

Body Image and Sexual Function for the Patient with an Ostomy

Name: _____

Using academic writing standards and APA formatting of references, respond to each of the following learning objectives. Using this document, **enter the responses directly next to the corresponding learning objective on the grid below**. Responses should be **150-350 words in length**. Scroll down to see assignment rubric for specific details on how the project will be assessed and how the will be points awarded. Save the completed document as the assignment title and submit to the dropbox. References should be no more than 5 years old.

Learning Objective	Response
<p>1. Identify the pelvic nerves responsible for sexual function, and the role of the sympathetic & parasympathetic nervous systems plays in this process.</p>	<p>They hypogastric, pudendal, and levator ani nerves are the nerves responsible for sexual function. The hypogastric nerve is responsible for the emission of semen into the urethra. The pudendal nerve innervates the clitoris for stimulation. The levator ani nerves is a part of the pudendal plexus and originates from the sacral nerve (Shafik, 2000).</p> <p>Sexual response is based on the regulation of the parasympathetic and sympathetic nervous system. The autonomic effects include penile and clitoral erection, stimulation of prostatic or vaginal secretions, smooth muscle contraction during ejaculation and vaginal contractions and contraction of the pelvic muscles during orgasms (Purves, et al., 2001). Parasympathetic activity also excites the vas deferens, seminal vesicles, and prostate in males, or vaginal glands in females. In contrast, the sympathetic system causes vasoconstriction and loss of erection. The sympathetic system is our fight or flight response while the parasympathetic system is responsible for restoring a calm state.</p>
<p>2. Define body image and self-concept.</p>	<p>Body image is defined as a subjective picture of one's own physical appearance, usually based upon self-observation and by gauging the reactions of others (Beitz, 2016, pg. 279). Self concept on the other hand is mainly based on the belief someone has about themselves mainly as a reflection of how others react to them. Reflecting on the patient that is planning her wedding, body image will have a great effect on every aspect of that anticipated day. The view this person has of their physical appearance now that they fecal or urinary diversion will play a great deal on the clothing that is selected and the</p>

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	<p>confidence they will exhibit on their special day. If others have been critical and have dwelled on their appearance, then it is likely this individuals' self concept has been affected and will need a lot of positive reinforcement. There are many options available such as the right undergarments or smaller pouches, to assist in hiding the appliance. These suggestions and proper planning will allow for a successful day.</p>
<p>3. Describe the potential impact of ostomy surgery on: body image, self-concept, and sexuality for men and women</p>	<p>Ostomy surgery can have a significant impact on both males and females body image, self concept and sexuality. In my opinion, females may have a harder time with body image than males. The way that clothing may need to be adjusted, such as swimsuits and lingerie can negatively impact one's self image. Males may be able to hide their pouches easier underneath clothing and are may find it easier to mentally digest.</p> <p>I think self concept is based heavily on age and situation. Younger people who are dating and looking for a significant other will likely have times where they may deal with rejection due to their ostomy. On the other hand, individuals who are married and have families are likely to have a better self concept, as they are likely to have gone through this process with their families. This is not to say that some married people may not still encounter rejection, but I think it is fewer than more.</p> <p>Sexuality is unfortunately an issue for people with ostomies. Males many times experience erectile dysfunction and females can experience pain with intercourse. Sexual intercourse is often avoided due to these issues as well as lack of desire (Vural, et al., 2016). There are also issues with being ashamed and feeling unwanted due to having a stoma. The change in body image impacts a person's sexual behavior especially if they have developed a negative self concept.</p>

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<p>4. Identify safe sex considerations for the person with an ostomy.</p>	<p>People with ostomies need to be educated that the ostomy is never to be used for sexual pleasure. There should never be any object inserted into the stoma as it may lead to damage to the bowel. It is important to understand that the bowel does not function the same way the rectum does. Knowing this, there will not be any pleasure attained from stimulating the bowel as some may experience with the rectum. It is imperative that this education is completed with sexually active patients so that they understand that the result of firm objects into the stoma can cause bleeding, scarring, damage to the mucocutaneous junction and possible constriction (Beitz, 2016). All of these issues are serious and can lead to long term issue with stomas and the possibility of surgical interventions.</p>
<p>5. Provide an example for each of the categories listed below and relate how it promotes healthy body image for the person with an ostomy:</p> <ul style="list-style-type: none"> • Undergarments • Odor control • Pouch modifications 	<p>There are options available that can help with the body image of people with ostomies. The availability of different style undergarments to conceal pouches and make the bulge less visible allow for wearing normal clothing. There are high waisted options with inner pouch pockets that allow for additional support. Specially designed lingerie and undergarments will help with boosting confidence.</p> <p>The odor of ostomy output can cause individuals to be very self conscious. There are odor relieving drops, tablets and sprays available to assist with decreasing odor. There are also charcoal filters that can also be helpful. People are very sensitive to smells and</p>

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	<p>these items will help alleviate some of the stress and anxiety that comes with this problem.</p> <p>There is a variety of pouching systems available ranging from transparent, opaque, drainable, closed ended, high output, 2 piece, 1 piece, reusable and disposable (Beitz, 2016). This variety of options is designed to fit many different lifestyles and budget needs. For example and opaque, closed ended pouch may be the choice for a couple having an intimate encounter. Another example is that a drainable pouch is more cost effective for someone that needs to be mindful of the expenses of supplies. The good thing is that there are so many options with a variety of advantages and disadvantages.</p>
<p>6. Explain how the PLISSIT model guides the conversation on sexual intimacy.</p>	<p>The PLISSIT Counseling model stands for Permission, Understanding-Limited Information, Specific Suggestions, and Intensive Therapy. This model includes four levels of responses to issues concerning sexual health. The nurse should be able to have a conversation at their most comfortable level. The permission stage is the first stage when there is a discussion regarding sex. It is encouraged to use open ended questions regarding the effects that the ostomy has had on their relationships. During the understanding-limited information phase, the nurse will determine if a wound ostomy care nurse needs to be involved based on their assessment. This will be determined if there are any problems with goals, sexuality, emotional changes, etc. The wound ostomy care nurse will reassure the patient during the specific suggestion phase and likely provide written information on various topics. Lastly the intensive therapy phase will again involve the wound ostomy care nurse where issues such as psychological, interpersonal and physical needs can be addressed and the appropriate referrals can be made (Beitz, 2016).</p>

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List at least three current references that support your responses (textbook required as one of the references), and include the citations in the body of the written responses.	<p>Shafik A. (2000). The role of the levator ani muscle in evacuation, sexual performance and pelvic floor disorders. <i>International urogynecology journal and pelvic floor dysfunction</i>, 11(6), 361-376. https://doi.org/10.1007/pl00004028</p> <p>Purves D, Augustine GJ, Fitzpatrick D, et al. (2001). Neuroscience. <i>Autonomic regulation of sexual function</i>. https://www.ncbi.nlm.nih.gov/books/NBK11157/</p> <p>Beitz, J. M. (2016). Glossary. In J. Carmel, J. Colwell & M. Goldberg (Eds.), <i>Wound, Ostomy and Continence Nurses Society™ core curriculum: Ostomy Management</i> (pg. 279, 242-243, 151-152). Wolters Kluwer.</p> <p>Vural, F., Harputlu, D., Karayurt, O., Suler, G., Edeer, A. D., Ucer, C., & Onay, D. C. (2016). The Impact of an Ostomy on the Sexual Lives of Persons With Stomas: A Phenomenological Study. <i>Journal of wound, ostomy, and continence nursing : official publication of The Wound, Ostomy and Continence Nurses Society</i>, 43(4), 381-384. https://doi.org/10.1097/WON.0000000000000236</p>
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Points criteria:

Criteria	Under performance <3 points per criteria	Basic 3 - 3.9 points per criteria	Proficient 4.0 - 4.4 points per criteria	Distinguished 4.5 - 5 points per criteria
Required content objectives	Content objectives are missing or sparsely covered.	Content objectives are not consistently addressed. Demonstrates minimal understanding of content.	Content objectives consistently addressed. Demonstrates understanding of content.	Content objectives consistently addressed. Demonstrates mastery of content.
Academic writing standards	Writing lacks scholarly tone & focus. Sparse content. Multiple grammatical, spelling, & factual errors. Reliance on bullet points rather than	Writing is unclear and/or disorganized. Inconsistent scholarly tone. Inadequate depth of content. Grammatical and spelling errors. No more	Writing demonstrates general exploration of content. Responses are clearly written using scholarly tone. Few grammatical and/or spelling	Writing demonstrates comprehensive exploration of content. Responses are clearly written using scholarly tone. Rare grammatical and/or spelling

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	effective writing in speaker notes. 4 or more direct quotes per project.	than 3 direct quote of less than 40 words per project.	errors.No more than 2 direct quote of less than 40 words per project.	errors.No more than 1 direct quote of less than 40 words per project.
APA formatting	References and citations have multiple errors or are missing.	References and citations have errors.	References and citations have few errors.	References and citations have rare errors.