



Rhapsody of Child's Colostomy Care

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DOI: 10.31080/ASPE.2020.03.0195

Received: December 11, 2019

Published: December 17, 2019

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Abstract

The reporter of this study says Colostomy care of particularly nursing change of ostomy bag when they 3/4 full be emptied for skin hygiene associated to immunity of the child's body socially, physically and psychologically.

Keywords: Colostomy; Bowel; Child

Objectives and subjective observation by client and nurse is prevalence to the lifestyle and cosmetic looks of a child.

Colostomy; opening of the bowel to allow faecal removal from the body assuredly

- Surgery: Cutting to open up and treat organs in question
- Borborygmus: High pitched bowels sounds
- Enterostomist: Specialized nurse capable for ostomy wound care.

Article content

Clinical trials of a colostomy wound care necessary to meet the needs of child's immunity and physiological needs evidenced based answers by nursing with empathy, confidentiality, neatness of site, and collaboration with medical paedritian is imminent to cure the child.

Anatomy and physiology preview

The anatomy of the abdomen begins with the duodenum, ileum, forming the small intestine, then the large intestine comprising of caecum, rectum and anus. The digestion tract serves to take food into the body by ingestion, food is breakdown into absorption by selective reabsorption and egested out waste products. The an-cesorry organs responsible are liver, pancreas and gallbladder.

Food movement is by peristalsis and enzymatic biological actions. Absorption done by the villi for blood cells and fatty cells by lymph nodes. The gastrointestinal tracts consist of mouth, pharynx, oesophagus, stomach, small intestine and large intestine.

The physiology of the large intestine is to reabsorb water and store and eliminate undigested food. In Case in which the body cannot do this as a result fall, accident then colostomy need to be done. Hormones also through parasympathetic stimulation increases digestion and sympathetic decreases digestion. Colostomy according to Dr Mensah of Effian Nkwanta regional hospital Sekondi, in Western region of Ghana says when the purpose of a thing is not know abuse become inevitable. Colostomy is opening and creating a bypass in the large intestine of the abdomen as a form of stoma to allow faecal egestion artificially. A cancerous lesson, an ulcerative inflammatory process: A cancer is abnormal multiplication of wrong unhealthy cells and tissues due to diseases. In traumatic injury of bowel the clinical indication is a simply colostomy.

There are four methods and types of colostomy which are sigmoid, descending, transverse and ascending, single bowel colostomy, double barrel colostomy.

Nursing Care of a colostomy child

- First of all get a clinical ostomy enteropist in endostormal wound care to look after the child with a colostomy to treat wound in an aseptic ways.
- Secondly, The registered nursing should employed psychology and counselling to bring hope for the despair and readiness to live even with the condition with joy and happiness.

Conclusion

In a concise function colostomy is creation of hope in the large intestine to allow faecal passing. Generally the large intestine is the concern organ for the site marking and procedure done. The subjective matter of the clinical is pivotal to the total wellness of client as evidence awareness, and empathy allocation from care givers. The hope of the client to achievement of end of colostomy is the objective mark of distinction. Reaction from partners and parent is necessary a good on looker for the sigma free and confidentiality of the practice of care.

Bibliography

1. Sonabend A., *et al.* "Oncogenesis and mutagenesis of pituitary tumors, *Eipert Rev Anticancer*". The 6 (2006): 53-514.
2. A child's spine by George Tsibu RN (2017).
3. Cecconi M., *et al.* "Fluid challenge in intensive care: the FENICE study: a global inception cohort study". *Intensive Care Medicine* 4.9 (215): 1529-1537.

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