Original Investigation

Stoma Perceptions of Adults with an Ostomy: A Metaphor Analysis in a Single Center

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ABSTRACT

OBJECTIVE: To use metaphor to evaluate stoma perceptions among adults with ostomies to conceptualize and portray their lived experiences using a figurative approach.

METHODS: A qualitative research design was used. Participants were 27 adults with an ostomy who were followed up in the stoma therapy unit. Individuals were included in the study if they had had a temporary or permanent ostomy for at least 2 months and spoke Turkish. Participants were asked to complete the sentence: "Stoma is like…/similar to… because…." The researchers used content analysis to evaluate participants' responses. Interpretation of the metaphors developed by participants was carried out in five phases: coding, example metaphor compilation, theme development, ensuring trustworthiness, and transferring.

RESULTS: Participants expressed a total of 17 unique and 10 repeated metaphors for the concept of "stoma." These metaphors were grouped under three different themes: positive (lifesaving), negative (punishment/enemy), and neutral (temporary/necessity for life). The most commonly used metaphors were life, savior, comfort, difficulty, fear, punishment, and necessity.

CONCLUSIONS: Individuals with an ostomy mostly had negative metaphorical associations with stomas. The authors recommend that hospitals implement multifaceted interventions to bring positive metaphors to individuals with ostomies.

KEYWORDS: content analysis, metaphor, ostomy, qualitative, stoma

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INTRODUCTION

Intestinal stomas are widely used in the surgical treatment of colorectal cancers, ulcerative colitis, Crohn disease, diverticular diseases, imperforate anus, traumas, intestinal obstructions, familial polyposis, and congenital anomalies.[1] An estimated 750,000 to 1 million individuals in the United States have an ostomy.[2] Yılmaz et al[3] determined that between 2017 and 2019, there were 22,557 individuals in Turkey with an ostomy.

Although stoma surgery is performed to prolong a patient's lifespan, it can be difficult for individuals to adapt to having the ostomy. Having an ostomy requires individuals to change their lifestyle, in addition to experiencing changes in body integrity and intestinal evacuation.[4-6] As a result, they can experience physiologic, sociological, and psychological problems.[5,7] Individuals may feel insecurity and fear rejection in their social and sexual lives because of their stoma.[8-10] They also may experience social isolation because they fear leakage from the ostomy bag. As a result of avoiding social activities, the family and social relations of the individual with an ostomy are also affected.

Metaphor

Metaphors are symbolic or figurative connotations used to describe an object or action. They are important organizational elements in thinking and talking about complex phenomena and can help determine how concepts are perceived by people.[12] People often use metaphors when describing their own feelings and thoughts or the feelings and thoughts of others. Thus, metaphor is useful in terms of determining individuals' life views and revealing their perceptions of events.[13,14]

Metaphors have the potential to deepen understanding of phenomena, generate new insights, and challenge old perceptions. In qualitative research, metaphors should be taken seriously, with careful consideration of how they are used and whether they fit the data. At best, metaphors illuminate; at worst, they distort or obscure.[12]

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There are a limited number of metaphor studies in the literature.[15-17] Yeşilbalkan et al[15] conducted a metaphor study on the concept of "cancer" with 166 nursing students. The students mostly compared cancer with metaphors involving negative themes, such as "death," "war," "virus," "malady," and "spider." The students presented a framework for understanding the concept of cancer in all aspects with metaphors.[15] Gao et al[16] conducted a metaphor study with OR nurses to interpret the surgery experience in organ procurement. The metaphors of the nurses aligned with four main themes: "The surreality of experiencing death," "Personal and professional challenges," "Becoming stronger," and "My beliefs, my wishes." The authors found that, using the metaphor method, nurses provided valuable information about the personal and professional difficulties they encountered in organ procurement, how they coped with these difficulties, what support and care they needed from others, and suggestions for future practices.[16] Finally, in the metaphor study by Black[17] on the long-term effects of colorectal cancer treatment on quality of life, patients described evocative metaphors for their cancer such as "wild," "sick," and "mutant." As a result, metaphor helped nurses identify patients' needs in terms of independence and quality of life in the disease and survival experience of patients after colorectal cancer.[17] Essentially, metaphor studies help us understand patients' perspectives toward their illness or current condition.

Study Purpose

It is important to understand how individuals with a stoma perceive their lived experience to help facilitate adaptation to the stoma and contribute to these individuals receiving adequate professional support. Therefore, the aim of this study was to evaluate the metaphorical perceptions of individuals with an ostomy[11] regarding the concept of "stoma." The authors used metaphor to encourage participants to conceptualize and portray their lived experiences in a figurative approach.

The study questions were as follows:

1. What are the metaphors used by adults with an ostomy regarding the "stoma"?
2. What themes characterize these metaphors produced by adults with an ostomy?

METHODS

Study Design

Researchers used a qualitative research model and phenomenology design to determine the perceptions of individuals with a stoma through metaphor analysis. This design focuses on phenomena for which we do not have an in-depth or detailed understanding.[18-20] The purpose of collecting data with metaphors is to obtain information about how individuals perceive events and the meanings attributed to metaphors.[12-14,18,19]

Conceptual Framework

Lakoff and Johnson[20] argued that the concepts that guide our thinking also guide our daily activities down to the most mundane details. They emphasized the effect of perceptions on our world and noted how effective metaphor is in determining these perceptions.[20] Metaphors are rhetoric, generally intended to embellish discourse, but their importance is much deeper, and their use can offer a way of seeing and thinking that helps one comprehend the world. Therefore, understanding how adults with an ostomy perceive stoma through metaphor will contribute to the recognition of the problems experienced by these individuals[21] and help offer solutions.

Research Team

Both researchers work as academic nurses in the faculty of nursing and are trained in conducting qualitative research. The first researcher took a qualitative research course during her doctoral education. The second researcher teaches qualitative research at the faculty of nursing and the institute of health sciences. She attended qualitative research courses in Turkey as an educator.

Participants

Participants were individuals with a stoma who were followed in the stoma therapy unit of the authors' university hospital. Individuals were included in the study if they had had a temporary or permanent stoma for at least 2 months; were oriented to person, place, and time; spoke Turkish; and volunteered to participate. Patients were excluded if their stoma was closed during the study.

Criterion and maximum variation sampling methods were used. In the study, criterion sampling was chosen because there were criteria for acceptance of individuals with stoma. Maximum variation sampling was used to identify differences and find significant commonalities.[22] Data were collected until the saturation point was reached at the 25th patient.[23] The researchers also took into consideration the recommendation by Rubin and Babbie[24] to study between 3 and 10 samples in phenomenological studies.[24]

Data Collection

Study data were collected using a semistructured form developed by the researchers in line with their experience with stomas and the academic literature.[1,11,18,21] The form consisted of two sections. The first section included 11 questions on sociodemographic characteristics, the type of ostomy, and the reason for the ostomy creation. In the second part, participants were asked to complete the sentence: "Stoma is like…/similar to… because…." If a participant did not understand this sentence completion task, the researcher asked, "What does a stoma look like? Why?" Before data collection, the researchers obtained

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expert opinion regarding the first and second parts of the data collection form. A colorectal surgeon, stoma therapy nurse, and academician nurse reviewed and approved of the form. In addition, the authors conducted a literature review to inform the metaphor sentence.[15,16,24–27]

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Study Procedure

When individuals came to the stoma therapy unit, the researcher asked them the questions in the first part of the data collection form prior to stoma care. After stoma care, the researcher offered an example of a metaphor, "The physician is like an encyclopedia because he knows more than most people do," so that participants would understand how to complete the second part of the interview. After providing the example, the researcher asked the participants to complete the prompt. The researcher wrote down the individual's response.

Data Analysis

The researchers evaluated the metaphors obtained in the research using content analysis. Both researchers read all of the data collection forms for metaphor analysis several times. This step is particularly important as some metaphors can be vague.[28]

The dictionary definition of each given word for the concept of "stoma" was checked using the metaphor analysis defined by Pragglejaz.[28] The dictionary provides the literal meanings of words. Therefore, it is understood that every word given outside the dictionary meaning is a metaphor. Pragglejaz[28] identified five key steps toward finding metaphorical words and expressions.

Step 1: Coding and Extraction. Researchers read all responses to the concept of "stoma" to gain a general understanding of the context in which the metaphors arise. Then, the words in the text were marked, and a list was created by arranging them in alphabetical order. Each of the patient's metaphor expressions was coded (eg, enemy, life, etc), and the metaphor was defined.

Step 2: Example Metaphor Compilation. The researchers looked for similarities or common characteristics among the metaphors. Each metaphor was divided into analyzable parts, and common characteristics were sought.

Step 3: Theme Development. Each metaphor was decomposed into parts using content analysis techniques. Metaphors with common features were gathered in groups. Three different themes were created from the metaphors divided into groups.

Step 4: Ensuring Validity and Reliability (Trustworthiness). Expert opinion (peer debriefing) was obtained to ensure the reliability of the metaphors. The nurse professor, who specializes in qualitative research, examined the lists containing themes and codes. Then, the metaphor and theme matching made by the expert and the metaphor coding created by the researcher were compared. Intercoder reliability was used to evaluate the reliability of metaphors in this study using the formula by Miles and Huberman.[29,30] A reliability (consensus) ratio of 96% was obtained.

Step 5: Transferring the Metaphor to the Computer Environment. At this stage, the researchers transferred the metaphors to a Microsoft Excel file (Microsoft Corp) and calculated the number of metaphor expressions.

Trustworthiness in Research

The trustworthiness of the research was established by the criteria of credibility, transferability, dependability, and confirmability.

Credibility. When participants provided their metaphorical perceptions, they were also asked to explain the reason. The stoma therapy unit nurse was with the researcher during data collection and could confirm what participants said. The process and metaphor analysis were examined with expert opinion (peer debriefing).

Transferability. Researchers used criterion and maximum variation sampling from the purposive sampling method, determined acceptance criteria, introduced the location where the research was conducted, and included detailed information about the participants.

Dependability. Two researchers were involved in the collection, analysis, and interpretation of the data. A literature review was conducted to ensure reliability. The research method is explained in detail.

Confirmability. The statements of the participants were included in the findings, as well as field notes for raw data. In addition, the characteristics of the participants and the metaphors are given in detail in the table.[22,31]

Ethical Considerations

Ethical permission (decision no. 2021/16-06, date: May 27, 2021) was granted from the noninterventional ethics committee of the university to which the institution is affiliated. The institution where the study was conducted provided written permission (no. E-72292585-00.99-43150, date: April 13, 2021). In addition, informed consent about the purpose and method of the study was obtained from all study participants.

RESULTS

A total of 27 individuals with a stoma (18 men, 9 women) participated in the study (Table 1). Participants ranged in age from 24 to 72 years; 16 had temporary stomas, and 11 had permanent stomas. The most common stoma type was colostomy (22/27). Most of the participants were married (25/27) and had undergone ostomy surgery for colorectal cancer (23/27).

The metaphors and the themes created from these metaphors are shown in Table 2. Participants produced 17 unique metaphors; an additional 10 metaphors for stoma were similar to these 17. The researchers examined the

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Table 1. PARTICIPANT CHARACTERISTICS

Participant	Sex	Age, y	Education Status	Employment Status	Marital Status	Stoma Type	Stoma Location	Diagnosis	Chemotherapy Status	Radiotherapy Status	Stoma Duration
P1	M	72	High school graduate	Retired	Married	Temporary	Colostomy	Diverticulum perforation	No	No	2 mo
P2	M	55	Secondary school graduate	Tourism professional	Married	Permanent	Colostomy	Colorectal cancer	Yes	Yes	2 mo
P3	F	57	High school graduate	Retired	Married	Permanent	Colostomy	Colorectal cancer, inflammatory bowel disease	Yes	Yes	1 y, 2 mo
P4	F	70	Literate person	Homemaker	Married	Temporary	Ileostomy	Colorectal cancer	Yes	No	3 mo
P5	F	35	University graduate	Homemaker	Married	Temporary	Colostomy	Colorectal cancer	Yes	No	2 mo
P6	M	70	Literate person	Retired	Married	Temporary	Colostomy	Colorectal cancer	Yes	No	2 mo
P7	M	66	High school graduate	Retired	Married	Permanent	Colostomy	Colorectal cancer	Yes	Yes	2 m
P8	F	41	Literate person	Homemaker	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	3 y
P9	M	72	Primary school graduate	Retired	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	7 mo
P10	M	52	Primary school graduate	Retired	Married	Temporary	Colostomy	Volvulus	No	No	3 mo
P11	M	66	University graduate	Retired	Married	Permanent	Ileostomy	Colorectal cancer	Yes	Yes	10 y
P12	F	64	Primary school graduate	Homemaker	Married	Permanent	Colostomy	Colorectal cancer	Yes	Yes	2 mo
P13	M	56	High school graduate	Retired	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	4 y
P14	M	61	High school graduate	Retired	Married	Permanent	Urostomy	Colorectal cancer	No	No	7 mo
P15	M	68	Literate person	Retired	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	2 y
P16	M	75	Primary school graduate	Retired	Married	Permanent	Colostomy	Colorectal cancer	Yes	Yes	5 mo
P17	M	48	University graduate	Self-employed	Married	Permanent	Colostomy and urostomy	Colorectal cancer, bladder cancer, Fournier gangrene	Yes	Yes	1.5 y
P18	M	24	High school graduate	Columnist	Single	Permanent	Ileostomy	Crohn disease	No	No	7 y
P19	M	65	Secondary school graduate	Retired	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	6 mo
P20	M	64	High school graduate	Musician	Married	Permanent	Colostomy	Colorectal cancer	Yes	Yes	5 y
P21	F	57	Primary school graduate	Homemaker	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	9 mo
P22	M	38	High school graduate	Convict	Single	Temporary	Colostomy	Gunshot wound	No	No	3 y
P23	F	59	High school graduate	Retired	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	1 y
P24	F	54	High school graduate	Retired	Married	Temporary	Colostomy	Colorectal cancer	Yes	Yes	8 y
P25	M	60	Primary school graduate	Retired	Married	Temporary	Colostomy	Colorectal cancer	No	No	2 mo
P26	F	69	Primary school graduate	Homemaker	Married	Permanent	Ileostomy	Colorectal cancer	Yes	Yes	2 mo
P27	M	70	Primary school graduate	Retired	Married	Temporary	Colostomy	Colorectal cancer	No	No	4 mo

Abbreviations: F, female; M, male.

common characteristics of these metaphors and grouped them into three themes: positive (lifesaving), negative (punishment/enemy), and neutral (temporary/necessity for life). The metaphors produced by the individuals with a stoma were evaluated within the framework of the determined themes.

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Table 2. STOMA METAPHORS EXPRESSED BY PARTICIPANTS

Metaphor	No. of Individuals Expressing Concept
Theme 1: Positive (lifesaving)	
Life	3
Way of salvation	2
Savior	2
Comfort	2
Theme 2: Negative (punishment/enemy)	
Past mistake	1
Difficulty	2
Fear	2
Restraint	1
Something inanimate	1
Punishment	2
Misfortune	1
Grind	1
Enemy	1
Barrier	1
Theme 3: Neutral (temporary/necessity)	
Obligation	2
Part of destiny	1
Part of body	2
Total	27

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Theme 1: Positive (Lifesaving)

Metaphors within this theme pertained to individuals with an ostomy accepting their stoma and seeing it as lifesaving. Individuals with permanent ostomies expressed more positive metaphors.

"*My stoma is like life to me. Because it is necessary for my health to come back. I don't hate it.*" (P1)

"*My stoma is like a way of salvation for me. Because I have been suffering from ulcerative colitis for 35 years. I spent my life in toilets. My work life has always been problematic. Always stomachache. Right now, it's a life of luxury.*" (P3)

"*The stoma is like a savior. Because it helped me get rid of the disease. Gave a second life.*" (P14)

"*The stoma is like comfort. Because I could continue my normal life. I can continue with my life thanks to the stoma.*" (P23)

Theme 2: Negative (Punishment/Enemy)

Metaphors in this theme involve rejecting the stoma or viewing it as a punishment or enemy because it limits the participant's life. In particular, individuals receiving chemotherapy expressed more negative metaphors.

"*My stoma is like fear. Because he took revenge on us for not using our bodies well.*" (P10)

"*The stoma is like a restriction. Because you can't do anything. Social life was restricted.*" (P11)

"*The stoma is like punishment. Because I have committed crimes in the past. God punished me. We made a mistake somewhere.*" (P15)

"*The stoma is like a barrier. Because when my stoma was opened, I lived a completely different life. It is a complicated situation. I feel the need to hide from people.*" (P18)

Theme 3: Neutral (Temporary/Necessity for Life)

Metaphors in this theme related to stoma as a necessity for life. Individuals also mentioned wanting the stoma to be closed as soon as possible. Patients with temporary stomas and those undergoing chemotherapy often voiced this theme.

"*My stoma is like an obligation to me. Because it's not nice. Gas comes out when you sit. Then I am ashamed of people. It feels shameful.*" (P6)

"*My stoma is like an obligation to me. Because I am trying to get used to the new lifestyle. Who doesn't want to be healthy, even if it's better than tying a diaper under?*" (P7)

"*My stoma is like a part of my body. Because I am used to it. However, I could not fully embrace it because it was temporary.*" (P8)

"*My stoma is like a part of destiny. Because at first, I found the stoma very strange. Now it has become a part of the body. But despite everything, I would like the stoma to be taken in.*" (P13)

DISCUSSION

Metaphors are powerful mental tools used to understand and explain abstract, complex, or theoretical phenomenon. Asking individuals with a stoma to express their perceptions of their stoma through metaphor can convey their perspective on life with a stoma and their adaptation to their changing lifestyle. The language used to describe a stoma strongly influences how it is experienced and perceived.[17] In this study, the 27 participants expressed 17 unique and 10 repeated metaphors. The most common metaphors conveyed were life, savior, comfort, difficulty, fear, punishment, and obligation. This variety of metaphors show that individuals with ostomies have different perspectives on their stoma and that adaptation to life with a stoma varies.

Theme 1: Positive (Lifesaving)

Participants stating that a stoma is like life, salvation, savior, luck, or comfort indicates that these individuals adapted to life with a stoma positively. Acceptance of the stoma is the first step for a positive and rapid adjustment to the ostomy. Acceptance of both the disease causing the stoma and the postsurgical outcome accelerates individuals' adaptation to the new body systems and life changes.[5]

In a study in which perspectives on the needs of adults with an ostomy and colorectal cancer were synthesized, the authors emphasized that providing information about

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the disease is important for survivors of colorectal cancer to cope with current and future problems.[32] In addition, the support of relatives, family, and health professionals has a positive effect on patients' acceptance of the disease and desire to survive. Determining the special needs of adults with a stoma can help them adapt and maintain their quality of life.[32]

In the present study, participants' expression of positive metaphors about their stoma shows that these individuals accept the disease and treatment process with a positive perspective and see it as lifesaving. Individuals with a permanent stoma may have produced more positive metaphors because of the identification of their special needs and adaptation to living conditions.

Theme 2: Negative (Punishment/Enemy)

Individuals with a stoma who described the stoma as being like error, punishment, torture, or a barrier may produce these negative metaphors because they are having difficulty in adapting to life with a stoma. Patients' quality of life declines after a stoma is opened, especially in terms of physical well-being.[8,32,33] Individuals with stoma who produce negative metaphors may reject the change in body integrity and may experience more stoma complications. As a result, they consider the stoma to be a punishment or enemy.

Çevik et al[35] found that individuals with a stoma reported problems with stoma care, peristomal skin, gas output, product supply, and product application. These difficulties negatively affect patient adherence. Further, individuals who care for their stoma themselves have better adjustment than do those whose relatives provide stoma care.[35] In the present research, participants who produced negative metaphors may have faced similar problems as those described by Çevik et al.[35] In particular, participants who received chemotherapy and who had temporary ostomies produced more negative metaphors. Because postoperative adjustment is affected by preoperative education,[36] it is possible that the patients expressing negative metaphors did not receive sufficient preoperative education.

Theme 3: Neutral (Temporary/Necessity for Life)

Describing the stoma as an obligation, destiny, or a part of the body indicates that those participants recognize that the stoma is necessary for their treatment but have not fully adapted to it. Individuals with a stoma may feel they do not have full control over their life, have worries about family and social life, and move to a more sedentary life.[32] Individuals with a temporary stoma and those receiving chemotherapy used neutral metaphors, including that the stoma was required for their health.

The most important initiative for stoma acceptance, adjustment, and management of difficulties is information.[1,3,5,9] In a qualitative analysis of the difficulties experienced by individuals with a stoma, Sun et al[37] found that bleeding, pain, leakage, skin problems, use of paste, stoma care time, and stoma cleaning were described most often. Stoma therapy nurses play the largest role in the management of these difficulties and strengthen patients' coping methods.[1,3,5,9]

In this study, participants who express neutral metaphors for the stoma may have accepted it as an idea but have difficulty in adapting it to their lives. They consider it a temporary requirement for life. Kalayci and Duruk[11] reported that individuals with a stoma described problems with sleep, stoma care, diet, sexuality, finances, and physiologic and psychologic problems with their family and friends.[11]

Adapting to Life with a Stoma

Individuals' perceptions of living with a stoma begin before surgery and continue throughout life. Krogsgaard et al[1] stated that individuals with stoma gradually adapt to the stoma. Similarly, Petersén and Carlsson[6] found that individuals with an ostomy experience uncertainty because of the loss of bowel control, and it takes time for them to adapt to a new life.[6] Before ostomy surgery, providers should explain the purpose of opening the stoma and provide education about living with an ostomy. The provider can tailor the conversation to discuss the effects of having an ostomy according to the patient's current living habits before the stoma is opened.[6,8,32-34] Factors such as financial status, social life, family/partner support, education level, and religious beliefs all help form an individual's lifestyle and can affect perceptions about stoma.[8] Interventions beginning before the stoma is opened and continuing after surgery will contribute to individuals' positive metaphorical perceptions by supporting their insights into life with a stoma, help prevent physical and psychosocial problems, and facilitate adaptation.

In a metaphor study with patients with cancer, Black[17] emphasized the importance of supporting individuals who produce negative metaphors such as "wild," "sick," and "mutant."[17] In Byfield's[4] study, individuals with ostomies stated that they returned to their old lives more easily thanks to a support group initiative. Online or face-to-face support group initiatives may be beneficial for individuals with negative and neutral metaphorical perceptions.

Limitations

Because this study was conducted in a single center, the results cannot be generalized to all individuals with a stoma. In addition, participants with low education levels had difficulty in understanding the concept of metaphor. The researcher who collected the data explained the concept of metaphor by providing an example. In the hospital where the research was conducted, stoma surgeries are usually temporary, and ostomies are closed after an

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average of 3 months. For this reason, individuals living with a stoma for at least 2 months were included. Metaphors may have been affected by this short duration.

CONCLUSIONS

Metaphors can help reveal incomplete adaptation or hidden problems of individuals with a stoma. The 27 participants in this study provided 17 unique and 10 repeated metaphors across three themes: positive, negative, and neutral. Participants predominantly produced negative metaphors for stoma. Future research on the metaphorical perceptions of stomas should draw larger, multicultural participant samples from multiple centers.

In line with the findings of this study, the researchers recommend that hospitals implement multidimensional interventions to educate individuals with a stoma and encourage them to have a more positive perspective. Among these initiatives, stoma schools and support group activities could be organized. These activities should start in the preoperative period and be continued in line with the needs of the individual.

Implications for Practice

Using metaphors is a creative approach to conceptualization and is important for the interpretation of the experiences of individuals with stoma. Metaphor can be used to understand and present the lived experiences of individuals with stoma; thus, it also contributes to nursing care.

In this study, patients who received chemotherapy and had temporary ostomies expressed more negative views. It may be beneficial for nurses to develop individual care protocols for stoma care before and after surgery for these patients. Because of the adverse effects of chemotherapy,[38] patients with cancer may have difficulty adapting to the stoma. Providers should prepare patients for the chemotherapy process preoperatively and determine patients' information and professional support needs during the chemotherapy period. In doing so, nurses will help individuals accelerate their adaptation to the stoma. ●

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