

Improving the accessibility of effective healthcare for ostomy patients in the community

Public health and ostomy patient care

Approximately 700,000 people in the EU, from young children to senior citizens, have an ostomy, a surgical procedure that creates an artificial opening in the abdomen to allow for the elimination of bodily wastes.ⁱ The majority of ostomies (56%) are permanent, requiring both care and consistent follow up in the community to minimize complications, hospital readmission and unnecessary death.

The true cost burden to health systems occurs post-surgery where ill-fitted appliances and inadequate nursing care can cause minimal to severe complications for patients. For example:

1. It is estimated that at least one third of colostomy patients and up to two thirds urostomy and ileostomy patients are impacted by skin complications.ⁱⁱ
2. The main reason for skin disorders in the peristomal area (the opening of the stoma) is mainly effluent (bodily waste), which accounts for approximately 77% of all diagnoses.ⁱⁱⁱ
3. In one study, only 38% of individuals with a diagnosed skin disorder recognised they had a disorder, and more than 80% of the patients diagnosed with a skin disorder did not seek professional healthcare.^{iv}
4. Given the incidence and average costs for additional treatment of peristomal skin complications, it is estimated that the French health system alone spends an additional €25.4 million annually (assuming that all patients with a stoma have had adequate access to stoma care nursing).^v

Barriers to accessibility of innovative ostomy products in the community

Despite major advances in medical and surgical care over the last 50 years, there has been little change in the post-surgical complication rates of ostomy patients.^{vi} This is in large part due to the pricing and reimbursement decisions which limit both accessibility to innovation and choice for ostomy patients. Such decisions include:

- Generic payment classification systems for ostomy products - one size fits all – a bag is a bag^{vii}
- Lack of recognition for both the medical (skin barrier) and the prosthetic (pouch) and the need for both to be tailored to the patient to prevent skin complications^{viii}
- Reimbursement systems in Member States that discourage, rather than incentivize transformational innovation in ostomy products^{ix}
- "Silo" funding and reimbursement systems which encourages ostomy innovation in the hospital setting more than in the community where most of the care for people with an ostomy takes place after surgery.
- Lack of support services and standardization of ostomy nurse training programmes across Europe^x

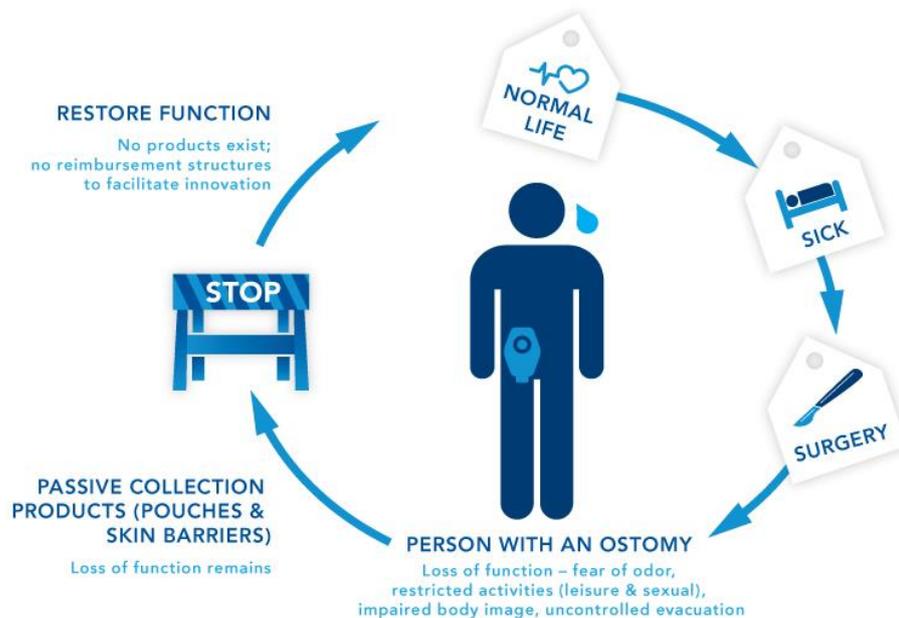
Improving accessibility to healthcare for ostomy patients

Patients need on-going access in the community to properly trained healthcare professionals and the products that provide the best medical outcome. Though an ostomy surgery may take place in the hospital, access to proper ostomy care in the community improves patient quality of life and keeps patients from returning to hospital with unnecessary, painful, and costly skin complications.

Given that individuals with stomas will most likely be patients for the rest of their lives, it is crucial that patients receive appliances tailored to exactly fit their particular stoma and skin needs.^{xi} It is also imperative that such patients have access to not only general healthcare, but the innovation which drives the healthcare sector and represents 10% of the EU's GDP.^{xii}

OSTOMY CARE IN EUROPE

PATIENT PATHWAY AND INNOVATION BARRIERS TO FULL FUNCTION RESTORATION



List of References

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- ix Ibid, 20.
- x Ibid, 20.
- xi Elisabet Lindholm, Eva, Persson, Eva Carlson, Anne-Marie Hallen, Jeanette Fingren, Ina Berndtsson. Ostomy-Related Complications After Emergent Abdominal Surgery. *Wound, Ostomy and Continence Nurses Society* (2013); 40(6): 603 – 610.
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