UOAA United Ostomy Associations of America, Inc.

The MailBag

April 2022

The Ostomy Support Newsletter Of Jacksonville, Ocala, Amelia Island, Gainesville, & The Villages

In observance of Easter Sunday there will be no Jacksonville Support Group meeting or zoom meeting on April 17th.

Patti will be presenting at
The Villages Support Group on April 12th.

Medical Care Products, Inc.
(904) 733-8500
(800) 741-0110

Check Out The MailBag Now On FaceBook
https://www.facebook.com/JaxUOAA/?ref=aymt_homepage_panel
Find all the past issues of the MailBag at http://ostomymcp.com/id6.html

Jacksonville
Contact Information:
Patti Langenbach
(800) 741-0110
(904) 733-8500
patti@ostomymcp.com
Support group meets the 3rd Sunday of each month 3 p.m.
4836 Victor Street
Next Meeting: **May 15th**
Also join us by Zoom
https://us06web.zoom.us/j/94640600811
Meeting ID: 946 4060 0811
or call +1 301 715 8592 US

Gainesville Support Group
Contact info:
JoAnne Bell at 352-284-4214
Meets the 1st Sunday of each month
(except Holidays)
at Hope Lodge2121 SW 16th St
Gainesville, FL
Next meeting: **TBA**

Ocala Support Contact info:
Karen Franco 352-304-1309
Meets the 2nd Sunday of each month (except July & Aug) at 2 p.m. at the Sheriff's Station 3260 SE 80th Street between Ocala and Belleview.
Next Meeting: **TBA**

Citrus County Support Group
Has Disbanded
To find a support group
in your area visit:
https://www.ostomy.org/support-group-finder/

Amelia Island Area
Ostomy Support Group
(904) 310-9054
Meets second Monday of each month at 6:30pm
Next Meeting: **TBA**

The Villages Ostomy Support
We meet on the 2nd Tuesday evening of each month at 6:00 PM at (except July & August
Linda Manson
tvostomy@gmail.com
865-335-6330
Next meeting - **April 12th** @ 6 pm
Saddlebrook Rec Center (near Polo Field)
Masks Required
Contact Linda tvostomy@gmail.com

SIXTY YEARS WITH AN OSTOMY

By Ed Pfueller, UOAA Communications Manager

Beverly Dabliz is ready to celebrate a monumental 60th anniversary but even her closest friends do not all know what it is for. Recently she decided it was finally time to share the news. "Just last week I told a close friend I've known for 66 years – I'm the godmother of her twins, but even they did not know I have an ostomy. It was just not something people talked about," Dabliz says. She adds "People are surprised to learn the news, but it does not matter to them one bit."

Dabliz had ileostomy surgery in 1962 at Ferguson Hospital in Grand Rapids, Michigan. Ferguson was one of the first clinics in the world to perform such surgeries. By the time she turned twenty she was suffering from ulcerative colitis and by twenty-four ran out of treatment options. "After sixty years I have never regretted it, it has allowed me to live a great life," Dabliz says.

Almost no one with the exception of her doctor understood the procedure and how to care for it. She knew she was on her own on how to carry on and reach her full potential.
Even if you have a great support network Dabliz recommends, "You have to own it and take care of it." Ostomy supplies of that time bear little resemblance to the lightweight, contoured appliances of today. "I wore a heavy two-piece rubber appliance held on with an ostomy glue," she recalls. It was not until the 70s that pouching systems began to evolve into something similar to the one and two-piece systems commonly used today.

"It was just not something people talked about,"

Over the years Dabliz has helped other ostomates in need through the Detroit Metro Ostomy Support Group. While doing hospital visits she would always appear in fitted clothes and enjoyed how grateful the patients were to hear from someone else living with an ostomy. She is happy about the recent return of in-person support group meetings. At meetings, Dabliz is sometimes surprised by some of the concerns new ostomates have regarding things like food, "I just tell them to be sure you chew your food very well, in the beginning, I tried it all without being scared but I'm still often the last one eating. I chew my food so well I've worn down teeth."

Beverly Dabliz, right, works during a mission trip to Costa Rica with her Michigan church group.

Dabliz worked in the accounting department of a computer company in Detroit and Plymouth, Michigan for 45 years before retiring. Her boss was aware of her ostomy and supportive. "I never missed a day of work because of the ostomy," she says.

Six years ago Dabliz had a fight with kidney cancer and three years ago a shoulder replacement surgery. But she has otherwise been fortunate to live a healthy life since the ostomy surgery six decades ago. She still makes it a point to get out of the house almost every day. "I have always been very active and really have not had any ostomy issues," Dabliz says. In her eighties now, she still enjoys golfing and was in a bowling league for many years.

Beverly Dabliz working as a volunteer at the Eagle River Methodist Camp in Juneau, Alaska.

Dabliz can also still be found tending to her yard and is reluctant to give up shoveling the Michigan snow – though neighbors have started beating her to it. With the exception of some subtle changes, her ostomy regiment remains routine. She consistently uses the same products.

is an active member of her church and has gone on many mission trips over the years in countries such as Jamaica and Costa Rica. "I've had to use outhouses in Alaska and done mission work after Hurricane Katrina," Dabliz says. Even in these tight living quarters, nobody knew she had an ostomy.

An ostomy has never gotten in the way of her passion for traveling and cruising the world with her older sister. The pair have even circumnavigated Australia and New Zealand. Her advice; "I take extra supplies and always bring some on carry-on and have never had any trouble flying. Just do it. Go swimming, do whatever you want to do," she says.

In celebration of her 60th Stomaversary and 85th Birthday, Dabliz is hoping to take a Holland America cruise around Iceland with her sister. Her minister and family have known of her ostomy but she hopes to tell more friends about what this landmark occasion means to her. Dabliz is confident they will take the news in stride as they help her celebrate a life that could have been cut way too short if not for that long ago ostomy surgery.

March 10, 2022 (reprinted from ostomy.org)

Urostomy Questions and Answers

by Juliane Eldridge, RN, CETN; via Vancouver (BC) Ostomy HighLife

Q. **Why do urostomates occasionally notice blue discoloration in a urostomy pouch or overnight drainage bag?**

A. Be assured there is nothing wrong with the appliance. In recent laboratory tests conducted by ConvaTec, the blue color was found to be the result of normal bacterial decomposition of an essential amino acid called tryptophan. There is no clinical evidence, according to an article in the American Journal of Nursing, to indicate that the production of indigo blue is harmful, or that dietary tryptophan should be limited. If you are concerned, please talk to your doctor. Tryptophan is part of the regular intake of dietary protein. As it passes through your system, it changes to a blue color when it oxidizes in the urostomy pouch.

Q. **Why are fluids so important for the urostomate?**

A. People with urinary diversions no longer have a storage area (bladder) for urine. Therefore, urine should flow from the stoma as fast as the kidneys can make it. In fact, if your urinary stoma has no drainage for even an hour during the day, it is time for concern. The distance from the stoma to the kidney is markedly reduced after urinary diversion surgery. Any external bacteria have a short route to the kidney. As kidney infections can occur rapidly and be devastating, prevention is essential. Wearing clean appliances and frequent bag emptying are vital. Equally important is adequate fluid intake, particularly fluids that acidify the urine and decrease problems of odor. In warm weather, with increased activity or with a fever, fluids should be increased even more to make up for body losses due to perspiration and increased metabolism. It is important to be aware of the symptoms of kidney infections: elevated temperature; chills; low back pain; decreased urine output; and cloudy, bloody urine. Ileal conduits normally produce mucous threads in urine which give a cloudy appearance, but bloody urine is a danger sign. Thirst is a great index of fluid needs. If you are thirsty, drink up! Also, develop the habit of sampling every time you see a water fountain.

Miscellaneous Questions via Dallas (TX) Ostomatic News

1. Do skin wipes make the pouch stick better? No, the wipes that are generally classified as “skin preps” are not adhesives. They are designed to provide a protective layer to the surface of the skin. This helps to make the removal of adhesives easier on the skin. The use of these types of products may actually decrease the wear time of some extended wear products.

2. Does paste make the pouch stick better? No, paste helps to prevent liquid drainage from getting between the skin and the skin barrier. This protects the peristomal skin and often extends the life of the skin barrier. Paste is NOT an adhesive and too much paste can actually interfere with a good seal.

3. When should skin barrier powder be used? Skin Barrier Powder – such as Stomahesive or Adapt Powder – is used when the peristomal skin is moist due to irritation. When the skin has recovered and healed, the powder should be discontinued. If another type of powder – such as an antifungal powder – has been prescribed, it should be used according to instructions.

4. How often should a pouching system be changed? The answer is “it depends.” It depends on many factors such as type of discharge, skin condition, type of skin barrier used, location on the body and construction of the stoma. The key is to achieve predictable wear time. Changing a pouch twice a week is very acceptable.

5. What do I need to think about before returning to work? Make sure that you have a release from your physician to return to your job, especially if you do a lot of physical work. It is a good idea to have an emergency kit available at work in case you need to change your pouch.

6. Do I need to tell people that I have had ostomy surgery when I return to work? The choice is yours! With a secure ostomy pouching system, nobody needs to know that you have an ostomy unless you want him or her to know. Depending on the situation and your relationship with the person you may wish to share general information about your surgery. Most people are very understanding.

7. How often should I empty a pouch? The type of ostomy and the amount of output will influence how often emptying is necessary. You will want to empty your pouch regularly throughout the day – usually when it is ⅓ to ½ full. It is not a good idea to let your pouch overfill.

8 humble reminders of why life with an ostomy is worth living to the fullest

Every struggle is worth it. From OSTOMY CONNECTION Oct 27, 2021

Why do some lessons in life have to come from painful experiences? I guess it's because they're the same lessons that make us better, more humble.

Gratitude makes sense of the past, brings you peace today, and creates a vision for tomorrow.

Be unapologetically glamorous.

Life is full of uncertainties. It's up, it's down. It's good, it's bad. Seize the day!

Remember what's really important.

You'll never how many are behind you 1000%.

It's never too late to be who you want to be.

After everything you've been through, you deserve an awesome life.

When you have good news, tell the world.

Dear ostomates, you deserve to feel happy. The kind of happiness that inspires others because it's contagious and real.

BY OC EDITORS We're a group of writers who know exactly what makes ostomates so special.

UOAA's 8th National Conference-Postponed
AUGUST 10, 2023 - AUGUST 13, 2023
https://www.ostomy.org/event/uoaa-8th-national-conference/

Visit the Peristomal Skin Assessment Guide for Consumers
http://psag-consumer.wocn.org/#home

UOAA COVID-19 UPDATES
UOAA will update this blog post with any information that may affect our community.

https://www.ostomy.org/coronavirus-effects-on-the-ostomy-community/

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Medical Care Products, Inc
PO Box 10239
Jacksonville, FL 32247-0239

To: