Evaluation of a Structured Skin Care Regimen on Patients with Fecal Incontinence: The Relationship Between IADS Scores and PU Development

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Aim: To measure the effect of a structured skin care regimen for patients with fecal incontinence.

Method: A nonrandomized, quasi-experimental research design was used for data collection.

Seventy-six patients with fecal incontinence, Bristol stool form 5, 6, and 7, and Braden Scale score of 16 or less in the ICUs at Samsung Medical Center in Seoul, South Korea, participated in the study. Each 38 were assigned to the experimental and control group. Intervention group were being cared for in an ICU; participants in the comparison group were cared for four ICUs. A structured skin care regimen was developed, which included the regular use of a no-rinse skin cleanser, application of a skin protectant, and an indwelling fecal drainage system when indicated. Stool consistency was evaluated via the Bristol stool chart. Nurses trained in data collection determined Incontinence-Associated Dermatitis and its Severity(IADS) scores and assessed the perianal and sacral skin for occurrence of pressure ulcer(PU) daily over a 7-day period.

Results: Patients in the intervention group had significantly lower IADS scores(t =4.836, P <.001) than subjects in the control group and were less likely to develop a PU than were patients in the control group (5 vs 19, χ2 =11.936, P =.001). Patients with higher IADS scores were significantly more likely to develop a PU (OR =1.168, 95%CI =1.074-1.271).

Conclusions: A structured skin care regimen decreased IADS scores and occurrence of PUs. Higher IADS scores were associated with an increased risk for development of PUs.