

Social impacts, signs of depression and family functioning in elderly people with ostomies

Impactos sociais, sinais de depressão e funcionalidade familiar em idosos com estomias

Impactos sociales, signos de depresión y funcionalidad familiar en personas mayores con ostomías

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Abstract:

Objective: to investigate signs of depression, assess family functioning, and understand the social difficulties of elderly people related to ostomies. **Methods:** observational, descriptive, cross-sectional, quantitative research conducted in 2023 with elderly people treated by the Stomatherapy Sector of a university outpatient clinic. Data were obtained through interviews and the application of the abbreviated Geriatric Depression Scale and Family APGAR. These were analyzed through descriptive and inferential analyses, using statistical tests to verify associations between variables. **Results:** a total of 139 elderly people participated. Women predominated with discomfort caused by stool leakage under the bag barrier in public ($p=0.027$) and insecurity regarding bag detachment ($p=0.001$). However, most older adults did not present symptoms of depression. Most presented healthy family functioning (80.6%), although women had greater family support than men ($p=0.021$). **Conclusion:** by identifying difficulties and discomfort among elderly people regarding ostomies, this study supports the development of more effective care strategies, focusing on improving the quality of life of this population.

Keywords: Health of the Elderly; Ostomy; Emotions.

Resumo:

Objetivo: investigar sinais de depressão, avaliar a funcionalidade familiar, além de conhecer as dificuldades sociais dos idosos relacionados à estomia. **Método:** pesquisa observacional, descritiva, transversal, quantitativa, efetuada em 2023, com idosos atendidos pelo no Setor de Estomaterapia de um ambulatório universitário. As informações foram obtidas por meio de entrevistas e da aplicação das escala de Depressão Geriátrica abreviada e APGAR Familiar, sendo estas analisadas por meio de análises descritivas e inferenciais, utilizando testes estatísticos para verificar as associações entre as variáveis. **Resultados:** participaram 139 idosos. Observou-se predomínio de mulheres com desconforto causado pelo vazamento de fezes sob a barreira da bolsa em público ($p=0,027$) e a insegurança em relação a um descolamento da bolsa ($p=0,001$). Todavia, a maioria dos idosos não apresentavam sintomas de depressão. A maioria apresentou boa funcionalidade familiar (80,6%), apesar das mulheres terem um maior suporte familiar em relação aos homens ($p=0,021$). **Conclusão:** ao identificar dificuldades e desconforto dos idosos em relação às estomias, este estudo subsidia o desenvolvimento de estratégias de cuidado mais eficazes, com foco na melhoria da qualidade de vida dessa população.

Palavras Chave: Saúde do Idoso; Estomia; Emoções.

Resumen:

Objetivo: investigar signos de depresión, evaluar la funcionalidad familiar, además de conocer las dificultades sociales de las personas mayores relacionadas con la ostomía. **Método:** investigación observacional, descriptiva, transversal, cuantitativa, realizada en 2023, con personas mayores atendidas en el Sector de Estomaterapia de un ambulatorio universitario. La información se obtuvo por medio de entrevistas y la aplicación de la escala de Depresión Geriátrica abreviada y el APGAR Familiar, siendo estas analizadas mediante análisis descriptivos e inferenciales, utilizando pruebas estadísticas para verificar las asociaciones entre las variables. **Resultados:** participaron 139 personas mayores. Se observó un predominio de mujeres con malestar causado por la fuga de heces bajo la barrera de la bolsa en público ($p=0,027$) y la inseguridad en relación con un desprendimiento de la bolsa ($p=0,001$). Sin embargo, la mayoría de las personas mayores no presentaban síntomas de depresión. La mayoría presentó una buena funcionalidad familiar (80,6%), a pesar de que las mujeres tuvieron un mayor apoyo familiar en relación con los hombres ($p=0,021$). **Conclusión:** al identificar las dificultades y el malestar de las personas mayores en relación con las ostomías, este estudio subsidia el desarrollo de estrategias de cuidado más eficaces, con un enfoque en la mejora de la calidad de vida de esta población.

Palabras Clave: Salud del Anciano; Estomía; Emociones.

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INTRODUCTION

By 2030, the estimate is that one in six people in South, Central, and North America will be over the age of 60¹. Aging is a physiological and irreversible process characterized by biological, social, and psychological changes, which can gradually compromise the autonomy and functional independence of older adults. In the early stages, many older adults are still capable of independently performing activities; however, as functional capacities progressively decline, the demand for specialized care increases²⁻⁴.

In this scenario, there is a greater vulnerability to chronic noncommunicable diseases, especially neoplasms, due to their high prevalence, impact on quality of life, and the need for interventions aimed at slowing their progression⁴⁻⁵.

Late diagnoses delay treatment, making cases even more complex, increasing hospitalizations, and consequently leading to more aggressive treatments⁶.

As a result of these neoplasms, ostomies may be necessary. These surgical interventions involve the exteriorization of segments of the intestine through the abdominal wall, aiming to maintain organic function by diverting bodily waste⁴⁻⁷.

Ostomies in the elderly have consequences for them and their families, with both physiological effects, due to digestive changes, and psychosocial effects⁵. Fear and insecurity related to possible stool leakage or unwanted odors can generate embarrassment, leading to social isolation^{5,8}. These factors also contribute to reduced self-esteem, exacerbated by difficulties in maintaining social and sexual relationships due to visible bodily changes^{5,8,9}.

Lifestyle adjustments after ostomy involve everything from acceptance of the new condition to the need for adaptation support⁸. These adaptations should consider specific factors, aiming to improve nursing care and the quality of life of this population⁹.

Increased life expectancy combined with greater exposure to risk factors may increase the number of older adults requiring ostomies. Determining how ostomies can affect the elderly, providing professional and family support, and identifying other aspects of elderly people's lives affected by ostomies is essential for developing evidence-based actions aimed at minimizing complications, improving quality of life, and providing care for elderly people living with ostomies.

Thus, this study aimed to investigate signs and symptoms of depression, assess family functioning among elderly people, and understand the social difficulties related to ostomies.

METHODS

This is an observational, descriptive, cross-sectional study with a quantitative approach, conducted in 2023, with individuals aged 60 or older with colostomy bags, ileostomies, and transversotomies, provided by the Unified Health System (*Sistema Único de Saúde* - SUS), and treated by the Stomatherapy Sector at the Amélio Marques Outpatient Clinic, located in a university hospital in the Triângulo Mineiro region.

To collect data, the authors developed a sociodemographic questionnaire that covered social and clinical variables of interest. Participants' signs of depression and family support were assessed using standardized instruments: the abbreviated Geriatric Depression Scale (GDS 15) and the family APGAR, validated for Brazil¹⁰.

The abbreviated Geriatric Depression Scale is a 15-question questionnaire with yes or no answers that addresses how the elderly person has been feeling during the past week. Scores below six points are considered normal; six to ten indicate signs of possible mild to moderate depression, and scores above 10 indicate possible severe depression. This indicator is used to screen for depressive symptoms in the elderly population, but it does not replace a diagnosis by mental health professionals¹⁰.

The Family APGAR instrument, validated for Brazil and recommended by the Ministry of Health, measures respondents' satisfaction with their family. It contains five questions, the answers to which highlight basic components of family functioning, including intrafamily adaptation, coexistence, communication, respect, affection, and family dedication. Responses are optional and divided into: almost always, sometimes, and almost never. The score obtained by the elderly individual allows the family to be classified into one of the following categories: Highly Functional (7 to 10 points), Moderately Dysfunctional (4 to 6 points), and Severely Dysfunctional (0 to 3 points)¹⁰.

For statistical analysis, the data were double-entered into Excel. Statistical analysis was then performed to validate both spreadsheets. They were then imported into the Statistical Package for Social Sciences (SPSS), version 23.0, for analysis.

The Kolmogorov-Smirnov test was used to verify quantitative variables. Normally distributed variables were expressed as means \pm standard deviations; non-normally distributed variables were expressed as medians with minimum and maximum values. Spearman's rank sum test was used for non-normally distributed variables, while Pearson's rank sum test was used for normally distributed variables. Pearson's chi-square test was used to examine possible associations between qualitative variables. A significance level of $\alpha = 5\%$ was adopted. SPSS for Windows was used.

The study was authorized by the Human Research Ethics Committee, approval number 6.133.247.

RESULTS

The study included 139 elderly participants, aged between 60 and 93 years. The sociodemographic information of the sample is described in Table 1. The majority were Catholic (56.8%), had low education (69.1%), did not live alone (71.9%) and had an average family income of 2,856BRL (Brazilian Reais).

Table 1. Elderly people with intestinal ostomies according to demographic variables. Uberlândia, Minas Gerais, Brazil, 2023.

Sociodemographic variables	Sample No. 139 (100,0%)
Average age	71
Religion	
Catholic	79 (56.8)
Protestant	37 (26.6)
Spiritist	09 (6.5)
Other	05 (3.6)
None	09 (6.5)
Educational level	
Incomplete Early Childhood Education	22 (15.8)
Complete Early Childhood Education	01 (0.7)
Incomplete Primary Education	60 (43.2)
Complete Primary Education	13 (15.8)
Incomplete Secondary Education	08 (5.8)
Complete Secondary Education	16 (11.5)
Incomplete Higher Education	06 (4.3)
Complete Higher Education	13 (9.4)
Individuals living in the household	
Alone	39 (28.1)
Partner and children	16 (11.5)
Partner and no children	39 (28.1)
Partner, children and other relatives	09 (6.5)
Relatives and no partner	33 (23.7)
People with no family and/or marital ties	03 (2.2)
Average total family income (in BRL)	2,856.00

Table 2 presents aspects related to social difficulties, discomfort, and emotional reactions of older adults after ostomy placement. Women reported greater discomfort due to stool leakage under the bag protective barrier in public settings ($p=0.027$) and insecurity regarding the bag's potential detachment ($p=0.001$). Furthermore, 45.3% of elderly people reported discomfort while sleeping due to the bag's presence.

Regarding feelings, women had the highest prevalence of sadness ($p=0.004$). Conversely, confidence was more frequently reported by men ($p=0.049$), although feelings of frustration were frequently expressed by both sexes (average of 27.3%).

Table 2. Feelings of elderly people with intestinal ostomies. Uberlândia, MG, Brazil, 2023.

Feelings after intestinal ostomy insertion	Male 69 (49.6%)	Female 70(50.4%)	p*
Social life affected	11 (15.9%)	20 (28.6%)	0.103
Embarrassment of bag showing through clothing	06 (8.7%)	11 (15.7%)	0.301
Nervousness around people they're not close to	06 (8.7%)	07 (10.0%)	1.000
Leaking under the barrier in public	15 (21.7%)	28 (40.0%)	0.027*
Involuntary flatus (gas) in public	15 (21.7%)	13 (18.6%)	0.677
When sleeping	26 (37.7%)	37 (52.9%)	0.089
Bag coming off	32 (46.4%)	52 (74.3%)	0.001*
Joy	02 (2.9%)	03 (4.3%)	1.000
Sadness	14 (20.3%)	31 (44.3%)	0.004*
Anger	01 (1.4%)	02 (2.9%)	1.000
Fear	09 (13.0%)	10 (14.3%)	1.000
Repulsion	03 (4.3%)	05 (7.1%)	0.718
Confidence	17 (24.6%)	08 (11.4%)	0.049*
Frustration	18 (26.1%)	20 (28.6%)	0.849
Hope	11 (15.9%)	11 (15.7%)	1.000
Indifference	08 (11.6%)	06 (8.6%)	0.586

*p-value: Chi-Square Test.

Table 3 presents the relationship between the groups of elderly individuals in terms of the presence of signs of depression, functioning, and family support. Statistical analysis did not identify a significant association between signs of depression when comparing the different groups of elderly individuals. Overall, most participants demonstrated good family functioning, although women reported receiving greater family support ($p=0.021$).

Tabela 3. Association between family functioning and depression in elderly individuals with intestinal ostomies. Uberlândia, Minas Gerais, Brazil, 2023.

Assessment of Depression and Family Functioning	Male 69 (49,6%)	Female 70 (50,4%)	p*
Geriatric Depression			0.296
No signs of depression	46 (66.7%)	40 (57.1%)	
Signs of depression	23 (33.3%)	30 (42.9%)	
Family APGAR			0.527
Healthy family functioning	54 (78.3%)	58 (82.9%)	
Presence of family dysfunction	15 (21.7%)	12 (17.1%)	
Presence of family support			0.021*
Yes	53 (76.8%)	64 (91.4%)	
No	16 (23.2%)	6 (8.6%)	

*p-value: Chi-Square Test.

DISCUSSION

The study revealed that the average age of ostomized elderly patients was 71 years, a disparity attributed to the greater maturity observed among the sample participants. Given that the average age of ostomy users is approximately 67 to 68 years¹¹⁻¹², this data reflects the aging population and the increase in diseases such as neoplasms, which require this type of intervention¹³.

This study observed that low educational levels were a factor present among ostomized elderly patients, which can represent a significant barrier to understanding self-care guidelines,

treatment adherence, and early identification of complications¹⁴. These findings corroborate previous studies, which also identified high illiteracy rates among people aged 60 and over, highlighting the impact of educational limitations on the delivery of health care in this population^{11,14-17}. As highlighted by an international study, this scenario requires the implementation of personalized educational strategies for the elderly to ensure a safe and coordinated transition between hospital and home care¹⁸.

On the other hand, a stable marital relationship stands out as a positive factor for the psychological and social well-being of people with ostomies, although changes in marital life and impact on sexuality are common. Partners who are involved in coping with lifestyle changes can contribute to a better quality of life¹⁹.

The presence of family is considered an important factor in ostomy care, as it contributes to social integration, providing a support network that facilitates adherence to care and treatment¹⁷. Family support provides security to the ostomized person, encouraging autonomy and social reintegration. Family members create essential rearrangements and adapt the home environment. The bond between family members and social interaction emerge as a positive impact²⁰. However, many elderly people significantly contribute to the family income, and these are more vulnerable to illness and social isolation²¹. The financial and healthcare burden associated with aging also takes a toll, especially in the treatment of diseases resulting from the anatomical and functional changes of advancing age²².

Religion plays an important role for these individuals, helping them cope with and understand the changes that ostomy use brings. Spirituality can lead to a better understanding of daily changes, helping them face challenges and accept the process. Exuding positivity brings people comfort, even when faced with problems, encouraging them to face adaptive challenges and strengthen self-care¹⁹.

In this study, recurring concerns were identified among elderly individuals with ostomies, particularly related to the risk of bag detachment and the discomfort caused by leaks in the protective barrier. These concerns were significantly more frequent among female participants ($p=0.001$ and $p=0.027$, respectively). These findings are consistent with other studies, which indicate that ostomy placement causes significant changes in individuals' lives, often associated with fears of leaks, bag detachment, and sleep disturbances^{8,16,23}.

Psychologically, feelings of sadness were more prevalent among women, although no statistical association with signs of depression could be established. Conversely, men demonstrated greater self-confidence. It was also noted that women reported receiving more

family support, which may be related to gender differences in coping. These data highlight the emotional impacts of ostomy, especially in the female context.

Use of the collection device is associated with negative feelings, such as sadness, which can trigger self-deprecating experiences related to feelings of mutilation, loss of health and self-esteem, as well as a decrease in self-efficacy and feelings of uselessness and chronic incapacity¹¹. The right to come and go is limited by fear and insecurity. Changes in daily life restrict leisure and social interaction, often confined to the family environment, which leads individuals with ostomies to feel more in control within their family environment⁸. However, gradual social participation can promote a sense of control and security among people with a stoma¹².

CONCLUSION

Elderly individuals reported discomfort caused by stool leakage under the bag protective barrier in public places and insecurity regarding bag detachment. Feelings of sadness were more prevalent among women, despite having greater family support.

Although this study has limitations, such as its cross-sectional design - which allows for the identification of associations but not the establishment of causal relationships, and its performance in a single stomatherapy outpatient clinic, the findings contribute to filling existing gaps on this topic. Among the strengths are the assessment of patients' emotional state and the identification of the support received by elderly individuals with ostomies.

Furthermore, the results point to new research directions and support the development of interventions that promote more effective care strategies, focusing on improving the quality of life of this population.

REFERENCES

1. Organização Pan-Americana da Saúde, Organização Mundial da Saúde. Envelhecimento saudável [Internet]. [Washington, D.C., EUA]: OPAS/OMS; [data desconhecida] [cited in 1 July 2025]. Available from: <https://www.paho.org/pt/envelhecimento-saudavel>
2. Cochar-Soares N, Delinocente MLB, Dati LMM. Fisiologia do envelhecimento: da plasticidade às consequências cognitivas. *Rev Neurociênc.* [Internet]. 2021 [cited in 25 June 2025]; 29. DOI: <https://doi.org/10.34024/rnc.2021.v29.12447>
3. Escorsim SM. O envelhecimento no Brasil: aspectos sociais, políticos e demográficos em análise. *Serv Soc Soc.* [Internet]. 2021 [cited in 1 July 2025]; 142:427-46. DOI: <http://dx.doi.org/10.1590/0101-6628.258>

4. Moreira JLS. Enfermeiros no cuidado de idosos com estomas de eliminação: estratégias educativas realizadas no pré-operatório e o impacto no autocuidado [monografia]. [Internet]. Diamantina, MG: Universidade Federal dos Vales do Jequitinhonha e Mucuri - UFVJM; 2020 [cited in 23 June 2025]. Available from: <https://repositorio.ufvjm.edu.br/items/16451420-69b5-4175-9c44-133ac50b8c73>
5. Souza ECA, Figueiredo GLA, Lenza NDFB, Sonobe HM. As consequências da estomia intestinal para os estomizados e seus familiares. *Rev Enferm UFPE* [Internet]. 2010 [cited in 1 July 2025]; 4(3):1081-86. DOI: <https://doi.org/10.5205/reuol.942-7955-2-LE.0403esp201020>
6. Lima JF, Macedo AB, Panizzon CPNB, Perles JVC. Câncer colorretal, diagnóstico e estadiamento: revisão de literatura. *Arq MUDI* [Internet]. 2019 [cited in 1 July 2025]; 23(3):315–29. DOI: <https://doi.org/10.4025/arqmudi.v23i3.51555>
7. Santos RP, Fava SMCL, Dázio EMR. Autocuidado de pessoas idosas com estomia por câncer colorretal. *Rev Coloproctol. (Rio J)* [Internet]. 2019 [cited in 1 July 2025]; 39:265-73. DOI: <https://doi.org/10.1016/j.jcol.2019.01.001>
8. Ribeiro WA, Andrade M, Santo FHDE, Pinheiro DDS, Vieira RFC, Silva VGD. Diagnósticos de enfermagem de pessoas com estomias intestinais: contribuições para o autocuidado na perspectiva de Orem. *Rev Cient Enferm.* [Internet]. 2021 [cited in 1 July 2025]; 11(35):297-308. DOI: <https://doi.org/10.24276/rrecien2021.11.35.297-308>
9. Saraiva ES, Gomes GC, Barros EJJ, Minasi ASA, Biscaglia TA, Gomes LC. Perfil sociodemográfico das pessoas com estomia de eliminação em um serviço de estomaterapia em um hospital universitário no Sul do Brasil. *Res Soc Desenv.* [Internet]. 2022 [cited in 1 July 2025]; 11(14):e83111435973. DOI: <https://doi.org/10.33448/rsd-v11i14.35973>
10. Ministério da Saúde (Brasil), Secretaria de Atenção à Saúde, Departamento de Atenção Básica. Envelhecimento e saúde da pessoa idosa [Internet]. Brasília, DF: Ministério da Saúde; 2007 [cited in 1 July 2025]. (Cadernos de Atenção Básica, n. 19). Available from: <https://bvsms.saude.gov.br/bvs/publicacoes/abcad19.pdf>
11. Moraes JT, Figueiredo SB, Rodrigues MO, Faria RDGS, Santos CF, Belo VS. Avaliação do grau de deficiência e qualidade de vida de idosos com estomia. *Rev Enferm Cent-Oeste Min.* [Internet]. 2023 [cited in 1 July 2025]; 13. DOI: <https://doi.org/10.19175/recom.v13i1.4672>
12. Andrade LI, Pinho AA, Mascarenhas ACA, Borges EL, Pires Junior JF. Caracterização dos idosos com estomia intestinal atendidos em centro de referência do estado da Bahia. *Estima* [Internet]. 2019 [cited in 1 July 2025]; 17(1):e2619. DOI: https://doi.org/10.30886/estima.v17.700_PT
13. Instituto Nacional de Câncer (Brasil). Câncer de cólon e reto [Internet]. Rio de Janeiro: INCA; 2023 [cited in 1 July 2025]. Available from: <https://www.gov.br/inca/pt-br/assuntos/cancer/numeros/estimativa/sintese-de-resultados-e-comentarios/cancer-de-colon-e-reto>

14. Carneiro LM, Ferreira AM, Rigotti MA, Sokem JADS, Giroti ALB, Serra RA, et al. Epidemiological characterization of patients with intestinal stomas. *J Coloproctol. (Rio J)* [Internet]. 2023 [cited in 1 July 2025]; 43(2):117-25. DOI: <https://doi.org/10.1055/s-0043-1769920>
15. Kretschmer AC, Loch MR. Autopercepção de saúde em idosos de baixa escolaridade: fatores demográficos, sociais e de comportamentos em saúde relacionados. *Rev Bras Geriatr Gerontol.* [Internet]. 2022 [cited in 1 July 2025]; 25(1):e220102. DOI: <https://doi.org/10.1590/1981-22562022025.220102.pt>
16. Xavier SSDM, Medeiros LPD, Lima Neto AVD, Silva IPD, Lucena SKP, Oliveira ACDS, et al. Sociodemographic and clinical characteristics of people with ostomy and the adaptive domains of Roy's theory: a cross-sectional study. *PLoS One* [Internet]. 2024 [cited in 1 July 2025]; 19(4):e0302036. DOI: <https://doi.org/10.1371/journal.pone.0302036>
17. Jorge TV, Marques ADB, Mourão LF, Pinheiro RM, Silva AL, Lopes DGZ. Sociodemographic and clinical profile of people with a stoma due to oncological cause: observational study. *Estima* [Internet]. 2023 [cited in 1 July 2025]; 21(1):e1313. DOI: https://doi.org/10.30886/estima.v21.1313_IN
18. Xue Y, Lv K, Yuan C, Fan G, Yu P. The experience and needs of self-care in elderly colorectal cancer stoma patients: a qualitative study. *Support Care Cancer* [Internet]. 2025 [cited in 23 May 2025]; 33:474. DOI: <https://doi.org/10.1007/s00520-025-09530-6>
19. Diniz IV, Costa IKF, Nascimento JA, Silva IPD, Mendonça AEOD, Soares MJGO. Fatores associados à qualidade de vida de pessoas com estomas intestinais. *Rev Esc Enferm USP* [Internet]. 2021 [cited in 1 July 2025]; 55:e20200377. DOI: <https://doi.org/10.1590/1980-220X-REEUSP-2020-0377>
20. Simon BS. Fortalecendo-se para seguir a vida: experiência de famílias ao conviver com familiar adulto com estomia por câncer intestinal [Internet]. [tese]. Santa Maria (RS): Universidade Federal de Santa Maria; 2020 [cited in 23 May 2025]. Available from: <https://repositorio.ufsm.br/handle/1/22209?locale-attribute=es>
21. Rabelo DF, Silva J. Vulnerabilidades em idosos: saúde, suporte social, chefia e sustento familiar. *Saúde e Pesqui.* [Internet]. 2021 [cited in 21 June 2025]; 14(Supl 1):1-14. DOI: 10.17765/2176-9206.2021v14Supl.1.e7823
22. Correia ACJD. Intervenção de enfermagem à pessoa idosa com ostomia de eliminação intestinal e familiar no contexto de cuidados de saúde primários [Internet]. [dissertação]. Lisboa: Universidade de Lisboa; 2020 [cited in 21 June 2025]. Available from: <https://comum.rcaap.pt/entities/publication/735c38b3-12dd-4951-8e43-cec01ebd991b>
23. Meira IFA, Silva FRD, Sousa ARD, Carvalho ESDS, Rosa DDOS, Pereira Á. Repercussões da estomia intestinal na sexualidade de homens: revisão integrativa. *Rev Bras Enferm.* [Internet].

2020 [cited in 1 July 2025]; 73(6):e20190245. DOI: <https://doi.org/10.1590/0034-7167-2019-0245>

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