

The Mailbag

The Ostomy Support Newsletter Of Jacksonville, Florida

Support group meets the 3rd Sunday of each month 3 p.m. 4836 Victor Street

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Next chapter meeting will be held on
Sunday August 21st
3pm, 4836 Victor Street.



Jacksonville Chapter is now a member of the United Ostomy Association of America. Please take the time and visit their Website <http://www.ostomy.org>.

Public TV Documentary Movie

UOAA entered into a contract for the publication of a five-minute ostomy public awareness movie that will appear on public TV; the National Medical Report as shown on cable; network and international TV as part of Voice of America.

This excellently produced project—coordinated by UOAA President Elect Kristin Knipp—can now be viewed on the UOAA Internet site at www.uoaa.org/uoaa_psa.shtml. One may also view the movie at <http://uoaa.wordpress.com/>.

We encourage you to send one of these links to anyone with an interest in ostomy surgery; i.e., our members, local medical professionals, family and even friends who you might want to have better understanding about our organization.

An Observation about Ostomies

By John Balint, Aurora Ostomy Support Group

Early last week I received a call from the home medical group I use for my ostomy supplies. It was interesting to have them ask about the skin prep wipes I use. It appears there was a recall, and I was to call with the lot numbers. As it turns out, I had three boxes that needed to be returned.

This made me think about the length of time I have had an ileostomy and the number of occurrences like this with which I have had to deal. So you know it has been 33 years since I had my surgery. Thirty-three years! It is amazing to think I have gone to the bathroom standing up longer than sitting down. Sorry as I digress a bit.

Anyway, in thirty-three years this is my first official recall of any ostomy supply. I have had five or six automobile recalls.

What does this tell you about our supplies? To me it says the companies that manufacture ostomy supplies have put some serious time and effort into making them the right way. The manufacturers have developed products that do what we expect them to do. For the most part, they perform satisfactorily. In my short time back with the ostomy association, I have heard many a story about leaking and the other associated problems we all encounter. But, very rarely do we talk about defective merchandise. I must say that is pretty good. Please understand I just recently graduated to the pouching systems of the 21st century.

See, I was given Marlin double face adhesive discs, neoprene rubber face plates, inner tubes for pouches, karaya seals for skin protection and the standard items to stick on the skin. I was never going to change what I used because I made it work well for me after many trials and tribulations. Yet as we know technology is always improving and making things easier to use. A stodgy old stick in the mud like me who did not deviate from the pouching systems that worked so well for so many years, took the leap of faith to try something new. And yes, it has been for the better, I love my new pouching system.

John wrote this missive celebrating the 39th anniversary of the Aurora Ostomy Support Group.

Ask the Expert

By: Heather Grace, RD, CD, CDE, Prevea Health, Green Bay, WI, Green Bay Area Ostomy Newsletter

QUESTION: I have an ileostomy. After surgery, which was years ago, I have gained a considerable amount of weight. Could you please give me some guidelines and tips on how to safely lose a lot of weight without causing more gas and more ileostomy output; the types of food that I should be eating that will not cause a bowel blockage; and the things that might be substituted into recipes to keep me from feeling hungry without being tied to the bathroom?

ANSWER: These are good questions. Honestly, the questions cannot be answered with a "black-and-white" recommendation. Here is why, everyone is unique. An individualized meal plan with attention to portion size is beneficial. I recommend meeting with a registered dietitian who can provide you the information based on your needs and situation. What works for one person may not work for the next one. It is trial and error. These are some important tips for weight loss:

- Take small bites of food, chewing 20-30 times before swallowing. This can help with digestion and help to avoid a blockage at the stoma site.
- Enjoy your food with every bite and eat only until comfortably full, not stuffed. This may help decrease gas.
- Use smaller plates, bowls and cups than usual. This helps to control portion size without the work.
- Divide your plate in half. Make half of the plate look like a rainbow of color from the vegetable group.
- Divide the other half of the plate into two parts—include a lean protein (baked chicken or grilled fish) on one part and a whole-grain (wheat pasta or brown rice) on the other part. Balance the meal with a glass of low-fat or fat-free milk or yogurt, plus a serving of fruit.
- Choose whole fruits and vegetables whenever possible for their fiber, vitamin and mineral content instead of juices. Juices are not as satisfying for your body, plus they lack fiber.
- Keep a regular schedule for meals and snacks; space meals times four to five hours apart.
- Enjoy five to six small, frequent meals and snacks instead of two to three large meals per

day. Avoid overeating in one sitting and avoid skipping meals; both of these activities can result in producing excess gas.

- Have your largest meal in the middle of the day. This may help decrease stool output at night.
- Keep a food journal, recording portion sizes, as well. Use measuring cups, a food scale and begin to measure portions. Most times people eat more than they think or what their bodies require.
- Read the food label to get a feel for what a serving size is. Most often the bottle, box, or package contains more than one serving.

Record in your food journal why you are eating. Pay attention to your feelings. Are you eating out of hunger, boredom, stress, habit, etc.? Then make a note of the condition of your stoma and pouch output. This way you can start to see patterns and determine which foods work best. If you notice a change in pouch output, try a food several times to be sure it is a consistent change and you will have a pretty good idea of how it affects you. When you find foods you can digest well, test-try different types of foods and add them to your diet one at a time. This way you will notice the changes that particular foods can cause.

And, of course, exercise is important to controlling weight loss for all individuals. Check out DVD's or exercise tapes at the local library. Look into exercise programs available through your local school district or village where you live; they often offer programs at lower cost.

To prevent health problems you do not have to exercise very hard. If you are trying to lower your risk of heart attack and stroke, lower your blood pressure, and/or lose a few pounds, all you really need to do is to walk briskly and swing your arms while doing so. The goal is about an hour each and every day. This will help you on your goal to get in shape from a health perspective.

Health experts agree that even dividing up your exercise into small increments is still beneficial for health. Try breaking up the walking routine into 30 minutes twice a day or 20 minutes three times a day if time is a concern or if you are new to exercising.

You should be able to talk or sing a song while walking. If you cannot, you are walking too

fast. Likewise, if it is too easy you need to increase the pace. Remember to swing the arms.

Invest in a pedometer which is an inexpensive tool and an effective way to measure how active you are in a day. An active lifestyle is equivalent to 10,000 steps daily.

Drink lots of water, as fluid loss is common in those who have lost much of their large intestine. Drink water before you eat . . . never afterwards. Beforehand, drinking water will fill your stomach and you will not be able to eat as much food.

Turning the Tide

UOAA UPDATE 5/18/08

Studies show that it's never too late to rebuild lost muscle through resistance strength training.

Challenging your muscles at least three times a week can net positive and noticeable results. You can give your muscles a workout with exercises that use your own body weight as resistance or even simple free weights or elastic resistance bands.

A study of nursing home residents found that 10 weeks of progressive strength training for thigh and lower leg muscles increased muscle strength an average of 113 percent. Their ability to climb stairs improved, as did their walking speeds. Some traded in their walkers and canes.

Added benefits of regular strength training include maintaining and increasing bone mineral density. And because muscle burns three times more calories than does fat, increased muscle mass boosts metabolism, making it easier to maintain a healthy weight.

In addition to strength training, aerobic training such as walking or biking should be done at least three times a week. To keep joints and muscles flexible, gentle stretching is recommended before any exercise.

Adequate nutrition also is important. Work with your doctor or dietician to design meals suited to your health condition.

Proper Care & Storage of Ostomy Supplies

from an article by Teresa Murphy-Stowers, Fort Worth, TX; via Dallas (TX) *Ostomatic News*

Ostomy supplies are not inexpensive, to say the least. So, it is important to understand how to apply them properly with the fewest errors possible and equally important to know how to take care of and store supplies until use. Proper care may avert the need to discard unused supplies and thus be as economical as possible.

- Be sure to read carefully the instruction sheet included in the box or guidelines on the container for specific recommendations for a given product.
- Generally, all ostomy supplies should be stored in a cool, dry location. Too much heat can melt or weaken many of the materials used in ostomy wafers, pouches, and accessory items. Avoid leaving supplies in a hot car or in direct sunlight.
- Review instructions periodically to refresh your memory and to see if any recommendations have changed over time.
- Keep supplies such as wafers and pouches in their original box. By doing so, you save the brand name, product identification number, and the lot and date information for those items. Perhaps you will never need this information, but in the event you do, the box you have saved will provide the information you (or someone helping you) will need for reorder or to report any quality control problems.
- Some ostomy supplies do have a “shelf life.” Be sure to check for dates that may be recorded on their containers. If you find you have a box with an expired date, check with the manufacturer, your local supplier, or an Ostomy nurse for advice on usage.
- While you do want to keep a “stock” of supplies so you are always prepared to change out your system, avoid the practice of stockpiling too much so your reserve will be as fresh as possible. This, of course, depends on factors such as the availability, proximity to a local supply house, or shipping issues.
- Purchase supplies from a trusted vendor—one you know will provide good service as well as stock/ship current stock.

Reporting Defective supplies

- If you determine your supplies are defective in spite of proper use and storage, contact the manufacturer at their toll free number to report the problem and receive product replacement or adjustment.
- Let your supply source know of your report to the manufacturer. They need to be aware of problems; however, the complaint needs to be directed to the manufacturer to ensure the defect can be addressed.

2012 UOAC Conference in Toronto

"Caring in a Changing World"

August 15 – 18, 2012

Delta Chelsea Hotel

Downtown Toronto

**[http://www.ostomycanada.ca/events/
biennial_conference_of_uoac](http://www.ostomycanada.ca/events/biennial_conference_of_uoac)**

Check Us Out On The Web

www.ostomymcp.com

Other Websites Of Interest:

United Ostomy Association of America: www.uoaa.org

Your Ostomy Community Connection Center: www.c3life.com

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/>

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

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

UOAA Chat Sundays 9pm ET / 6pm PT

<http://www.yodaa.org/chat.php>

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 _____

Address _____

City _____ State _____ Zip _____

Phone# Home _____ Work# _____

Email Address _____

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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