

An Atypical Peristomal Ulcer

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Problem

- A 44-year-old woman with a colostomy for metastatic rectal cancer developed large incisional and parastomal hernias.
- A hernia belt was used to decrease symptoms from the hernias; however, due to ongoing pain and nausea, she was scheduled for palliative surgical repair.
- She received panitumumab which is a monoclonal antibody used in treatment of metastatic colon cancer.¹ Panitumumab attaches to the epidermal growth factor receptor to inhibit tumor growth.¹
- Doxycycline was prescribed to prevent skin toxicities related to panitumumab.² Nevertheless, a rash developed three days after starting the medication.

Significance

- Skin toxicities can occur with panitumumab which include rash or dermatitis.³
- Dermal ulcers occur in 6% of patients receiving panitumumab.⁴

References

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Case Study Did panitumumab cause or contribute to the development of this ulcer?

1/16/2023 – An ulcer developed from a rash pustule ten weeks after starting panitumumab. The wound measured 0.7 x 1.0 x 0.2 cm. Treatment included hypochlorous acid topical solution to clean the ulcer. The wound was dressed with silver hydrofiber and hydrocolloid dressings. The pouch system remained a flat two-piece wafer with a barrier ring. The hernia belt was limited to 2-hour intervals to reduce pressure.



2/6/2023 – The ulcer substantially increased in size to 1.7 x 3.3 x 0.2 cm. Pain increased in ulcer to 7/10. A culture was obtained to rule out infection. To decrease the bacterial load of the wound, the plan was modified to cadexomer iodine gel with hydrofiber and hydrocolloid dressings. The pouch system was modified to a one-piece pouch with a ring. The wound culture resulted in no growth.



2/20/2023 – After a treatment break from panitumumab due to toxicities, the ulcer decreased in size to 1.7 x 3.0 x 0.1 cm. Edges of ulcer started to show epithelization. The patient no longer had any pain in her ulcer.



3/6/2023 – The ulcer measured 1.2 x 2.0 x 0.1 cm with hypergranulation tissue requiring treatment. Chemical cautery was performed. The plan of care remained unchanged.



Outcome

3/22/2023 – The ulcer epithelialized. The patient underwent the incisional hernia repair with mesh and a parastomal hernia repair.



Conclusion

- Panitumumab was believed to cause this peristomal ulcer.
- Dermatological issues can occur under an ostomy pouch system.
- A wound care provider must evaluate wound and ostomy patients holistically to determine all potential causes and contributing factors effecting peristomal ulcers.