

or “sickly,” inability to compete with peers, and necessary absence from school during exacerbations of the illness (see [Impact of the Child's Chronic Illness, Chapter 17](#)).

If a permanent colectomy-ileostomy is required, the nurse can teach the child and family how to care for the ileostomy. The nurse can also emphasize the positive aspects of the surgery, particularly accelerated growth and sexual development, permanent recovery, the eliminated risk of colonic cancer in ulcerative colitis, and the normality of life despite bowel diversion. Introducing the child and parents to other ostomy patients, especially those who are the same age, is effective in fostering eventual acceptance. Whenever possible, offer continent ostomies as options to the child, although they are not performed in all centers in the United States.

Because of the chronic and often lifelong nature of the disease, families benefit from the educational services provided by organizations such as the Crohn's and Colitis Foundation of America.\* If diversionary bowel surgery is indicated, the United Ostomy Associations of America<sup>†</sup> and the Wound, Ostomy and Continence Nurses Society<sup>‡</sup> are available to assist with ileostomy care and provide important psychological support through their self-help groups. Adolescents often benefit by participating in peer-support groups, which are sponsored by the Crohn's and Colitis Foundation of America.

## Peptic Ulcer Disease

PUD is a chronic condition that affects the stomach or duodenum. Ulcers are described as gastric or duodenal and as primary or secondary. A **gastric ulcer** involves the mucosa of the stomach; a **duodenal ulcer** involves the pylorus or duodenum. Most **primary ulcers** are idiopathic or associated with *Helicobacter pylori* infection and tend to be chronic, occurring more frequently in the duodenum ([Blanchard and Czinn, 2016](#)). Secondary ulcers result from the stress of a severe underlying disease or injury (e.g., severe burns, sepsis, increased intracranial pressure, severe trauma, multisystem organ failure) and are more frequently gastric with an acute onset ([Blanchard and Czinn, 2016](#)).

About 1.8% to 5% of children in North America are diagnosed with PUD ([Sullivan, 2010](#)). Primary ulcers are more common in