- Resolution of peristomal skin problems
- Improved patient quality of life as leaks were resolved
- Reduction in amount of product and accessories
- Reduction in time required with the Stoma Care Nurse Specialist



All of the five patients in these case studies showed a vast improvement in their skin. Case study one, parastomal ulceration was virtually healed in under three weeks. Case study two, after previous daily appointments the patient's skin was healed in four days. The patient with dermatitis said the itching stopped almost immediately and the other patients had severe skin problems resolved along with managing a difficult output.

The resolution of these problems while using the Alginate product resulted in the reduction of the amount of clinic time required from the Stoma Care Nurses with these patients.

Further in depth study would be required to test conclusively how effective the Alginate product is, but, without the need for accessories, the Oakmed Alginate products may represent a significant cost effective solution to helping promote skin health around the stoma.

**Want to know more about Alginates?**  
**Visit [www.oakmed.co.uk/alginate](http://www.oakmed.co.uk/alginate)**

# Acknowledgements

Thank you to all those patients and healthcare professionals who have been involved.

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Kathryn Barlow, Community Stoma Nurse

David Greenwood, Stoma Specialist, Macclesfield District General

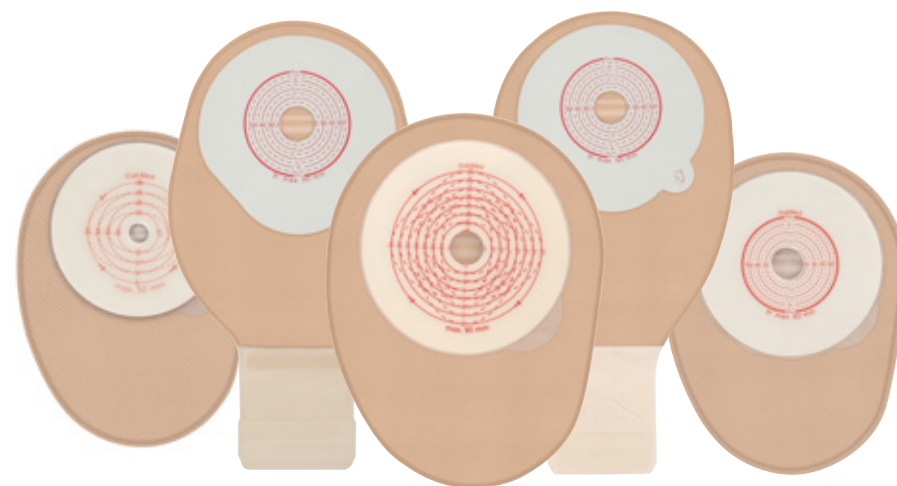
Oakmed are constantly seeking to improve patient's lives by developing technically advanced products. This ongoing process of product evaluation and development includes validation of the efficiency and effectiveness of our products. If you would like to be part of the development process please contact your Territory Manager.



## PRODUCTS

### Flat Alginat bags

With **15% Alginat**, a smart choice for problem skin.



#### Closed Mini Alginat

AHP11C10 Window, opaque, filter, soft cover both sides.

Pack Size: 30

Hole Size	Window
Cut to fit 10 to 50mm	AHP11C10

#### Drainable Midi Alginat

AV-4320K Window, filter, soft cover both sides, soft touch closure.

Pack Size: 30

Hole Size	Window Midi
Cut to fit 20 to 60mm	AV-4320K

#### Closed Standard Alginat

AHP5C20 - AHP5C60 Window, opaque, filter, soft cover both sides.

Pack Size: 30

Hole Size	Window
Cut to fit 20 to 60mm	AHP5C20

#### Drainable Standard Alginat

AV-4120K - AV-4160K Window, filter, soft cover both sides, soft touch closure.

Pack Size: 30

Hole Size	Window
Cut to fit 20 to 60mm	AV-4120K

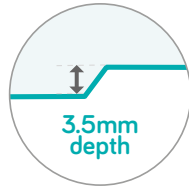
#### Closed Maxi Alginat

AHP8C20 Window, opaque, filter, soft cover both sides.  
AHP7C20C Clear, soft cover one side.

Pack Size: 30

Hole Size	Window
Cut to fit 20 to 90mm	AHP8C20

Offering superior flexibility and comfortable wear as our Soft Convex range, but with 3.5mm of convexity.



### Closed Standard Alginate Low Profile Soft Convex

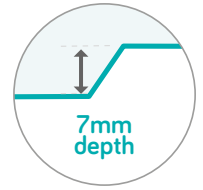
LPSCA28-0410KBK - LPSCA47-0420K Window, opaque, filter, soft cover both sides.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 10 to 28mm	28mm	LPSCA28-0410KBK*
Cut to fit 20 to 28mm	28mm	LPSCA28-0420K
Cut to fit 15 to 40mm	40mm	LPSCA40-0415KBK*
Cut to fit 20 to 40mm	40mm	LPSCA40-0420K
Cut to fit 20 to 47mm	47mm	LPSCA47-0420KBK*
Cut to fit 20 to 47mm	47mm	LPSCA47-0420K



Naturally the flexible choice for maximum security and added confidence, with 7mm of convexity.



### Closed Standard Alginate Soft Convex

SCA25-0410KBK - SCA45-0420K Window, opaque filter, soft cover both sides.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 10 to 24mm	25mm	SCA25-0410KBK*
Cut to fit 20 to 24mm	25mm	SCA25-0420K
Cut to fit 15 to 34mm	35mm	SCA35-0415KBK*
Cut to fit 20 to 34mm	35mm	SCA35-0420K
Cut to fit 20 to 44mm	45mm	SCA45-0420KBK*
Cut to fit 20 to 44mm	45mm	SCA45-0420K



### Drainable Standard Alginate Low Profile Soft Convex

LPSCA28-4110KVBK - LPSCA47-4115KV Window, opaque, filter, soft cover both sides, soft touch closure.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 10 to 28mm	28mm	LPSCA28-4110KVBK*
Cut to fit 15 to 28mm	28mm	LPSCA28-4115KV
Cut to fit 15 to 40mm	40mm	LPSCA40-4115KVBK*
Cut to fit 15 to 40mm	40mm	LPSCA40-4115KV
Cut to fit 15 to 47mm	47mm	LPSCA47-4115KVBK*
Cut to fit 15 to 47mm	47mm	LPSCA47-4115KV



### Drainable Standard Alginate Soft Convex

SCA25-4110KVBK - SCA45-4120KV Window, opaque, filter, soft cover both sides, soft touch closure.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 10 to 24mm	25mm	SCA25-4110KVBK*
Cut to fit 20 to 24mm	25mm	SCA25-4120KV
Cut to fit 15 to 34mm	35mm	SCA35-4115KVBK*
Cut to fit 20 to 34mm	35mm	SCA35-4120KV
Cut to fit 15 to 44mm	45mm	SCA45-4115KVBK*
Cut to fit 20 to 44mm	45mm	SCA45-4120KV



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