Brazilian stomatherapy, in its 30 years of history, is celebrated with great enthusiasm. Despite the pandemic coronavirus (SARS-COV-2) that plagues the world, 2020 enabled the realization of this dream, which was the construction and validation of the first Brazilian Consensus for the Care of Adult People with Elimination Ostomies. A consensus is the agreement or uniformity of opinions, thoughts, feelings, beliefs, etc. of the majority or all members of a collective ¹.

Thus, this consensus brings the agreement of experts’ opinions, developed in a totally online and systematized way, since the moment did not allow to carry out some steps in person.

This aim is to present recommendations based on scientific evidence, guiding health professionals and people with stomas to the best practices defined by criteria, standards and indicators of quality of care.

This document was prepared based on the initiative of the members of the Board of Directors of the Brazilian Association of Stomatherapy: stomas, wounds and incontinence (management 2018–2020) and had the support of the company Coloplast, which made it possible to review the scientific evidence² and the meeting of the judges. It should be noted that the absence of conflicts of interest was declared and there was no influence of any kind on the industry in the elaboration of this consensus.

The elaboration of this document was prepared by a group of stomatherapist nurses recognized for their work in care, teaching and/or research. Altogether, 13 professionals participated in this work: 2 coordinated the process, 10 were evaluating judges and 1 carried out the final technical review.

Its construction followed strict criteria and the entire process was developed in four phases:

1. Systematic literature review
2. Construction of consensus statements
3. Validation of consensus statements³
4. Technical review

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Initially, a systematic review of the literature was carried out, subsidized by the elaboration of the research questions that guided the searches. With this information in hand, consensus statements were constructed and subsequently assessed and validated by the judges. All statements were agreed with 100% agreement. After this stage, it underwent a technical review carried out by a professional with experience in teaching, assisting and researching in the area of ostomy and with international scientific recognition.

Adjustments were made to some terminologies, linguistic adjustment of the declaration, adjustment of nomenclatures for adaptation to the language, since the largest number of publications used in the elaboration of this consensus was in a foreign language, and reorganization of some statements that, perhaps, were repeated or allocated in different categories.

It was possible to validate 200 consensus statements for the care of adults with elimination ostomies. In addition to the statements for care, it was also agreed by the organizers and group of judges to detail 3 fundamental procedures for assistance: demarcation of the ostomy (25 statements), intestinal control (20 statements) and use of the occlusor (12 statements).

The process was intense and long. The collaboration and expertise of each collaborating professional contributed greatly to this result.

The final consensus will serve as a guide for health professionals and institutions to develop and develop protocols, programs and specialized services based on evidence. It will also help to understand the reality that makes up the universe of people with ostomy in Brazil, in order to guide more assertive decision-making and, therefore, contribute to improving care.

It is also hoped that this document will serve to guide public health care policies for people with stomas. In this way, contribute to the implementation of comprehensive care that takes into account the particularities of this care, which is often hidden or invisible to the community and health officials in the country.

This initiative is very important, firstly, because stomatherapy had its origin in the care of people with ostomies and this is one of the main areas of expertise of the stoma nurse. It is also necessary to consider the novelty of this work in Brazil and the possibilities it brings to health professionals and institutions and, consequently, to people with stomas.

It is hoped that initiatives like this can be motivated and replicated in other areas of the specialty, considering all methodological rigor and the ethics with which this document was prepared.

Therefore, use this material with the desire to assist with quality and show the world the importance and difference that the prepared professional is capable of making.

REFERENCES