

The Mailbag



Meetings are held at the Baptist Medical Center
8th Floor - Meeting Room C - 3rd Sunday Quarterly @ 3PM

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Mark Your Calendar For Our Next Chapter Meeting October 21st @ 3pm

You Have Adjusted to Your Ostomy When...

via Hemet-San Jacinto (CA) *Stoma-Life*

Inside This Issue

Summer Fluid Needs.....	2
Ostomy Output.....	3
Keeping Your Pouch Oder Proof.....	3
Helpful Hints.....	4
You Can't Quit.....	4
Weekly Chat Meetings.....	5

- You stop spending all of your spare time in the bathroom waiting for your stoma to work so you can empty the pouch right away.
- You can move about freely, without holding your appliance as though it might fall off any minute.
- You make that first trip to the mailbox without taking along your ostomy supplies.
- You stop grabbing your abdomen when the grocery clerk asks if you need help to the car with your bag.
- You go out for the evening and realize too late that you left your emergency kit at home.
- You begin to think how lucky you are to be alive instead of how unlucky you are to have an ostomy.
- You attend the monthly support group meetings with an expectation of learning more about your ostomy rather than staying at home worrying about it all.

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<http://www.ostomymcp.com/chapter/Jaxchapter1.htm>

Heat Concerns for Ostomates

Summer Fluid Needs

by Eileen Carter, RN/ET; via Worcester (MA) *New Diversions*

Summertime is a time of increased physical activity and weather extremes. We can prevent life-threatening heat related injuries, such as the deaths from the heat wave Chicago experienced in 1995, by taking small precautions.

Risks:

- Being out in the full sun.
- An unusual amount of physical exertion.
- High humidity.
- Working or standing near furnaces or ovens.
- Recent flu or high doses of water pills.
- Decreased thirst sensation leading to lowered fluid intake.

The process by which your body fights heat:

During this process, extra fluids are needed to keep your important organs from being deprived.

- You perspire losing salt and water.
- Your body brings the circulation near the skin to release heat and cool off.

Early signs of trouble:

- Dark, odorous urine.
- Profuse sweating.
- Difficulty concentrating.

Signs of serious trouble:

- Trembling or vomiting.
- Headache or rapid breathing.
- Pale, hot and/or dry skin.
- Confusion.
- Lack of appetite.
- Dizziness.

Treatment:

- Go to the shade.
- Lie down with your feet up.
- Apply cold water to your body; i.e., cover yourself with soaked towels.
- Remove excess clothing.
- Call your doctor if the symptoms are not relieved in a few minutes.

Prevention:

- An ileostomy requires two to four more cups of fluid each day because of high liquid output.
- Drink fluids before going out to summer activities.
- Favor water, fruit or vegetable juice, and sport drinks, over alcohol and or caffeine beverages.
- Choose cold drinks.
- Bring liquids with you and take frequent sips.
- Drink ten glasses of water each day, and even more if you have an ileostomy or urostomy.
- Stay in the shade.
- Wear loose clothing, especially loose at your neck, wrist and ankles.
- Keep your shirt on in the sun.
- Don't self-prescribe salt pills, although ileostomates should maintain adequate salt intake.

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OSTOMY OUTPUT

via *NV Town Karaya*; and *Green Bay (WI) News Review*

What to do if your ostomy output becomes thin, watery, or greatly increases in volume:

- Never limit your fluid intake in order to thicken the drainage, since this can lead to dehydration.
- Avoid food which you know from experience makes drainage too loose and too frequent.
- Begin a low-residue diet, avoiding especially green beans, broccoli, spinach, highly spiced foods, raw fruits and beer.
- Add strained bananas, applesauce, boiled rice, tapioca, boiled milk and peanut butter to your diet.
- Pretzels help in thickening and add bulk to the drainage. The salt, also, helps to stimulate thirst.
- Many people lack an enzyme which is responsible for the metabolism of milk sugar (lactose). This condition can cause diarrhea, gas, bloating, nausea and cramping. The elimination of milk products may cause a dramatic improvement in the symptoms.

What to do if your ostomy output becomes thick, or if you develop constipation:

- Increase your fluid consumption, especially fruit juices.
- Increase the amount of cooked fruits and vegetables you are consuming.
- Very few foods need to be omitted from your diet because of fear of food blockage. Perhaps more important than the food in avoiding blockages is chewing well. You can reduce your intake of foods which are very high in fiber, and foods with seeds that are hard to digest if they appear to be a problem. Examples are Chinese vegetables, raw onions, nuts, pineapples, corn-on-the-cob, raw carrots, raisins, celery, mushrooms, popcorn, coconut macaroons and coleslaw.

International Ostomy Association

www.ostomyinternational.org

The IOA Today Newsletter Second Quarter 2007 is now available. If you would like to keep up with Ostomy related information from around the world, then please sign up for the FREE IOA Today Newsletter.

<http://www.ostomyinternational.org/Today.htm>

You may also view past issue from the above URL.



www.koolostomy.com

Keeping Your Pouch Odor Proof

by Victor Alterescu, RNET; via *Quad City (IL) Newsletter* and *S. Brevard (FL) Newsletter*

Rinsing a pouch out each time it is emptied is primarily a waste of time. For one thing, it takes longer to empty the pouch and you need more materials around you. You also leave more odor in the room since the pouch is kept open longer. The water, especially if it is warm, may open the pores of the pouch material and encourage odor permeation. Also, rinsing can affect the seal of your adhesive.

Rinsing a pouch after each emptying serves only an aesthetic purpose; the interior of the pouch may be clean but it does not serve a functional purpose. Frankly, it does not matter whether the interior of your pouch is clean any more than it matters if the interior of your colon is clean. The pouch is replacing an organ of storage, the colon and/or rectum.

The most important portion of the pouch that should be cleansed very thoroughly is the tip of the drainable pouch. Rinsing the interior can only increase permeation but cleaning the exterior neck will avoid any odor that may be present as a result of having fecal residue on the end of the pouch. Therefore, I often recommend that a person carry an alcohol wipe (individually wrapped in foil) to clean the tip of the pouch. The pouch is emptied, the toilet flushed immediately, and the lower portion of the exterior pouch cleansed with toilet tissue and alcohol.

Watch this newsletter in the future for valuable coupons for \$\$ off a visit with Kathy the ET Nurse!!!



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Helpful Hints from Here and There

via Tulsa (OK) NEWSLETTER

Emotional pressures and overfatigue can cause bowel upsets, especially when traveling. Do not allow yourself to become overtired.

If you like mushrooms, remember they do not digest properly, so chew them well, especially the cooked ones. Asparagus generates a strong odor in the urine. Yogurt, cranberry juice and buttermilk help to combat urinary odor. Parsley is excellent in combating fecal odor, besides being a good source of potassium.

Keep grape juice in the refrigerator. If you eat something that causes a blockage, try drinking a glassful. It really works.

Never wait until you've used your last appliance before ordering new ones. Keep a list of your equipment, complete with order numbers, sizes and manufacturers. Let a member of your family know where you keep the list so that they can get the necessary supplies in the event of an emergency.

Do not spread paste on the entire back of a barrier--it will produce less than satisfactory results. Use paste only sparingly to fill uneven areas and around the stoma. Paste is a great filler if used correctly.

Use a round clothespin to roll up your tube of paste. (Works for toothpaste tubes too.)

If you still have your rectum and have pain or a full feeling, you may have a collection of mucus which should be washed out. Check with your doctor regarding this. Buttermilk will soothe an irritated digestive tract and will not cause diarrhea or constipation.

Colostomates should not use water that is too cold or too hot for irrigation as it may cause cramps, pain or nausea. Do allow 45 minutes to one hour for a complete return of water. Arrange to sit for comfort and relaxation. Do not hurry through irrigation. Anxiety, frustration and spillage may result. Getting uptight can cause little or no return. Rounding off the square edges of a firm wafer or skin barrier can decrease the chance of a belt catching on the corners.

For urostomates, if your drainage tube is clogged, try soaking it in a solution of Tide for about two hours. Then rub the tube between your fingers, insert a baby bottle brush as far as possible, pull out and rinse.

You Can't Quit

by Hon. Hubert H. Humphrey; via Cocoa (FL) *Spacecoast Shuttle Blast*; and Jamestown (NY) *Ostomy Newsletter*

The following is an ageless essay from an American whose indefatigable style of living and whose courage in the face of adversity inspired millions around the globe during his struggle with cancer. We hope it will inspire you even now, for his wisdom lives on beyond his own days in this life. Although in this, he focuses on his fight against cancer, the author's can-do attitude can be a boost to ostomates regardless of whether they have fought cancer, for he carried on a very active public life--as a urostomate.

The worst moment of my life was when I discovered I had cancer. I know what this dreaded disease can do to a person and what the chances of survival are. But if you think of yourself as a statistic, then you are really in trouble.

You have to believe you can win this fight. You have to gear yourself to the continuity of the struggle, knowing that there will be days when you won't feel good.

My faith and hope get me from day to day. Deep down I believe in miracles. They have happened to a lot of people who were given up to die and then were restored to good health. But there are days when I get discouraged.

When I start feeling sorry for myself, I tell myself, "The doctors told you this would happen. You can't do anything about it, so get on with living." If you can't get over self-pity, the game's all over.

I think the biggest mistake people make is giving up. Adversity is an experience, not a final act. Some people look on any setback as the end. They are always looking for a benediction rather than an invocation. Most of us have had enough problems so that almost any day we could fold up and say, "I've had it." But you can't quit!

Life is always a struggle. If anything is easy, it's not likely to be worthwhile. The important thing in any setback is whether you can pick yourself up. That helps me with my illness. I keep thinking, "Well, tomorrow's another day." There are many people who say, "it's all right for you to talk about tomorrow being another day, but if you knew how much pain I suffer." I do know.

Let me tell you something. When you give, you receive back a thousand fold. If you have a well and draw water from it, it fills. If you don't draw water, it gets stagnant. You have to learn to give yourself.

I hope I can demonstrate for others that you don't have to throw in the towel when you have something like cancer. Be grateful for every day of your life. Be buoyant about it, and do the best you can with what you have.

Ostomy Chat Room Weekly Meetings

Yahoo Peoples with Ostomy2* - Mondays, 8:00 pm US Central time

<http://clubs.yahoo.com/clubs/peopleswithostomy2>

Community Zero (Ostomy) Support* - Wednesdays, 9:00 pm US Eastern time

<http://groups.yahoo.com/group/ostomatessupport/>

Shaz & Jason's Chat* - Saturdays, 8:00 pm UK time / 3:00pm US Eastern Time

<http://www.ostomy.fsnet.co.uk/chat.html>

Yahoo UK Ostomy Support* - 1st & 3rd Sundays, 8:00 pm UK time / 3:00 pm US Eastern Time

<http://clubs.yahoo.com/clubs/ukostomysupport>

Use this form to join our chapter! **You do not have to be an ostomate to be a member and/or support the work of UOA. All information on this form will be kept confidential.**

Name _____

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Type of intestinal or urinary diversion: Colostomy __, Ileostomy __, Urostomy __, Ileoanal Pull-thru __
Continent Ileostomy __, Continent Urostomy __, None __, Other __

You may use my name in chapter Newsletter & Directory: Yes __ No __

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