

The MailBag

Jacksonville group meets the 3rd Sunday of each month 3 p.m. 4836 Victor Street.
 Ocala support group 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).
 Amelia Island Area Ostomy Support Group meets last Monday of each month at 6:30pm - Bapt Medical Center Nassau board room.
 Gainesville Support Group meets the 1st Sunday of each month (except Holidays) Hope Lodge 2121 SW 16th St Gainesville



Happy Holidays



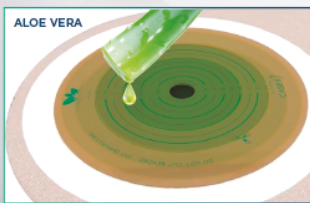
Jacksonville UOAA Chapter will meet at Medical Care Products 4836 Victor Street on December 20th at 3pm for the Christmas get together.

Ostomy pouches **CASEX**

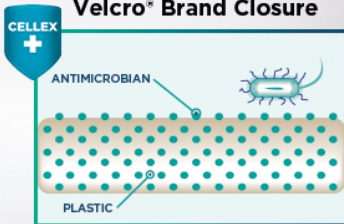
VISION

PRESS LOK™ 731 System with Velcro® Brand Closure



Blodressing Hydrocolloid with Aloe Vera



Plastic Film 3 layers of EVA/PVDC/EVA with antimicrobial agent CELLEX +

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

Jacksonville Contact Information:
 Patti Langenbach
 (800) 741-0110
 (904) 733-8500
patti@ostomymcp.com

The Jacksonville UOAA chapter meets the 3rd Sunday of each except when otherwise posted.

To help offset the mailing cost you may now receive the MailBag Newsletter via email. Please contact:

Patti: patti@ostomymcp.com
 (Newsletter will be in PDF format)

Support group meets the 3rd Sunday of each month 3 p.m.
 4836 Victor Street
Next Meeting Dec. 20th

Gainesville Support Group meets the 1st Sunday of each month (except Holidays)
 Next meeting: **Dec. 6th at 2pm** at Hope Lodge 2121 SW 16th St Gainesville, FL 32608
Contact info:
 Brinda Watson (352) 373-1266
 Nelson Griffiths (352) 376-8703

Ocala support group 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 Dec. 13th
Contact info:
 Lynn Parsons (352) 245-3114
www.ostomyocala.com

Amelia Island Area Ostomy Support Group meets last Monday of each month at 6:30pm (except May, June, July & Aug) Bapt Medical Center Nassau board room.
 Free parking (904) 310-9054
No meeting for December
Next Meeting Jan. 25th



“Gutsy’s Gab:” “Speak Out and Be Heard!”

By Linda Blumberg AKA “Mrs. Lips”

November 2015: Time of “rebirth/giving thanks”...at our November 15 Jax ASG meeting, ostomates and family gathered to see a new product line for Europe called B.Braun Flexima. There were three new ostomates in attendance. Ostomates and friends gathered, expressing gratitude for being alive and having each other especially “Gutsy,” Linda’s ileostomy stoma who was about to have her 9th birthday/“stomaversary” 2 days later on November 17, 2015!...grateful, too for ConvaTec’s 24/7 inspirational informational social media Inspire.com: for presurgical prebies/novice newbies/ostomysome oldbies to “gabble gabble” globally about ostomy concerns/experiences!...as we “gobble gobbled” Kimberly’s Konfections, reflected...it’s almost December...time for: “remembrance,” “gift giving”...“celebrating life” to live well with and ostomy!...

SPOTLIGHT ON: December 2015: Chanukah (6th), Remember Pearl Harbor (7th), Bruce’s Birthday (15th), Linda’s Winter Break (19th-January 3rd), Jax ASG Holiday Party (20th), Winter Begins (22nd), Christmas (25th), New Year’s Eve (31st)...The greatest gifts come from the heart, lovingly wrapped “packages” with brightly colored, festive attitudes: Ostomy AAA: Awareness/Acceptance/Advocacy...

Awareness involves “remembering” to: 1) check for blood in stools/urine; “lighting” the way to a better life by: 2) choosing life-saving colonoscopy, with follow up life-affirming ileostomy, colostomy, or urostomy surgery, if needed...so, “chill out” with family/friends...but, denial/avoidance of health responsibilities could lead to cancer...or the “icy grip” of premature death!...

Postsurgical Ostomy Acceptance occurs when we realize that even with a stoma, WE are still normal, loveable, beautiful people who can feel EMPOWERED to live well with an ostomy! STOMA ARRIVAL= YOUR SURVIVAL to “party hearty” as you CELEBRATE BEING ALIVE!...Accept YOUR stoma and nonostomates likely will, too; true ostomy acceptance is nonjudgemental! (See Linda’s 1st Phoenix article/photo, June 2011, p.30)...

In this “festive” mood, Gutsy encourages Advocating for Ostomy(!): Gutsy saved Linda’s life; but, humor and a (com)passion for writing/others continue as her salvation!... 1) Share YOUR ostomy journey: a) at support group meetings, b) on Inspire.com, c) by submitting your unique experiences/perceptive perspectives/humor, sharing YOUR stories of ostomy glories(!), in writing, to this (or YOUR local) newsletter/publications, e.g., Phoenix Ostomy mag, and d) by educating general public to dispel its negative preconceived notions; 2) drive loved ones to/from colonoscopy, “giving thanks” by remaining loving/loyal if he/she has ostomy surgery; 3) Advocate for YOUR stoma: a) “Light” up his/her holidays with “festive” pouch cover from Koolostomy.com(!), b) Make YOUR stoma a STAR!...email his/her name: Patti@ostomy MCP.com or Linda: blumbergl@duvalschools.org for inclusion in future Gutsy’s Gab column...in December, Gutsy rings in the New Year with: “Chai,” “Mt. Vesuvius,” “St Oma,” and “RIP Reversal: Stomie” (Inspire.com)...cathartic and fun! (See Linda’s 2nd Phoenix article/photo, December 2013, p. 78)...

BOTTOMLINE/MARK YOUR CALENDAR: December: time to CELEBRATE!...our next Jax ASG holiday gathering is Sunday, December 20, 2015 at Patti’s store...you’ll be singing: “C-e-l-e-b-r-a-t-i-o-n Times, Come On!...as you join us to CELEBRATE BEING ALIVE...and “party hearty!”...The best “present” will be YOUR “presence!”...See YOU there!!...”Happy Holidays” from Linda and Gutsy...”Seasons Speechings” from “Mrs. Lips!”...

UOAA 2015 Conference Photos

<http://uoaa.smugmug.com/Other/St-Louis-2015/>

Kim's Version Pumpkin Puffs

Pumpkin Filling:

Ingredients:

- 1 Cup milk
- 1 15oz can of pumpkin
- 2 Small box of instant vanilla pudding
- 3/4 Teaspoon cinnamon
- 3/4 Teaspoon ginger
- 1/3 Teaspoon cloves

Directions:

Mix all ingredients in a bowl. You can make this the night before so th flavors can meld together. Then pipe into the puffs or cut the tops off and spoon in.

Puffs / Choux Pastry

Ingredients

- * 1 cup whole milk
- * 7 tablespoons unsalted butter cut into 7 pieces
- * 3/4 tablespoon of cinnamon
- * 1-1/2 tablespoon sugar
- * 1 teaspoon salt
- * 1 1/2 cups all-purpose flour
- * 6 large eggs at room temperature

Directions

- * Put milk, cinnamon, butter, sugar, and salt into a 2-quart saucepan and bring to a full boil, stirring frequently until the butter melts.
- * Stir while adding the flour all at once. Stir without stopping until the flour is thoroughly incorporated. Cook and stir until the dough balls up and a light crust is visible on the bottom of the pan. Scrape dough into a bowl.
- * Immediately beat in five eggs, one at a time, stirring vigorously with a wooden spoon to incorporate each one. After the fifth egg, lift the spoon. If it pulls up some of the choux paste that detaches and forms a slowly bending peak, do not add the last egg.
- * Have 2 to 3 parchment lined cookie sheets and pipe the choux paste into balls (or what resembles a ball). Put all cookie sheets in at the same time.
- * Bake at 400 degree for 20 minutes, then lower temperature to 350 degrees and bake another 3-7 minutes depending on the size of the ball.
- * Cool then fill with your choice of filling.

Visiting a Patient with a Temporary Ostomy - A Personal Reflection

from Regina (SK) *Newsletter*; via S Brevard (FL) *Ostomy Newsletter*

As a certified visitor with the local ostomy chapter, I have had many occasions over the years to visit patients who have just undergone surgery that left them with a temporary ostomy. Usually a temporary ostomy is done on an emergency basis, as the result of a blockage or obstruction in the colon. This may be the result of diverticulitis, colon cancer, inflammatory bowel disease or Crohn's disease, and the result is a temporary ostomy to allow the bowel to heal. The intent is to reconnect the bowel at a later time, and many patients are told by the attending physician to expect to have an ostomy for anywhere from three to nine months.

My first thought as I headed off to visit a patient with a temporary ostomy was that this would be a piece of cake, and the visit would involve lots of questions about management of the ostomy. I also figured that the patient would be greatly relieved knowing they would not have to deal with an ostomy on a permanent basis. Boy, was I wrong!

This particular patient was angry beyond all belief, upset with what had happened to her and definitely not prepared to deal with anything as disfiguring as a colostomy. To be sure, she wasn't angry with me, but the medical profession as a whole suffered her wrath and it was quite evident that the nursing staff gave her a wide berth. She was NOT going to like this ostomy thing! Not having encountered this kind of reaction before, I wasn't exactly sure how to proceed, but I found myself listening to her frustrations and empathizing with her situation. This calmed her somewhat and she told me that I was the first person who had not treated lightly her fears about the ostomy. She felt people did not take her seriously because hers was only a temporary situation.

The visit actually went fairly well after that and although she was still angry with many things, I left feeling that she would manage her colostomy quite well in the short period of time she would have it. It impressed upon me that people with temporary ostomies struggle with the same fears and anxieties that all of us who have permanent ostomies do. In addition to this, because the surgery is done on an emergency basis, they have absolutely no time to prepare themselves for the eventual outcome, the ostomy.

Do I sound like an all-knowing and understanding saint?? Well, I don't feel like one on some of these visits. In general, I find most persons who have just had surgery resulting in a temporary ostomy to be very upset and unusually angry. They just hadn't expected this! I am sympathetic, as mentioned before, but the thought also crosses my mind, "Deal with it!" Recently, I paid a visit to a woman who, after her emergency surgery, asked me how I could tolerate having a permanent ostomy! At that moment it seemed bizarre that I should be counseling her when I am the one who has to live with this thing on a full-time basis. She could look forward to a reversal. On the other hand, hard as it may sound, her comment actually helped me and I didn't have to hesitate a second for the answer. I know I cope with it because I wouldn't be here if it weren't for my surgery for colorectal cancer. I was 37 at the time and I suppose I had every reason to be angry but I wanted so desperately to live. The surgery and colostomy gave me a second chance at life, for which I am grateful.

I would like to be able to remind some of the people who have to live with temporary ostomies that their surgery likely saved their lives too, and that a few months is really not such a long time to live with an ostomy. But I also have to remember how very frightening this surgery is and how it is still considered such an awful thing to have an ostomy. Despite our attempts to educate the public about the normal lives we lead, who among us wouldn't choose not to have an ostomy? So I internalize my thoughts and sympathize and try to make the patient feel better about coping with their new situation. But a question still lingers: Why do some people marvel at their good fortune while others retreat into anger and disgust? We humans are a complex lot.

UOAA Discussion Board

<https://www.uoaa.org/forum/index.php>

Short-term Ostomate: A Point of View

by Katy Duggan; via Pomona Valley (Upland, CA) *News and Views*; and Chippewa Valley (WI) *Rosebud Review*

One day I was on vacation in New York and simply feeling constipated. The next day I was in a Seattle emergency room signing a consent form for a resection (surgical removal of part of my bowel) and a possible ostomy. As an RN, I took care of many a child with a colostomy and could only remember the awful skin breakdowns that many of the kids had on their abdomens. I remembered the struggles to keep the old style appliances on their fragile bodies. I was feeling scared, confused and incompetent to take care of one on my own body. My surgery resulted in no ostomy, and I was relieved. I had only a colon cancer diagnosis to deal with post-operatively.

Five days later, I found myself again faced with a consent form for emergency surgery for complications. This time there was no doubt that I would have an ostomy — an ileostomy. The surgeon assured me that it would be only for eight to ten weeks, and then it would be closed. The assurance vanished with the first visit of the oncologist. He did not want me to have a third surgery, recover from that operation, and **then** start chemotherapy.

Now my challenge was to face nine to ten months of taking care of the ostomy on my body. Even as professionally trained as I was, I had all the same fears as those who must face living a lifetime with an ostomy. I kept telling my family I just wanted to pay a nurse to come in each week to deal with the bag change and any problems. I wanted someone else to deal with "it." I had to have help for several weeks but gradually became less "scared," not as "confused," more "competent" as each week passed. Although, as I write this, I am closer to the surgery date to reconnect my bowel, I have walked the road each ostomate walks. Between chemotherapy side-effects and learning new skills for managing an ileostomy, I am a stronger, more competent individual.



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http://www.ostomy.org/uploaded/files/events/uoa_midatlantic_regional_2016_first_flyer.pdf?direct=1

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To: