



# ALGINATE

## STOMA ADHESIVE

EVIDENCE BASED 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).

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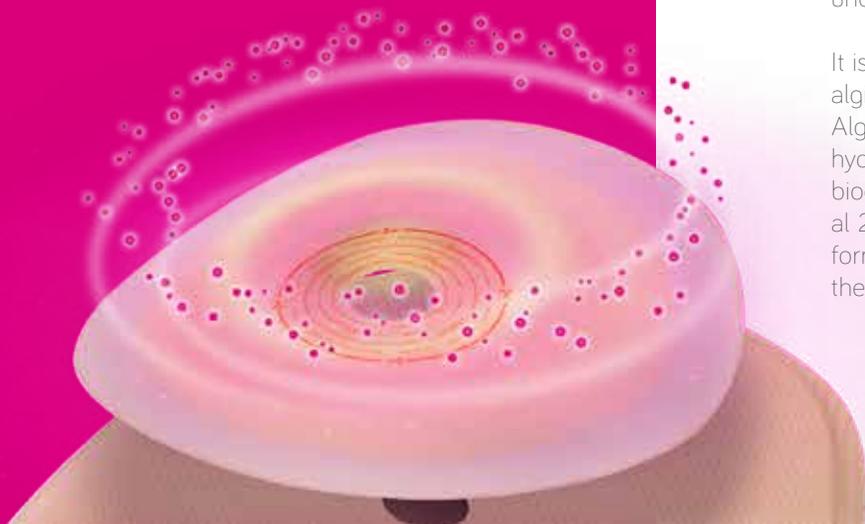
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One of the goals of good stoma management is to maintain healthy peristomal skin to the point where there should be no difference between the peristomal skin and the surrounding abdominal skin (Williams et al 2010). However the peristomal skin is extremely 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).

Alginates are quite abundant in nature although all commercial alginates are produced from marine brown algae (seaweed) (Woo-Ram 2007). Alginates made their first big impression in wound care in the 1980's as dressings for split skin donor sites. A study comparing the use of alginates and paraffin gauze on the donor sites had to be abandoned by Attwood (1989) as there was consistently better healing under the alginates (Heenan 2007).

It is not fully understood why alginate actively promotes healing. Alginates are biocompatible, hydrophilic (water loving) and biodegradable (Woo-Ram et al 2009). Once a gel has been formed via ion exchange between the alginate and the wound,

the wound secretions and bacterial contamination are minimised which promotes wound healing (Timmons 2009). It is also known that alginate dressings can exert bioactivity which may modulate cell function and thus influence the healing process (Thomas et al 2000).

The Alginate wafer (Oakmed Ltd, UK) has been designed to incorporate alginates in the ostomy bag wafer so that it can actively help with the healing of any sensitive, sore excoriated peristomal skin.

The following case studies are a great testament to the healing power of alginates and the improvement in patient quality of life and cost savings in resources and clinical time.

## OBSERVATIONS ON REFERRAL - IMAGE 1

The patient presented with a large ulceration at the 2 o'clock position and a small ulceration at the 4 o'clock position. Skin was red and moist.

## COMPLICATIONS OR PROBLEMS BEING EXPERIENCED

The skin around the ulcerated area was very red and inflamed causing the patient pain and distress. The bags being used were also leaking adding to the patient's discomfort.

### Community visits

**First appointment:** 21/12/2022 Presented with parastomal ulceration, sore, excoriated, moist skin.

**Second appointment:** 28/12/2022 Patient commenced on SCA45-4120KV Oakmed Soft Convex Alginate Drainable bags.

**Third appointment:** 3/1/2023. Major improvement of the skin and ulceration, patient continued on Oakmed Alginate Drainable bags. The 15% alginate in the adhesive is significant enough to promote healing.

**Fourth appointment:** 10/01/2023. Skin around the stoma completely healed. Patient staying on Oakmed Soft Convex Alginate long term to prevent re-occurrence of problems.

### Time frame

21/12/2022 to 10/01/2023  
20 days to see major improvement to the parastomal skin.

### Treatment

The GP had prescribed antibiotics to try and combat the local infection around the ulcers. The Oakmed Alginate wafer absorbed local exudate from the infection which reduced bacterial contamination.

### Improvements - Image 3

The ulcerated areas are healed in just under three weeks after trying several other stoma bags.

### Outcome

The outcome is that the patient's quality of life is vastly improved.

The skin is healed, no longer red and sore. The Alginate has healed the skin which in turn has given the patient more confidence and reduced her physical suffering, also reducing the number of bag changes making her life easier.

It is also worth mentioning that no accessories were used i.e., cream/barrier wipes as these interfere with the healing properties of the alginate. This shows that the patient's skin issues were dealt with in a cost-effective way.



### Will the patient continue on the product?

Yes, this patient will continue long term on the Alginate Soft Convex bag as the product is preventative and curative.

## Case Study Two - Female 75 yrs old

by Micaela Camilo, Lead Stoma Care Nurse,  
Peterborough City Hospital, Northwest Anglia NHS Foundation Trust.



### OBSERVATIONS ON REFERRAL - IMAGE 1

Severe excoriation of the immediate and distal peristomal skin, red and inflamed, causing pain and distress to the patient.

### COMPLICATIONS OR PROBLEMS BEING EXPERIENCED

Leaks from original bags and seals being used leading to digestive enzymes on the parastomal skin, causing excoriation and burning of the skin.

### Community visits

Prior to starting on the Oakmed Alginate Drainable bags the patient required daily hospital appointments to review the situation which was difficult for the patient and also more clinic/nursing time. Within 4 days the skin was virtually healed, just a small macerated area around the peristomal skin.

### Treatment

The patient was started with an Alginate Soft Convex Drainable bag for their stoma, with the aim to reduce the inflamed peristomal skin and promote comfort. The sodium alginate from the seaweed within the alginate flange softens and soothes skin, whilst the highly absorbent properties of the alginate flange draw excess moisture away from the skin promoting healing and granulating tissue.

The photos demonstrate the incredible improvement of the peristomal skin within a 24 hour time frame and over the subsequent four days. Each day the improvement and reduction of inflamed skin was clearly evident. By day 4 the improvement was significant, and the skin appeared fully healed with some minor maceration directly around the stoma.

The patient and staff felt the bag was "magical".

### Outcome

The outcome is that the patient has a renewed confidence in the stoma bag allowing them to go out more. The pain score has reduced to zero as all the skin has healed. The patient is using less bags and no accessory products i.e. creams/wipes. Therefore a cost effective way to manage the sore skin, reduction in nursing time and money.

The patient will be continuing to use the Oakmed Alginate Soft Convex bags long term as they can be used as a standard bag and not just for problem skin.

“Product was magical”



## PATIENT HISTORY

Mrs A had emergency surgery in 2021 for Crohns disease resulting in her having an end ileostomy formed. Mrs A struggled to comes to terms with the surgery and dealing with the ileostomy, but over time she managed well and was settled onto a product with no problems.

## OBSERVATIONS ON REFERRAL - IMAGE 1

The patient self-referred in September 2022 with sore, excoriated skin. She was visited at home the following week where fully circumferential peristomal contact dermatitis was seen. The skin was red, moist, and very itchy causing the patient distress and discomfort. The itching was particularly bad.

## COMPLICATIONS OR PROBLEMS BEING EXPERIENCED

Her bags were not sticking to the skin which in turn was resulting in them leaking making the situation worse. The patient had lost her confidence in the bags which affected her quality of life and ability to go out. She became upset and isolated.

## Community visits

She was seen on eight separate occasions where two alternative manufacturers bags were tried over a period of three weeks with no change or improvement to the skin.

## Treatment

The Oakmed Drainable Standard Alginate Soft Convex bag was applied with no accessory products, no barrier creams, wipes, or barrier films. Over a one-week period there was a dramatic improvement in the skin condition. The itching stopped immediately bringing instant relief and the skin began to heal.

**Image 2 shows improvement part way through treatment.**

## Outcome

The outcome is that the patient's peristomal skin has healed and the itching stopped. The Oakmed Alginate bag sticks well to her skin and has prevented any re-occurrence of the dermatitis. She has had no further leaks and is very happy about the result.

No accessories were used on the skin, just the Alginate wafer which is a cost-effective way to manage peristomal skin problems.

*“I feel this product can be PREVENTATIVE as well as CURATIVE.”*



1



2



3

## Will the patient continue on the product?

An excellent result, (photograph 3).  
The client will be staying on the product.

## PATIENT HISTORY

He underwent a Panproctocolectomy and APER (Abdo-Perineal Excision of Rectum) with end ileostomy in November 2018.

He made a quick recovery and had no problems with his wound. He was discharged on a flat bag. He was followed up routinely in clinic and it became apparent quite early in his recovery that he would need a convex bag as his stoma was flush to the skin and in a dip to the outer aspect.

## COMPLICATIONS OR PROBLEMS BEING EXPERIENCED

At four weeks post-op it was discovered that the patient had developed numerous large granulomas at the suture sites giving the appearance of a 'cobble stone' ring around his stoma. This was treated successfully on a weekly basis with Silver Nitrate. After four weeks the problem had resolved.

The patient changed onto a convex bag. He started chemotherapy, which he tolerated well. However, on session 4 of 8 chemo sessions, the patient called into the hospital complaining of sore skin. He attended the clinic and we observed red dry skin under the flange with a halo of very dry deep red skin around the stoma and also the outer ring of the flange.

## Treatment

The patient was given a barrier cream to try followed by barrier film. This treatment did not help and he was prescribed Hydrocortisone 1% cream and suggested he return to his flat bag with a convex washer. Over the following week the skin did improve slightly, but he was now experiencing leaks and only achieving a wear time of 6 hours. Swabs were taken and no infection found. The patient proceeded to trial numerous convex bags and was reacting to all hydrocolloid flanges used.

He became housebound as he was experiencing severe leaks. We found, at the time, the best outcome was to wash the skin with emollient, leave the skin exposed for as long as possible, then to apply a skin wafer, convex bag with a belt and the added security of a Support ring.

At this time, his skin was still deteriorating and we requested an urgent dermatology referral and the opinion of the Oncologist.

I saw the patient in clinic again, which was followed by a visit from our Oakmed representative. I explained the situation with the patient and my concerns that there was nothing we were trying which was working. She explained to me that Oakmed were in the process of trialling an alginate soft convex bag. It was agreed that Oakmed would supply trial packs for the patient if he was in agreement. The patient was 'more than happy to give anything a try' at that stage.

The area of red, wet, excoriated skin was worse and the oncologist decided to stop the chemotherapy after 7 sessions.

The samples arrived after a week and the patient was encouraged not to use any of the barrier creams, or wipes with the product, to get a true outcome. After one week the skin was vastly improved and by week 2 it had improved so much that he was able to get 24 hour wear from the bag.

He found that the flange, when warmed onto the skin, adhered extremely well and that he had no leaks whatsoever. The patient's skin continued to improve. The trial period was for 4 weeks. At the end of the initial trial period the patient was very disappointed as he had had such wonderful results, that he had to revert to his original bag. We saw a marked deterioration in his skin again.

We made contact with our Oakmed representative and explained the situation. She was able to source more samples and the patient's skin continued to remain in very good condition. The patient is now able to wear the same bag for 48 hours, with no leaks. He is also now able to 'not double belt'. He is confident that his bag will not leak and he is back to caring for his family.

## Conclusion

The patient found that the Oakmed Drainable Standard Alginate Convex bag SCA45-4120KV resolved his extremely severe skin problem and he has stated he will never change from this bag again.



**PATIENT HISTORY**  
History of Colonic Crohns, recurrent perineal abscess's.

**Surgery:** Right hemicolectomy, small bowel anastomosed to transverse colon, Hartmanns procedure, Proctectomy (colostomy behaves like an ileostomy as a result of above). As stoma is flush to skin we have enquired with surgical colleagues regarding refashioning but as this patient has had lots of surgery they will only do emergency surgery if he has another 'event'.

**OBSERVATIONS ON REFERRAL**  
Parastomal skin stripped, wet and weepy.

**COMPLICATIONS OR PROBLEMS BEING EXPERIENCED**  
Problems with adherence, leaks impacting confidence.

### Community visits

This patient was seen multiple times in joint stoma/gastro clinics rather than in community. Requiring frequent visits to and from the hospital on a regular basis which was not time effective for the patient.

### Treatment

Patient has a colostomy which behaves like an ileostomy in the way it produces a loose and erratic output. This led to issues with poor adherence of the stoma bag and also caused inflammation and irritation to the peristomal area. The stoma spout was flush to the skin adding further complications and skin viability concerns. The patient was swapped from their current product to the Drainable Standard Alginate Soft Convex bag SCA35-4120KV. With the aim that the convex would exert the right amount of pressure onto the peristomal skin to allow the stoma to protrude further inside of the stoma bag thus preventing any potential leaks. Oakmed's reliable alginate adhesive also contains antioxidant vitamin E, proven to promote skin integrity, absorb moisture and actively help to heal sore skin.

In addition the team has recommenced systemic treatment for Crohns flare up (Ustekinumab).

### Improvements

The photos show a slow and steady response from the Alginate Soft Convex bag. The patient is being monitored each week to assess how her peristomal skin is responding and also to assess her comfort levels.

### Outcome

The patient will be continuing with the Drainable Standard Alginate Soft Convex bag SCA35-4120KV on a long term basis and will return to clinic for weekly review to monitor her overall progress.

### Will the patient continue on the product?

Yes.



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2



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Protocol evaluation books are available for you to complete with your patients.

Ask us for stocks.



# Executive Summary

## Case Studies

Skin problems are common among patients with a stoma. Patients may develop a skin problem for a variety of reasons, many of which are beyond their control. This can result in a real reduction in quality of life as patients feel that they are not in control.

The main outcomes assessed in these case studies were resolution of sore peristomal skin, patient quality of life, reduction in amount of product and accessories required to solve the peristomal skin problem and reduction in time required with the Stoma Care Nurse Specialist.

In this cohort the patients all found their quality of life had improved as the leaks were resolved and sore peristomal skin was healed. There was no need for any accessories while using the Alginate products whereas a number had been used previously. The number of bag changes also dramatically reduced. This represented a significant cost saving in each case.



All of the five patients in these case studies showed a vast improvement in their skin from using Oakmed Alginate. 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.

The Oakmed Alginate product was successful in its outcomes of increasing patient quality of life, reducing the need for extra products and accessories, initiating wound healing and reducing the amount of time required by the Stoma Care Nurses.

Further in depth study would be required to test conclusively how effective the Alginate product is compared to others in the arena of wound healing but the Oakmed Alginate products may represent a significant cost effective treatment of sore peristomal skin.

**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.

David Greenwood, Stoma Care Nurse Specialist, Macclesfield District General

Sarah Taylor, Stoma Nurse Specialist, University of Coventry and Warwickshire Hospital

Julie Hemingway, Nurse Specialist Manager, Colorectal Nursing Team, St James University Hospital, Leeds

Jane Gascoigne, Colorectal/Stoma Care Nurse Specialist, The Alexandra Hospital, Redditch

Lesley Verrill and Gillian Powell, Stoma Care Clinical Nurse Specialists, York Teaching Hospital, NHS Foundation Trust

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**, stimulates healing for sore skin.

#### Drainable Midi Alginat

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

Pack Size: 30

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

#### 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
Pre-cut to 25mm	AV-4125K
Pre-cut to 30mm	AV-4130K
Pre-cut to 35mm	AV-4135K
Pre-cut to 40mm	AV-4140K
Pre-cut to 45mm	AV-4145K
Pre-cut to 50mm	AV-4150K
Pre-cut to 55mm	AV-4155K
Pre-cut to 60mm	AV-4160K

#### Closed Mini Alginat

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

Pack Size: 30

Hole Size	Window
Cut to fit 10 to 50mm	AHP11C10

#### 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
Pre-cut to 25mm	AHP5C25
Pre-cut to 30mm	AHP5C30
Pre-cut to 35mm	AHP5C35
Pre-cut to 40mm	AHP5C40
Pre-cut to 45mm	AHP5C45
Pre-cut to 50mm	AHP5C50
Pre-cut to 55mm	AHP5C55
Pre-cut to 60mm	AHP5C60

#### Closed Maxi Alginat

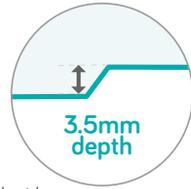
AHP8C20 Window, opaque, filter, soft cover both sides.

AHP7C20C Clear, soft cover one side.

Pack Size: 30

Hole Size	Window	Clear
Cut to fit 20 to 90mm	AHP8C20	AHP7C20C

Offering superior flexibility and comfortable wear as our Soft Convex range, our Low Profile Soft Convex range gives you 3.5mm of convexity.



### Closed Standard Alginate Low Profile Soft Convex

LPSCA28-0420K - LPSCA47-0445K Window, opaque, filter, soft cover both sides.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 20 to 28mm	28mm	LPSCA28-0420K
Pre-cut to 25mm	28mm	LPSCA28-0425K
Cut to fit 20 to 40mm	40mm	LPSCA40-0420K
Pre-cut to 30mm	40mm	LPSCA40-0430K
Pre-cut to 35mm	40mm	LPSCA40-0435K
Cut to fit 20 to 47mm	47mm	LPSCA47-0420K
Pre-cut to 40mm	47mm	LPSCA47-0440K
Pre-cut to 45mm	47mm	LPSCA47-0445K

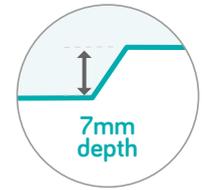
### Drainable Standard Alginate Low Profile Soft Convex

LPSCA28-4115KV - LPSCA47-4145KV Window, opaque, filter, soft cover both sides, soft touch closure.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 15 to 28mm	28mm	LPSCA28-4115KV
Pre-cut to 20mm	28mm	LPSCA28-4120KV
Pre-cut to 25mm	28mm	LPSCA28-4125KV
Cut to fit 15 to 40mm	40mm	LPSCA40-4115KV
Pre-cut to 30mm	40mm	LPSCA40-4130KV
Pre-cut to 35mm	40mm	LPSCA40-4135KV
Cut to fit 15 to 47mm	47mm	LPSCA47-4115KV
Pre-cut to 40mm	47mm	LPSCA47-4140KV
Pre-cut to 45mm	47mm	LPSCA47-4145KV

Naturally the flexible choice for maximum security and added confidence, our Soft Convex range offers 7mm of convexity to fit the contours of your body for more comfortable wear.



### Closed Standard Alginate Soft Convex

SCA25-0420K - SCA45-0440K Window, opaque filter, soft cover both sides.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 20 to 24mm	25mm	SCA25-0420K
Cut to fit 20 to 34mm	35mm	SCA35-0420K
Pre-cut to 25mm	35mm	SCA35-0425K
Pre-cut to 30mm	35mm	SCA35-0430K
Cut to fit 20 to 44mm	45mm	SCA45-0420K
Pre-cut to 35mm	45mm	SCA45-0435K
Pre-cut to 40mm	45mm	SCA45-0440K

### Drainable Standard Alginate Soft Convex

SCA25-4120KV - SCA45-4140KV Window, opaque, filter, soft cover both sides, soft touch closure.

Pack Size: 20

Hole Size	Plateau Size	Window
Cut to fit 20 to 24mm	25mm	SCA25-4120KV
Cut to fit 20 to 34mm	35mm	SCA35-4120KV
Pre-cut to 25mm	35mm	SCA35-4125KV
Pre-cut to 30mm	35mm	SCA35-4130KV
Cut to fit 20 to 44mm	45mm	SCA45-4120KV
Pre-cut to 35mm	45mm	SCA45-4135KV
Pre-cut to 40mm	45mm	SCA45-4140KV

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