PILOT TRIAL OF A STOMA PSYCHOSOCIAL INTERVENTION PROGRAMME FOR COLORECTAL CANCER PATIENTS WITH STOMAS

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**Aims:** To evaluate the preliminary effects of a newly developed STOMA psychosocial intervention programme that was built on Bandura’s self-efficacy theory and the stoma acceptance conceptual framework.

**Methods:** The STOMA psychosocial intervention programme was delivered via a multi-modal and multi-dimensional approach on the improvement of outcomes of colorectal cancer patients with stoma. This was a two-group pre-test-post-test pilot randomised controlled trial. Fifty-three participants were recruited from July 2015 to November 2016 in a tertiary public hospital in Singapore. They were randomised into either the intervention group (n = 29) or the control group (n = 24). The intervention group underwent the STOMA psychosocial intervention programme, which included a pre-operative individual face-to-face psychoeducational session, an educational booklet provided, and five telephone follow-ups (one pre-operatively and four post-operatively). Stoma care self-efficacy, acceptance of stoma, stoma proficiency, length of hospital stay, anxiety and depression, and quality of life were measured. IBM SPSS 24.0 was used to analyse the data.

**Results:** There was an improvement in acceptance of stoma in the intervention group (p<0.05). Significant effects on stoma care self-efficacy, stoma proficiency, length of hospital stay, anxiety and depression level and quality of life were not shown.

**Conclusion:** This study developed a feasible and applicable psychosocial intervention programme and generated preliminary evidence in the positive outcomes of colorectal cancer patients with stoma. Future studies can explore technology-based interventions to provide a more sustainable support for patients with stoma.